



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**WEBER FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	13500.00	622858.06
(b) Total Contribution Refunds (from Line 20(d)) .....	6799.35	5465.14
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	6700.65	617392.92
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	15700.62	451739.45
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	190.82
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	15700.62	451548.63
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	368128.60	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	144000.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**WEBER FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13500.00	404092.59
(ii) Unitemized.....	0.00	19215.47
(iii) TOTAL of contributions from individuals ▶	13500.00	423308.06
(b) Political Party Committees.....	0.00	10000.00
(c) Other Political Committees (such as PACs).....	0.00	189550.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	13500.00	622858.06
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	418.38
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	418.38
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	190.82
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	29.48	84.50
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	13529.48	623551.76

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 15

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	15700.62	451739.45
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	5720.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	82918.38
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	82918.38
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	6799.35	5465.14
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	6799.35	5465.14
21. OTHER DISBURSEMENTS .....	0.00	91593.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	22499.97	637435.97

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	377099.09
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13529.48
25. SUBTOTAL (add Line 23 and Line 24).....	390628.57
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	22499.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	368128.60

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 15  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Chaudhary, Azhar, , Mr.,**  
Mailing Address 5810 Crawford Hill Ln

City: Sugar Land State: TX Zip Code: 77478

FEC ID number of contributing federal political committee: C

Name of Employer: Azhar Chaudhary Law Firm, PC Occupation: Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 5400.00

Date of Receipt: 12 / 05 / 2016  
Transaction ID : SA11AI.13922

Amount of Each Receipt this Period: 5400.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Huang, Shanzhe, , Mr.,**  
Mailing Address 4007 Autumn Pines Trl

City: Houston State: TX Zip Code: 77084

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed Occupation: Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 2700.00

Date of Receipt: 12 / 04 / 2016  
Transaction ID : SA11AI.13928

Amount of Each Receipt this Period: 2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Zhang, Weitao, , ,**  
Mailing Address 4808 Saint Mary St

City: Metairie State: LA Zip Code: 70006-2036

FEC ID number of contributing federal political committee: C

Name of Employer: Tulane University Occupation: Research Scientists

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 2700.00

Date of Receipt: 12 / 05 / 2016  
Transaction ID : SA11AI.13918

Amount of Each Receipt this Period: 2700.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 10800.00

**TOTAL** This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 15  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Zhang, Xing, , ,**

Mailing Address 4808 Saint Mary St

City Metairie State LA Zip Code 70006-2036

FEC ID number of contributing federal political committee. **C**

Name of Employer Tulane University Occupation Research Scientists

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 05 / 2016

Transaction ID : SA11AI.13920

Amount of Each Receipt this Period  
2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	13500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 15			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial SVC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2016		
Mailing Address 4905 Del Ray Ave			FEC Identification Number C		
City Bethesda	State MD	Zip Code 20814	Amount of Each Disbursement this Period 590.00		
Purpose of Disbursement NRCC Bright Lights and Broadway		Category/ Type 002	Transaction ID : SB17.13929		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Chase Card</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2016		
Mailing Address PO Box 94014			FEC Identification Number C		
City Palatine	State IL	Zip Code 60094-4014	Amount of Each Disbursement this Period 206.62		
Purpose of Disbursement paying creditcard		Category/ Type	Transaction ID : SB17.13884		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. DeLullo &amp; Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2016		
Mailing Address 815 King St, Ste 308			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 2150.00		
Purpose of Disbursement Inv 1328 & additional commission for misc cks, (see inv)..rw		Category/ Type	Transaction ID : SB17.13885		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2946.62
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 15			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Eco Dev Alliance Brazoria Cnty</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2016
Mailing Address 4005 Technology Dr, Ste 1010		FEC Identification Number C
City Angleton	State TX	Zip Code 77515
Purpose of Disbursement membership 2017, inv 10272		Amount of Each Disbursement this Period 215.00
Candidate Name		Transaction ID : SB17.13887
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Lilly &amp; Company</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2016
Mailing Address 1005 Congress Avenue Suite 910		FEC Identification Number C
City Austin	State TX	Zip Code 78701
Purpose of Disbursement Inv 3123- 111616...rw (past due)		Amount of Each Disbursement this Period 5352.38
Candidate Name		Transaction ID : SB17.13889
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. Lilly &amp; Company</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2016
Mailing Address 1005 Congress Avenue Suite 910		FEC Identification Number C
City Austin	State TX	Zip Code 78701
Purpose of Disbursement Inv 3162- 121616...rw		Amount of Each Disbursement this Period 4380.93
Candidate Name		Transaction ID : SB17.13890
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9948.31
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 15	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Lotte New York Palace</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2016	
Mailing Address 455 Madison Ave			FEC Identification Number C	
City New York	State NY	Zip Code 10022	Amount of Each Disbursement this Period 140.02	
Purpose of Disbursement food & beverage			Transaction ID : SB17.13894	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Peterson CPA Firm, P.C.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016	
Mailing Address 333 E. Parkwood Ave			FEC Identification Number C	
City Friendswood	State TX	Zip Code 77546	Amount of Each Disbursement this Period 1100.00	
Purpose of Disbursement Inv 22948 retainer for Dec - rw			Transaction ID : SB17.13901	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Piryx Charge</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2016	
Mailing Address 144 2nd St, 1st Floor			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105	Amount of Each Disbursement this Period 229.50	
Purpose of Disbursement CC charges for - Chaudhary, Azhar			Transaction ID : SB17.13902	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1469.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 15	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Piryx Charge</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2016	
Mailing Address 144 2nd St, 1st Floor			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105	Amount of Each Disbursement this Period 229.50	
Purpose of Disbursement Zhang, Xing		Category/Type	Transaction ID : SB17.13903	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Storage Choice</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2016	
Mailing Address 141 Maple Leaf St			FEC Identification Number C	
City League City	State TX	Zip Code 77573	Amount of Each Disbursement this Period 158.00	
Purpose of Disbursement Storage rental		Category/Type	Transaction ID : SB17.13904	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Weaver, Courtney, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2016	
Mailing Address 5353 Columbia Pike apt 407			FEC Identification Number C	
City Arlington	State VA	Zip Code 22204	Amount of Each Disbursement this Period 200.00	
Purpose of Disbursement Staff Salary for Courtney Weaver		Category/Type	Transaction ID : SB17.13912	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	587.50
<b>TOTAL</b> This Period (last page this line number only).....▶	14951.95

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 15			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Burns, Fred, C., Mr.,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2016		
Mailing Address 2816 Avenue O					
City Galveston	State TX	Zip Code 77550	FEC Identification Number C		
Purpose of Disbursement Reimbursement for in kind donation		Category/ Type 003	Amount of Each Disbursement this Period 399.35		
Candidate Name		Transaction ID : SB20A.13931			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Chaudhary, Azhar, , Mr.,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2016		
Mailing Address 5810 Crawford Hill Ln					
City Sugar Land	State TX	Zip Code 77478	FEC Identification Number C		
Purpose of Disbursement Refund overage on contribution		Category/ Type 003	Amount of Each Disbursement this Period 2900.00		
Candidate Name		Transaction ID : SB20A.13923			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Mohn, Jerry, A., Mr.,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2016		
Mailing Address 4210 Silver Reef - P.B.W. #1					
City Galveston	State TX	Zip Code 77554	FEC Identification Number C		
Purpose of Disbursement overage		Category/ Type	Amount of Each Disbursement this Period 1000.00		
Candidate Name		Transaction ID : SB20A.13896			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4299.35
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 15			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Weber, Jeanne, , Mrs.,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2016		
Mailing Address 3302 Hampshire St			FEC Identification Number C		
City Pearland	State TX	Zip Code 77581	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement overage		Candidate Name	Category/ Type	Transaction ID : SB20A.13913	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Candidate Name	Category/ Type	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Candidate Name	Category/ Type	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6799.35

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **WEBER FOR CONGRESS** Transaction ID : **SC/10.4842**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) WEBER, RANDY, , ,		<input type="checkbox"/> Memo Item	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 1327			
City FRIENDSWOOD	State TX	ZIP Code 77549	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 100000.00	Cumulative Payment To Date 13500.00	Balance Outstanding at Close of This Period 86500.00
--------------------------------------	--	---

<b>TERMS</b>	Date Incurred M 12 / D 30 / Y 2011	Date Due M / D / Y None	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---------------------------------------	----------------------------	--	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	86500.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **WEBER FOR CONGRESS** Transaction ID : **SC/10.5921**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) WEBER, RANDY, , ,		<input type="checkbox"/> Memo Item	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff
Mailing Address PO BOX 1327			
City FRIENDSWOOD	State TX	ZIP Code 77549	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 100000.00	Cumulative Payment To Date 67500.00	Balance Outstanding at Close of This Period 32500.00
--------------------------------------	--	---

<b>TERMS</b>	Date Incurred M 06 / D 25 / Y 2012 Y	Date Due M M / D D / Y None Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---	----------------------------------	--	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	32500.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **WEBER FOR CONGRESS** Transaction ID : **SC/10.7910**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) WEBER, RANDY, , ,		<input type="checkbox"/> Memo Item	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 1327			
City FRIENDSWOOD	State TX	ZIP Code 77549	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 25000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 25000.00
-------------------------------------	------------------------------------	---

<b>TERMS</b>	Date Incurred M 11 / D 03 / Y 2012	Date Due M M / D D / Y None	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---------------------------------------	--------------------------------	--	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	25000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	144000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.