

# 48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

<b>1. NAME OF COMMITTEE IN FULL</b> WEBER FOR CONGRESS			
ADDRESS (number and street) 1701 Bending Stream			
CITY Friendswood	STATE TX	ZIP CODE 77546	
<b>2. NAME OF CANDIDATE</b> WEBER, RANDY, , ,		<b>3. OFFICE SOUGHT</b> (State and District) House TX 14	
		<b>4. FEC IDENTIFICATION NUMBER</b> C00502229	
<b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
<b>A. FULL NAME</b> Caplan, Jonathan, , ,			
MAILING ADDRESS 50 Hartshorn Dr		Name of Employer Kramer Levin Naftalis & Franke	
CITY Short Hills NJ	STATE NJ	ZIP CODE 07078	Date (month, day, year) 10/31/2018
		Amount 1500.00	
		Transaction ID : F6.16419	
		Occupation Attorney	
<b>B. FULL NAME</b> Friedland, Jason, , ,			
MAILING ADDRESS 18 Stonewall Lane		Name of Employer Westrock Development	
CITY Mamaroneck	STATE NJ	ZIP CODE 10543	Date (month, day, year) 10/31/2018
		Amount 1500.00	
		Transaction ID : F6.16420	
		Occupation Real Estate	
<b>C. FULL NAME</b> Goodman, Robert, , ,			
MAILING ADDRESS 473 Winthrop Road		Name of Employer North Jersey Brain & Spine	
CITY Teaneck	STATE NJ	ZIP CODE 07666	Date (month, day, year) 10/31/2018
		Amount 1500.00	
		Transaction ID : F6.16421	
		Occupation Physician	
<b>D. FULL NAME</b> Hawkins, Jay, , Mr.,			
MAILING ADDRESS 3020 Bridle Path Lane		Name of Employer Self Employed	
CITY Friendswood	STATE TX	ZIP CODE 77546	Date (month, day, year) 10/30/2018
		Amount 2700.00	
		Transaction ID : F6.16418	
		Occupation Owner of Hawkins Lease Service	
<b>E. FULL NAME</b> Herman, Russell, , ,			
MAILING ADDRESS 17 Avenue of Two Rivers South		Name of Employer Herman Capital Management	
CITY Rumson	STATE NJ	ZIP CODE 07760	Date (month, day, year) 10/31/2018
		Amount 1500.00	
		Transaction ID : F6.16422	
		Occupation Finance	
<b>SIGNATURE (optional)</b> Nolen, Robert, D., Mr.,		DATE 11/01/2018	<b>For further information contact:</b> Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
[Electronically Filed]			

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

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ADDRESS (number and street) 1701 Bending Stream			
CITY, STATE, and ZIP CODE Friendswood TX 77546			
<b>2. NAME OF CANDIDATE</b> WEBER, RANDY, , ,	<b>3. OFFICE SOUGHT</b> (State and District) House TX 14	<b>4. FEC IDENTIFICATION NUMBER</b> C00502229	
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<b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Kagen, Erran, , , 35 Clover Drive Great Neck NY 11021	Name of Employer EIG <b>Transaction ID : F6.16423</b> Occupation Manager	Date (month, day, year) 10/31/2018	Amount 1500.00
<b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Landes, Joshua, , , 740 West 232nd Street Bronx NY 10463	Name of Employer Wynnefield Capital <b>Transaction ID : F6.16425</b> Occupation Investment Management	Date (month, day, year) 10/31/2018	Amount 1500.00
<b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Mermelstein, Adam, , Mr., 500 Frank W Burr Blvd Ste 47 Teaneck NJ 07666	Name of Employer Tree Top Development <b>Transaction ID : F6.16424</b> Occupation Real Estate Developer	Date (month, day, year) 10/31/2018	Amount 1500.00
<b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Scott, William, F., Mr., 1735 W Cardinal Dr Beaumont TX 77705	Name of Employer Trans-Global Solutions Inc. <b>Transaction ID : F6.16429</b> Occupation CEO	Date (month, day, year) 10/31/2018	Amount 2700.00
<b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Slass, Johnathan, , Mr., 26 Strawberry Ln Warren NJ 07059	Name of Employer Rotor Clip <b>Transaction ID : F6.16426</b> Occupation Owner	Date (month, day, year) 10/31/2018	Amount 1500.00

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**FEC FORM 6**  
(Revised 07/2011)

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<b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Slass, Marjorie, , ,  26 Strawberry Lane  Warren NJ 07059	Name of Employer Jewish Family Service  <b>Transaction ID : F6.16427</b> Occupation Psy. D.	Date (month, day, year)  10/31/2018	Amount  1500.00
<b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer  Occupation	Date (month, day, year)	Amount
<b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer  Occupation	Date (month, day, year)	Amount
<b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer  Occupation	Date (month, day, year)	Amount
<b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer  Occupation	Date (month, day, year)	Amount