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.

NAME OF COMMITTEE IN FULL WEBER FOR CONGRESS						7			
ADDRESS (number and stree	et) 1701 Bending Stre	am							
CITY STATE			ΓE	ZIP (CODE		_		
Friendswood		Т	ТХ	77546					
2. NAME OF CANDIDATE		I		3. OFFICE SOUGHT (State and District)			4. FEC IDENTIFICATION	NUMBER	
WEBER, RANDY, , ,				House TX 14			C00502229		
5. IS THIS AN AMENDMENT?	NO, THIS IS A	NEW FILING	×	YES, IT AMENDS T	THE NO	FICE FILED ON		2020	
A. FULL NAME Mohn, Jerry, A., Mr.,				Name of Employer Retired			Date (month, day, year)	Amount	
MAILING ADDRESS 4210 Silver Reef - P.B.W. #1				-			02/27/2020	1000.00	
4210 GIIVOI 11.B.W. #1				Transaction ID : F6.18819					
CITY	STATE	ZIP CODE		Occupation					
Galveston	TX	77554		Retired					
B. FULL NAME Action Committee for Rural Electrification				Name of Employer			Date (month, day, year)	Amount	
MAILING ADDRESS							02/27/2020	2000.00	
4301 Wilson Blvd							02/21/2020	2000.00	
OITV	OTATE	710 0005		Transaction ID :	F6.18	813	_		
CITY	STATE	ZIP CODE		Occupation					
Arlington	VA	22203							
c. FULL NAME American Airlines PAC				Name of Employer			Date (month, day, year)	Amount	
MAILING ADDRESS							02/27/2020	1000.00	
1200 17th St NW Ste 400				Transaction ID : F6.18811					
CITY	STATE	ZIP CODE		Occupation					
Washington	DC	20036							
D. FULL NAME				Name of Employer			Date (month,	Amount	
American Airlines PAC							day, year)		
MAILING ADDRESS 1200 17th St NW Ste 400							02/27/2020	1000.00	
1200 17til St NW Ste 400				Transaction ID : F6.18812					
CITY	STATE	ZIP CODE		Occupation					
Washington	ton DC 20036								
E. FULL NAME		l		Name of Employer			Date (month,	Amount	
American Bankers Association PAC (BANKPAC)				-			day, year)		
MAILING ADDRESS 1120 Connecticut Ave NW							02/27/2020	2500.00	
OUTV STORES				Transaction ID : F6.18814			_		
CITY	STATE	ZIP CODE		Occupation					
Washington	DC	20036							
SIGNATURE (optional) Nolen, Robert, D., Mr.,			ı	Electronically Filed	04	ATE 4/13/2020	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100		



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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1. NAME OF COMMITTEE IN FULL WEBER FOR CONGRESS]			
ADDRESS (number and street) 1701 Bending	g Stream		-	
CITY, STATE, and ZIP CODE			-	
Friendswood		TX 77546	continuatio	n page
2. NAME OF CANDIDATE		3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION NUMBER	
WEBER, RANDY, , ,		House TX 14	C00502229	
5. ISTHIS AN AMENDMENT? NO, THIS IS	S A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON		
A. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
CHEVRON EMPLOYEES POLITICA COMMITTEE - CHEVRON CORPOR			day, year) 02/28/2020	2500.00
6001 BOLLINGER CANYON ROAD			02/20/2020	2000.00
ROOM G1264		Transaction ID : F6.18815		
SAN RAMON	CA 94583	Occupation		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
CULAC The PAC of Credit Union Na	tional Association		day, year)	
00 14 04 05 04 000			02/27/2020	1000.00
99 M St SE Ste 300		Transaction ID : F6.18820		
		Occupation		
Washington	DC 20003	Codpanon		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
Majority Committee PAC			day, year)	
DO D 40404			02/28/2020	5000.00
PO Box 10134		T		
		Transaction ID : F6.18817 Occupation		
Bakersfield	CA 93389	Coodpailon		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
Majority Committee PAC			day, year)	
505			02/28/2020	5000.00
PO Box 10134		Transaction ID : F6.18818		
		Occupation		
Bakersfield	CA 93389	·		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month, day, year)	Amount
		Occupation		