

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

12FE4M5

WEBER FOR CONGRESS

ADDRESS (number and street)

PO Box 1327

Check if different than previously reported. (ACC)

Friendswood

TX

77549

2. FEC IDENTIFICATION NUMBER

C C00502229

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

TX 14

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on 07 / 31 / 2012 in the State of TX

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

07 / 01 / 2012 through 07 / 11 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert Nolen

Signature of Treasurer Robert Nolen

[Electronically Filed]

Date

01 / 31 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Table with 8 columns and 1 row for Office Use Only

**SUMMARY PAGE**  
of Receipts and Disbursements

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

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	12934.00	398967.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	12934.00	397967.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	48925.98	519747.41
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	48925.98	519747.41
8. Cash on Hand at Close of Reporting Period (from Line 27).....	104719.59	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	226500.00	

**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 12/2003)

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).....	6434.00	377292.00
(ii) Unitemized.....	0.00	425.00
(iii) TOTAL of contributions from individuals ▶	6434.00	377717.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	6500.00	18750.00
(d) The Candidate.....	0.00	2500.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	12934.00	398967.00
<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	226500.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	226500.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	12934.00	625467.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	48925.98	519747.41
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	1000.00
(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)).....	0.00	1000.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	48925.98	520747.41

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	140711.57
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	12934.00
25. SUBTOTAL (add Line 23 and Line 24).....	153645.57
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	48925.98
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	104719.59

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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**

Full Name (Last, First, Middle Initial) <b>A. Leonard Cherry</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 02 / 2012	
Mailing Address 622 Westfield Lane		<b>Transaction ID : SA11AI.5941</b>	
City Friendswood	State TX	Zip Code 77546	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Cherry Demolition	Occupation Owner		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. Janice Culling</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2012	
Mailing Address 8018 Scott Ave		<b>Transaction ID : SA11AI.5969</b>	
City Manvel	State TX	Zip Code 77578	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer		Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 3500.00		

Information requested

Full Name (Last, First, Middle Initial) <b>C. Craig Darby</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2012	
Mailing Address 2528 Westminister		<b>Transaction ID : SA11AI.5964</b>	
City Pearland	State TX	Zip Code 77581	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer State Farm Insurance	Occupation Agent		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Alan Edge**

Mailing Address 13502 CR 282

City Alvin State TX Zip Code 77511

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

Name of Employer Boiling ISD Occupation Band Director

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
 \_\_\_\_\_ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2012

**Transaction ID : SA11AI.5958**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

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

Mailing Address 201 Biscayne Blvd

City El Lago State TX Zip Code 77566

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
 \_\_\_\_\_ 50.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2012

**Transaction ID : SA11AI.5966**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50.00

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

Mailing Address 123 Montclair Drive

City Beaumont State TX Zip Code 77707

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

Name of Employer Goldbeck Learning Clinic Occupation Teacher

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
 \_\_\_\_\_ 50.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 05 / 2012

**Transaction ID : SA11AI.5949**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50.00

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

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

\_\_\_\_\_ 200.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**David E Gillioz**

Mailing Address 12531 1/2 FM 1764

City Santa Fe State TX Zip Code 77510

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

Name of Employer Creations Upholstry Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2012

**Transaction ID : SA11AI.5968**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 1912 Summer Reef

City League City State TX Zip Code 77573

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

Name of Employer Flexbright Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 03 / 2012

**Transaction ID : SA11AI.5946**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 1501 Rosewood Courts

City Friendswood State TX Zip Code 77546

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

Name of Employer Woven Metals Inc Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 03 / 2012

**Transaction ID : SA11AI.5947**

Amount of Each Receipt this Period  
 2500.00

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

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

4050.00

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

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

FOR LINE NUMBER: PAGE 8 OF 32  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Rebecca Hopkins**

Mailing Address **PO Box 670**

City **Alvin** State **TX** Zip Code **77512**

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

Name of Employer **TWFG Insurance Services** Occupation **Agent**

Receipt For: 2012  
 Primary  General  
 Other (specify) **Runoff**

Election Cycle-to-Date  
**50.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 11 / 2012**

**Transaction ID : SA11AI.5962**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address **827 CR 432**

City **Brazoria** State **TX** Zip Code **77422**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2012  
 Primary  General  
 Other (specify) **Runoff**

Election Cycle-to-Date  
**50.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 11 / 2012**

**Transaction ID : SA11AI.5963**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address **5127 Brookside**

City **Pearland** State **TX** Zip Code **77581**

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

Name of Employer **Forgotten Angels** Occupation **Development**

Receipt For: 2012  
 Primary  General  
 Other (specify) **Runoff**

Election Cycle-to-Date  
**159.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 03 / 2012**

**Transaction ID : SA11AI.5942**

Amount of Each Receipt this Period  
**59.00**

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

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

**134.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Mike Meroney**

Mailing Address 1402 Nueces St, Ste B

City Austin State TX Zip Code 78701

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

Name of Employer Meroney Public Affairs Occupation Public Affairs Manager

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 09 / 2012

**Transaction ID : SA11AI.5960**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 6355 Westgate Drive

City Beaumont State TX Zip Code 77706

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

Name of Employer Self Occupation Petroleum

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 05 / 2012

**Transaction ID : SA11AI.5953**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 204 Webster St

City Houston State TX Zip Code 77002

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

Name of Employer JL PROLER IRON AND STEEL Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 09 / 2012

**Transaction ID : SA11AI.5959**

Amount of Each Receipt this Period  
**100.00**

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

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

**375.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Larry Vacek**

Mailing Address 3205 CR 415

City State Zip Code  
Brazoria TX 77422

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
25.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 07 / 2012

**Transaction ID : SA11AI.5957**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 450 Westwood

City State Zip Code  
Angleton TX 77515

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
50.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 07 / 2012

**Transaction ID : SA11AI.5955**

Amount of Each Receipt this Period  
50.00

**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

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

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

75.00

6434.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 32
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**IBAT FEDPAC**

Mailing Address 1700 Rio Grande St Ste 100

City Austin State TX Zip Code 78701

FEC ID number of contributing federal political committee. **C** C00332841

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 05 / 2012

**Transaction ID : SA11C.5951**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address PO BOX 602

City LAKE JACKSON State TX Zip Code 77566

FEC ID number of contributing federal political committee. **C** C00234641

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 03 / 2012

**Transaction ID : SA11C.5944**

Amount of Each Receipt this Period  
 5000.00

**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

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

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

6500.00

6500.00

**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 12 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Bison Signs</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 10100 Clay Road Ste G		Amount of Each Disbursement this Period 2706.25
City Houston	State TX Zip Code 77080	
Purpose of Disbursement Signs	Candidate Name	Transaction ID : SB17.5995
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Bob's Cartridge World</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 102 W El Dorado Blvd		Amount of Each Disbursement this Period 679.86
City Friendswood	State TX Zip Code 77546	
Purpose of Disbursement Ink	Candidate Name	Transaction ID : SB17.6003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Steven Carpenter</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 3217 Rippling Falls Lane		Amount of Each Disbursement this Period 60.00
City Dickinson	State TX Zip Code 77539	
Purpose of Disbursement Salary	Candidate Name	Transaction ID : SB17.5982
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3446.11
<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 13 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Jeff Carroll</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 514 Magnolia Circle		Amount of Each Disbursement this Period 103.02
City League City	State TX	
Zip Code 77573	Purpose of Disbursement Mileage Reimbursement	
Candidate Name	Category/ Type	
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. Jeff Carroll</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 514 Magnolia Circle		Amount of Each Disbursement this Period 270.00
City League City	State TX	
Zip Code 77573	Purpose of Disbursement Salary	
Candidate Name	Category/ Type	
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. Jeff Carroll</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012
Mailing Address 514 Magnolia Circle		Amount of Each Disbursement this Period 117.81
City League City	State TX	
Zip Code 77573	Purpose of Disbursement Mileage Reimbursement	
Candidate Name	Category/ Type	
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).....	490.83
<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 14 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Jeff Carroll</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012		
Mailing Address 514 Magnolia Circle			Amount of Each Disbursement this Period 230.00		
City League City	State TX	Zip Code 77573	Transaction ID : <b>SB17.6018</b>		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
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. Arnold Craft</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012		
Mailing Address 15623 Lake Lodge Dr.			Amount of Each Disbursement this Period 40.00		
City Houston	State TX	Zip Code 77062	Transaction ID : <b>SB17.6010</b>		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
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. Arnold Craft</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012		
Mailing Address 15623 Lake Lodge Dr.			Amount of Each Disbursement this Period 19.89		
City Houston	State TX	Zip Code 77062	Transaction ID : <b>SB17.6021</b>		
Purpose of Disbursement Mileage Reimbursement		Category/ Type			
Candidate Name					
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).....	289.89
<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 15 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Cody Davis</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012	
Mailing Address 14144 Mueschke Rd			Amount of Each Disbursement this Period 39.27	
City Cypress	State TX	Zip Code 77429	Transaction ID : SB17.6019	
Purpose of Disbursement Mileage Reimbursement		Category/ Type		
Candidate Name				
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. Cody Davis</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012	
Mailing Address 14144 Mueschke Rd			Amount of Each Disbursement this Period 210.00	
City Cypress	State TX	Zip Code 77429	Transaction ID : SB17.6020	
Purpose of Disbursement Salary		Category/ Type		
Candidate Name				
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. Christopher Do</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012	
Mailing Address 10618 Nicole's Place Trail			Amount of Each Disbursement this Period 305.00	
City Houston	State TX	Zip Code 77089	Transaction ID : SB17.5980	
Purpose of Disbursement Salary		Category/ Type		
Candidate Name				
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).....	554.27
<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 16 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Christopher Do</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012	
Mailing Address 10618 Nicole's Place Trail			Amount of Each Disbursement this Period 260.00	
City Houston	State TX	Zip Code 77089	Transaction ID : <b>SB17.6015</b>	
Purpose of Disbursement Salary		Category/ Type		
Candidate Name				
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. Minh-Nghia Do</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012	
Mailing Address 10618 Nicole's Place Trail			Amount of Each Disbursement this Period 115.00	
City Houston	State TX	Zip Code 77089	Transaction ID : <b>SB17.5987</b>	
Purpose of Disbursement Salary		Category/ Type		
Candidate Name				
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. Minh-Nghia Do</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012	
Mailing Address 10618 Nicole's Place Trail			Amount of Each Disbursement this Period 35.00	
City Houston	State TX	Zip Code 77089	Transaction ID : <b>SB17.6022</b>	
Purpose of Disbursement Salary		Category/ Type		
Candidate Name				
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).....	410.00
<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 17 OF 32			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Nhan Do</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 12023 Sanguine Sound Ln			Amount of Each Disbursement this Period 275.00 <b>Transaction ID : SB17.5989</b>
City Houston	State TX	Zip Code 77089	
Purpose of Disbursement Salary		Candidate Name	Category/ Type
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. Nhan Do</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012
Mailing Address 12023 Sanguine Sound Ln			Amount of Each Disbursement this Period 260.00 <b>Transaction ID : SB17.6011</b>
City Houston	State TX	Zip Code 77089	
Purpose of Disbursement Salary		Candidate Name	Category/ Type
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. Quentin Hughes</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012
Mailing Address 703 Redway Lane			Amount of Each Disbursement this Period 10.20 <b>Transaction ID : SB17.6007</b>
City Houston	State TX	Zip Code 77062	
Purpose of Disbursement Mileage Reimbursement		Candidate Name	Category/ Type
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).....	545.20
<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 18 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Quentin Hughes</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012		
Mailing Address 703 Redway Lane			Amount of Each Disbursement this Period 995.00		
City Houston	State TX	Zip Code 77062	Transaction ID : SB17.6008		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
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. Brooke Mayfield</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012		
Mailing Address 1818 Oak Lake Circle			Amount of Each Disbursement this Period 400.00		
City Pearland	State TX	Zip Code 77581	Transaction ID : SB17.6000		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
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. Brooke Mayfield</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012		
Mailing Address 1818 Oak Lake Circle			Amount of Each Disbursement this Period 400.00		
City Pearland	State TX	Zip Code 77581	Transaction ID : SB17.6025		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
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).....	995.00
<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 19 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. MB Public Affairs INC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 311 W 5th Street, Suite 1001		Amount of Each Disbursement this Period 12500.00 <b>Transaction ID : SB17.5993</b>
City Austin State TX Zip Code 78701	Purpose of Disbursement Research	
Candidate Name	Category/Type	
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. Najvar Law Firm</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 4151 Southwest Freeway Suite 625		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.6002</b>
City Houston State TX Zip Code 77027	Purpose of Disbursement Legal Services	
Candidate Name	Category/Type	
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. Faith Pinegar</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 424 Westminister		Amount of Each Disbursement this Period 80.00 <b>Transaction ID : SB17.5976</b>
City League City State TX Zip Code 77573	Purpose of Disbursement Campaign contract services	
Candidate Name	Category/Type	
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).....	13580.00
<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 20 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 22.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.5998
Candidate Name	Category/Type	
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. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 2.66
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6001
Candidate Name	Category/Type	
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</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 2.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6004
Candidate Name	Category/Type	
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).....	27.41
<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 21 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 <b>Transaction ID : SB17.6005</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	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. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 <b>Transaction ID : SB17.6023</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	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</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50 <b>Transaction ID : SB17.6024</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	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).....	6.76
<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 22 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6026
Candidate Name	Category/Type	
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. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6027
Candidate Name	Category/Type	
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</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 2.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6028
Candidate Name	Category/Type	
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).....	18.00
<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 23 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

Full Name (Last, First, Middle Initial) <b>A. Rebekah Shinkle</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1210 Elmhurst Trails Lane		Amount of Each Disbursement this Period 85.12
City Seabrook	State TX	
Zip Code 77586		
Purpose of Disbursement Mileage Reimbursement		Category/ Type
Candidate Name		
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. Rebekah Shinkle</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1210 Elmhurst Trails Lane		Amount of Each Disbursement this Period 320.00
City Seabrook	State TX	
Zip Code 77586		
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
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. Rebekah Shinkle</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012
Mailing Address 1210 Elmhurst Trails Lane		Amount of Each Disbursement this Period 50.00
City Seabrook	State TX	
Zip Code 77586		
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
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).....	455.12
<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 24 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Natalie Sifuentes</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 2004 Dawn Crest Court		Amount of Each Disbursement this Period 12.75 <b>Transaction ID : SB17.5973</b>
City League City State TX Zip Code 77573	Purpose of Disbursement Mileage Reimbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Natalie Sifuentes</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 2004 Dawn Crest Court		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : SB17.5974</b>
City League City State TX Zip Code 77573	Purpose of Disbursement Campaign contract services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Natalie Sifuentes</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012
Mailing Address 2004 Dawn Crest Court		Amount of Each Disbursement this Period 85.00 <b>Transaction ID : SB17.6013</b>
City League City State TX Zip Code 77573	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	222.75
<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 25 OF 32			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Trevor Sifuentes</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012		
Mailing Address 2004 Dawn Crest Ct			Amount of Each Disbursement this Period 30.00		
City League City	State TX	Zip Code 77573	Transaction ID : SB17.6014		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
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. Spec's</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012		
Mailing Address 196 Gulf Fwy South			Amount of Each Disbursement this Period 181.30		
City League City	State TX	Zip Code 77573	Transaction ID : SB17.6030		
Purpose of Disbursement Event food and drink		Category/ Type			
Candidate Name					
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. Tyler Stokley</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012		
Mailing Address 17630 Heritage Bay Dr			Amount of Each Disbursement this Period 370.00		
City Webster	State TX	Zip Code 77598	Transaction ID : SB17.5972		
Purpose of Disbursement Campaign contract services		Category/ Type			
Candidate Name					
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).....	581.30
<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 26 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Tyler Stokley</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012		
Mailing Address 17630 Heritage Bay Dr			Amount of Each Disbursement this Period 290.00		
City Webster	State TX	Zip Code 77598	Transaction ID : SB17.6016		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

Full Name (Last, First, Middle Initial) <b>B. Andrea Tavernini</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012		
Mailing Address 1807 Post Office Street			Amount of Each Disbursement this Period 565.00		
City Galveston	State TX	Zip Code 77550	Transaction ID : SB17.5970		
Purpose of Disbursement Campaign contract services		Category/ Type			
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

Full Name (Last, First, Middle Initial) <b>c. Andrea Tavernini</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012		
Mailing Address 1807 Post Office Street			Amount of Each Disbursement this Period 367.71		
City Galveston	State TX	Zip Code 77550	Transaction ID : SB17.5971		
Purpose of Disbursement Mileage Reimbursement		Category/ Type			
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1222.71
<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 27 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Andrea Tavernini</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2012
Mailing Address 1807 Post Office Street		Amount of Each Disbursement this Period 205.00 <b>Transaction ID : SB17.6009</b>
City Galveston State TX Zip Code 77550	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
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. The Political Firm</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2012
Mailing Address 5555 Hilton Ave, Suite 201		Amount of Each Disbursement this Period 3941.40 <b>Transaction ID : SB17.5996</b>
City Baton Rouge State LA Zip Code 70808	Purpose of Disbursement Door Hanger Production	
Candidate Name	Category/Type	
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. The Political Firm</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2012
Mailing Address 5555 Hilton Ave, Suite 201		Amount of Each Disbursement this Period 20904.05 <b>Transaction ID : SB17.5997</b>
City Baton Rouge State LA Zip Code 70808	Purpose of Disbursement Consulting-mail	
Candidate Name	Category/Type	
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).....	25050.45
<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 28 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

Full Name (Last, First, Middle Initial) <b>A. Verizon Southwest</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address PO Box 920041		Amount of Each Disbursement this Period 301.05 <b>Transaction ID : SB17.5994</b>
City Dallas	State TX	
Zip Code 75392	Purpose of Disbursement Phone Service	Category/ Type
Candidate Name	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. W. Bradshaw Boney Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 7211 Spanish Grant		Amount of Each Disbursement this Period 579.14 <b>Transaction ID : SB17.5991</b>
City Galveston	State TX	
Zip Code 77554	Purpose of Disbursement Printed Fliers	Category/ Type
Candidate Name	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		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	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).....	880.19
<b>TOTAL</b> This Period (last page this line number only).....	48775.99

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

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

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Randy Weber  
 Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address PO BOX 1327  
 City Friendswood State TX ZIP Code 77549

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

**TERMS**  
 Date Incurred: M 12 / D 30 / Y 2011  
 Date Due: M / D / Y None  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  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: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 100000.00  
**TOTALS** 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/10.5556**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Randy Weber  
 Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address PO BOX 1327  
 City: FRIENDSWOOD State: TX ZIP Code: 77549

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1500.00	0.00	1500.00

**TERMS**  
 Date Incurred: M 05 / D 07 / Y 2012  
 Date Due: M / D / Y None  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  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: [ ]

**SUBTOTALS** This Period This Page (optional) ..... ▶ 1500.00  
**TOTALS** 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) **Transaction ID : SC/10.5920**  
**WEBER FOR CONGRESS**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>RANDY WEBER</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Runoff</b>
Mailing Address PO BOX 1327		

City	State	ZIP Code
FRIENDSWOOD	TX	77549

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

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 01 / Y 2012 Y Y	M M / D D / Y None Y Y	0.00 % (apr)	<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).....	▶	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>		

**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) <b>RANDY WEBER</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Runoff</b>
Mailing Address PO BOX 1327		

City	State	ZIP Code
FRIENDSWOOD	TX	77549

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
06 / 25 / 2012	None	0.00 % (apr)	<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).....	▶	100000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	226500.00

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