

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 / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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

/ /

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

Office Use Only								
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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))....	75865.00	619383.62
(b) Total Contribution Refunds (from Line 20(d))	0.00	5600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	75865.00	613783.62
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	44401.92	329536.24
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	313.97
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	44401.92	329222.27
8. Cash on Hand at Close of Reporting Period (from Line 27).....	280075.24	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY 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: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	61475.00	379106.65
(ii) Unitemized.....	4890.00	19577.14
(iii) TOTAL of contributions from individuals ▶	66365.00	398683.79
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	9500.00	220299.83
(d) The Candidate.....	0.00	400.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	75865.00	619383.62
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	313.97
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	75865.00	619697.59

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	44401.92	329536.24
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	5600.00
(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	5600.00
21. OTHER DISBURSEMENTS	2805.00	31045.06
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	47206.92	366181.30

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	251417.16
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	75865.00
25. SUBTOTAL (add Line 23 and Line 24).....	327282.16
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	47206.92
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	280075.24

**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 57
	<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

A. Full Name (Last, First, Middle Initial)
Mr. A. Morris Albright

Mailing Address 812 Southwind

City State Zip Code
Port Arthur TX 77640

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.10319

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Hon. Eddie Arnold

Mailing Address 4655 Ashdown St

City State Zip Code
Beaumont TX 77706

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

Name of Employer Occupation
Jefferson County County Commissioner, Pct. 1

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11AI.10320

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Justin Audilet

Mailing Address 432 Longmeadow St

City State Zip Code
Beaumont TX 77707

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

Name of Employer Occupation
Maida Law Firm Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11AI.10322

Amount of Each Receipt this Period
250.00

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

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

1000.00

**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 57
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

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

Mailing Address 1400 San Jacinto Bldg., 595 Orlean

City State Zip Code
Beaumont TX 77701

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

Name of Employer Occupation
Strong Pipkin Bissell & Ledyard, LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 20 / 2014

Transaction ID : SA11AI.10324

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas Baker Jr.

Mailing Address 1111 Red Corral Ranch Rd

City State Zip Code
Wimberley TX 78676

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

Name of Employer Occupation
Tom Baker Consulting, LLC Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : SA11AI.10325

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Paul Beard

Mailing Address PO Box 1564

City State Zip Code
Port Arthur TX 77641

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

Name of Employer Occupation
Sabine Universal Products Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.10326

Amount of Each Receipt this Period
500.00

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

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

2000.00

**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 57
	<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. Don Borden
 Full Name (Last, First, Middle Initial)
 Mailing Address 2330 Stone Bridge Dr.
 City Montrose State CO Zip Code 81401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Master Remodelers LLC
 Receipt For: 2014
 Primary General
 Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2014
Transaction ID : SA11AI.10373
 Amount of Each Receipt this Period
 500.00
 Election Cycle-to-Date
 500.00

B. Mr. Tim Byrom
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 Oakleigh Blvd
 City Beaumont State TX Zip Code 77706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Brint Construction Occupation owner
 Receipt For: 2014
 Primary General
 Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2014
Transaction ID : SA11AI.10328
 Amount of Each Receipt this Period
 1000.00
 Election Cycle-to-Date
 1000.00

C. C. Doornbos Family
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 696
 City Nederland State TX Zip Code 77627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2014
Transaction ID : SA11AI.10331
 Amount of Each Receipt this Period
 200.00
 Election Cycle-to-Date
 300.00

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

1700.00

**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 8 OF 57
	<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)
C. Doornbos Family

Mailing Address PO Box 696

City: Nederland State: TX Zip Code: 77627

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

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 04 / 16 / 2014

Transaction ID : SA11AI.10440

Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
Mr. David W. E. Cabell

Mailing Address PO Box 7173
Tobe Hahn Station

City: Beaumont State: TX Zip Code: 77726

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

Name of Employer: Occupation:
NMC Neese State Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 04 / 28 / 2014

Transaction ID : SA11AI.10332

Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Dr. Trip Chaudhury

Mailing Address 4865 Christina Ln

City: Beaumont State: TX Zip Code: 77706

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

Name of Employer: Occupation:
American Medical Services Oncologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 05 / 15 / 2014

Transaction ID : SA11AI.10334

Amount of Each Receipt this Period: 300.00

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 9 OF 57
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Thomas Tolbert Chisum

Mailing Address 1650 Covington Ct

City State Zip Code
Beaumont TX 77706

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

Name of Employer Occupation
The Modern Group Trustee

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 06 2014

Transaction ID : SA11AI.10335

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Coastal Paradise Investments, LLC

Mailing Address PO Box 2275

City State Zip Code
Crystal Beach TX 77650

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 20 2014

Transaction ID : SA11AI.10337

Amount of Each Receipt this Period
5200.00

LLC attribution below

C. Full Name (Last, First, Middle Initial)
Terri Varner

Mailing Address 91 Trinity Oaks Circle

City State Zip Code
The Woodlands TX 77381

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

Name of Employer Occupation
Coastal Paradise Invest. LLC Member

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 20 2014

Transaction ID : SA11AI.10337.0

Amount of Each Receipt this Period
2600.00

Partnership attribution
[MEMO ITEM]

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

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

5450.00

**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 57
	<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)
Bill Varner

Mailing Address 91 Trinity Oaks Circle

City State Zip Code
The Woodlands TX 77381

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

Name of Employer Occupation
Coastal Paradise Invest. LLC Member

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11AI.10337.1

Amount of Each Receipt this Period
2600.00

Partnership attribution

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Casey Crenshaw

Mailing Address 104 W Caldwood Dr

City State Zip Code
Beaumont TX 77707

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

Name of Employer Occupation
The Modern Group, Ltd. Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.10341

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Will Crenshaw

Mailing Address PO Box 790

City State Zip Code
Beaumont TX 77704

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

Name of Employer Occupation
The Modern Group, Ltd. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 16 / 2014

Transaction ID : SA11AI.10342

Amount of Each Receipt this Period
2600.00

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

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

2850.00

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

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

FOR LINE NUMBER: PAGE 11 OF 57
(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)
Mr. William Dorsett

Mailing Address 1103 Oakland Dr

City State Zip Code
Friendswood TX 77546

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 24 2014

Transaction ID : SA11AI.10344

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles T. Doyle

Mailing Address 1526 19th Ave N

City State Zip Code
Texas City TX 77590

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

Name of Employer Occupation
Texas First Bank Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 02 2014

Transaction ID : SA11AI.10345

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. James S. Fennell Jr.

Mailing Address 6960 Killarney Dr

City State Zip Code
Beaumont TX 77706-4116

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 07 2014

Transaction ID : SA11AI.10346

Amount of Each Receipt this Period
250.00

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

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

1750.00

**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 12 OF 57
	<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)
Mrs. Sandra Fertitta

Mailing Address 6760 Lexington Dr

City Beaumont	State TX	Zip Code 77706
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FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Coffee Company	Occupation Owner
--	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.10348

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Karen Fuljenz

Mailing Address 8255 White Rd

City Beaumont	State TX	Zip Code 77706
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FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.10350

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. John George

Mailing Address 6245 Madison Rdg

City Beaumont	State TX	Zip Code 77706
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FEC ID number of contributing federal political committee. **C**

Name of Employer GO Burgers	Occupation Manager
--------------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : SA11AI.10351

Amount of Each Receipt this Period
500.00

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 13 OF 57
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Ken Goldberg

Mailing Address 4 Robledo Dr

City State Zip Code
Dallas TX 75230

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

Name of Employer Occupation
Gold Medal Recyclers VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 05 / 2014

Transaction ID : SA11AI.10353

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Jeffery D. Hildebrand

Mailing Address PO Box 1308

City State Zip Code
Houston TX 77251

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

Name of Employer Occupation
Hillcorp Energy Company Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 12 / 2014

Transaction ID : SA11AI.10355

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Dr. Joseph W. Holland

Mailing Address 4865 Littlewood Dr

City State Zip Code
Beaumont TX 77706

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

Name of Employer Occupation
Southeast TX Gastroenterology Associat Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 02 / 2014

Transaction ID : SA11AI.10357

Amount of Each Receipt this Period
250.00

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

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

3850.00

**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 14 OF 57
	<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

A. Full Name (Last, First, Middle Initial)
Mr. William R. James

Mailing Address 211 W Capitol St # 201

City Jackson State MS Zip Code 39201

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

Name of Employer Puet Oil Co LLC Occupation Oil and Gas Exploration and Production

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 11 / 2014

Transaction ID : SA11AI.10359

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Kinsel-Kinsel Partnership, LTD.

Mailing Address PO Box 2470

City Beaumont State TX Zip Code 77704

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 20 / 2014

Transaction ID : SA11AI.10361

Amount of Each Receipt this Period
500.00

Attribution information requested

C. Full Name (Last, First, Middle Initial)
Dr. Msonthi Levine

Mailing Address 3560 Delaware St Ste 1104

City Beaumont State TX Zip Code 77706

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

Name of Employer Occupation
Self Employed Sef Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11AI.10363

Amount of Each Receipt this Period
1000.00

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

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

4100.00

**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 15 OF 57
	<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)
Dr. Randy Lombardo

Mailing Address 7 Oakleigh Blvd

City Beaumont	State TX	Zip Code 77706
------------------	-------------	-------------------

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

Name of Employer Advanced Cardiovascular Specialists	Occupation Cardiologist
---	----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11AI.10365

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Milam Mabry

Mailing Address 4432 Crestway Dr

City Austin	State TX	Zip Code 78731
----------------	-------------	-------------------

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

Name of Employer Mabry Public Affairs	Occupation President
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 06 / 2014

Transaction ID : SA11AI.10366

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Don Mafrige

Mailing Address 4800 Seawall Blvd

City Galveston	State TX	Zip Code 77551
-------------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Real Estate
-----------------------------------	---------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11AI.10367

Amount of Each Receipt this Period
1000.00

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

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

2500.00

**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 16 OF 57
	<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. Rick Maldonado

Mailing Address 1301 McKinney St

City	State	Zip Code
Houston	TX	77010

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

Name of Employer	Occupation
Self Employed	Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11AI.10369

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald J. Maloney

Mailing Address 2405 Ashley St

City	State	Zip Code
Beaumont	TX	77702

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

Name of Employer	Occupation
J.P. Maloney, LLC	Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.10371

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. John B. Mathis

Mailing Address 2005 Lanyard Pointe Cir

City	State	Zip Code
League City	TX	77573

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

Name of Employer	Occupation
Texas City Terminal Railway Co.	President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11AI.10375

Amount of Each Receipt this Period
500.00

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

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

1800.00

**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 17 OF 57
	<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. Walter Goldston Mayfield

Mailing Address Po Box 570365

City Houston State TX Zip Code 77257-0365

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

Name of Employer Goldston Oil Company Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 11 / 2014

Transaction ID : SA11AI.10376

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Mr. Steve McReynolds

Mailing Address 305 King Arthur Dr

City Port Neches State TX Zip Code 77651

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

Name of Employer Groves Equipment Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5450.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11AI.10377

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Eric Meadows

Mailing Address 106 W Caldwood Dr

City Beaumont State TX Zip Code 77707

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

Name of Employer Phelan Investments Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.10379

Amount of Each Receipt this Period
250.00

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

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

3100.00

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

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

FOR LINE NUMBER: PAGE 18 OF 57
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 03 / 2014

Transaction ID : SA11AI.10380

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Curtis W. Mewbourne

Mailing Address PO Box 7698

City Tyler State TX Zip Code 75711

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

Name of Employer Mewbourne Oil Co. Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 11 / 2014

Transaction ID : SA11AI.10382

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
James Montagne

Mailing Address 1610 Hyde Ct

City Beaumont State TX Zip Code 77706

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

Name of Employer River City Hospice Occupation partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.10384

Amount of Each Receipt this Period
1000.00

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

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

4100.00

**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 19 OF 57
	<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

Full Name (Last, First, Middle Initial) A. Ted Moor Jr.		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 505 Orleans St Ste 502		Transaction ID : SA11AI.10385	
City Beaumont	State TX	Zip Code 77701	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Ranchers & Farmers Insurance	Occupation Insurance		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) B. Mr. Malcolm S. Morris		Date of Receipt M M / D D / Y Y Y Y 04 / 08 / 2014	
Mailing Address PO Box 2029		Transaction ID : SA11AI.10386	
City Houston	State TX	Zip Code 77252	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00	
Name of Employer Stewart Title Information Svcs. Corp.	Occupation Chairman		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) C. Mr. John L. Nau III		Date of Receipt M M / D D / Y Y Y Y 06 / 13 / 2014	
Mailing Address 3690 Inwood Dr		Transaction ID : SA11AI.10387	
City Houston	State TX	Zip Code 77019	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Silver Eagle Distributors	Occupation President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5100.00		

SUBTOTAL of Receipts This Page (optional).....	3225.00
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: (check only one)	PAGE 20 OF 57
	<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)
Dr. William O'Mara

Mailing Address 5160 Littlechase St

City State Zip Code
Beaumont TX 77706

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

Name of Employer self Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.10389

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Hubert Oxford III

Mailing Address 490 Young St

City State Zip Code
Beaumont TX 77706

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11AI.10391

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. David Parmer

Mailing Address 895 21st St

City State Zip Code
Beaumont TX 77706

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

Name of Employer Baptist Hospitals Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11AI.10392

Amount of Each Receipt this Period
100.00

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

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

2100.00

**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 21 OF 57
	<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. Donald Pollock

Mailing Address 3718 18th St N

City State Zip Code
Texas City TX 77590

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : SA11AI.10393

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Randall Reese

Mailing Address 29 Bellchase Gardens Dr

City State Zip Code
Beaumont TX 77706

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.10394

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Taylor Reid

Mailing Address 402 Shadywood Rd

City State Zip Code
Houston TX 77057

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

Name of Employer Occupation
Oasis Petroleum COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 11 / 2014

Transaction ID : SA11AI.10396

Amount of Each Receipt this Period
2600.00

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

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

3200.00

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

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

FOR LINE NUMBER: PAGE 22 OF 57
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Clive Runnells

Mailing Address PO Box 22738

City State Zip Code
Houston TX 77227

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

Name of Employer Occupation
Clive Runnells Enterprises Investor/ Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 08 / 2014

Transaction ID : SA11AI.10397

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. William F. Scott

Mailing Address PO Box 1998

City State Zip Code
Nederland TX 77627

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

Name of Employer Occupation
Trans-Global Solutions Inc. CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 28 / 2014

Transaction ID : SA11AI.10398

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Jim Shapiro

Mailing Address 108 Woodview Ct

City State Zip Code
West Lake Hills TX 78746

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

Name of Employer Occupation
Austin Metal & Iron Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : SA11AI.10399

Amount of Each Receipt this Period
1000.00

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

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

3000.00

**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 23 OF 57
	<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. Chester L. Sherman Jr.

Mailing Address 585 Belvedere

City Beaumont	State TX	Zip Code 77706
------------------	-------------	-------------------

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

Name of Employer Ritter Lumber Co.	Occupation Lumberman
---------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11Al.10400

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. James Mark Smith

Mailing Address 8155 Evangeline

City Beaumont	State TX	Zip Code 77706
------------------	-------------	-------------------

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

Name of Employer J. Mark Smith and Associates	Occupation Owner
--	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 09 / 2014

Transaction ID : SA11Al.10401

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Todd Stone

Mailing Address 4200 Research Forest Dr Ste 500

City The Woodlands	State TX	Zip Code 77381
-----------------------	-------------	-------------------

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

Name of Employer Arena Energy	Occupation Partner
----------------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 11 / 2014

Transaction ID : SA11Al.10403

Amount of Each Receipt this Period
2600.00

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

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

3800.00

**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 24 OF 57
	<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)
Dr. R. Leldon Sweet

Mailing Address 3345 Plaza 10 Dr Ste E

City Beaumont	State TX	Zip Code 77707
------------------	-------------	-------------------

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

Name of Employer self	Occupation cardiologist
-----------------------	----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11Al.10405

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald Tarpey

Mailing Address PO Box 951

City Texas City	State TX	Zip Code 77592
--------------------	-------------	-------------------

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

Name of Employer Tarpey Inc.	Occupation Owner
---------------------------------	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11Al.10407

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Johnny Triesch

Mailing Address 5785 E Houston St

City San Antonio	State TX	Zip Code 78220
---------------------	-------------	-------------------

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

Name of Employer Longhorn Recycling	Occupation Owner
--	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : SA11Al.10408

Amount of Each Receipt this Period
1000.00

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

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

2250.00

**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 25 OF 57
	<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. Thomas A. Triesch

Mailing Address 10343 Huntress Ln

City San Antonio State TX Zip Code 78255

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

Name of Employer Great Northwest Recycling Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : SA11AI.10409

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Margaret Ann Tuma

Mailing Address 3932 18th St N

City Texas City State TX Zip Code 77590

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11AI.10410

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Mr. Jack Vexler

Mailing Address 201 Charles Rd

City San Antonio State TX Zip Code 78209

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

Name of Employer Monterrey Iron and Metal Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : SA11AI.10411

Amount of Each Receipt this Period
1000.00

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

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

1650.00

**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 26 OF 57
	<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. J.C. Walter III

Mailing Address 1100 Louisiana St Ste 200

City Houston	State TX	Zip Code 77002
-----------------	-------------	-------------------

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

Name of Employer Walter Oil and Gas	Occupation President
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 11 / 2014

Transaction ID : SA11Al.10413

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Mr. Brent Walters

Mailing Address 17470 Tallamar Dr

City Beaumont	State TX	Zip Code 77713
------------------	-------------	-------------------

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

Name of Employer Allstate	Occupation Insurance Agent
------------------------------	-------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11Al.10415

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Clint Walters

Mailing Address 12860 Tanoak Dr

City Beaumont	State TX	Zip Code 77713
------------------	-------------	-------------------

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

Name of Employer MOFCU	Occupation VP
---------------------------	------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11Al.10417

Amount of Each Receipt this Period
500.00

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

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

4100.00

**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 27 OF 57
	<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. Chad Wilbanks

Mailing Address 3805 Kenora Ct

City Austin State TX Zip Code 78738

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : SA11AI.10418

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Naomi M. Winchell

Mailing Address 7095 Westgate Dr

City Beaumont State TX Zip Code 77706

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

Name of Employer Community Hospital Corp. Occupation Healthcare Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2014

Transaction ID : SA11AI.10419

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Mel Wright

Mailing Address 5555 Gladys Ave

City Beaumont State TX Zip Code 77706

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

Name of Employer Wright Scrap & Recycling Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.10421

Amount of Each Receipt this Period
250.00

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

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

1000.00

**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 28 OF 57
	<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)
Mrs. Shirley Wright

Mailing Address 1935 Shady Ln

City State Zip Code
Beaumont TX 77706

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

Name of Employer Occupation
Wright's Scrap & Recycling Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.10423

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Frank Zummo

Mailing Address 1605 Convington Ct

City State Zip Code
Beaumont TX 77706

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

Name of Employer Occupation
Zummo Meat Co. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.10425

Amount of Each Receipt this Period
250.00

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).....

500.00

61475.00

**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 29 OF 57
	<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)
Aircraft Owners and Pilots Association (AOPA) PAC

Mailing Address 421 Aviation Way

City State Zip Code
Frederick MD 21701

FEC ID number of contributing federal political committee. **C** C70004585

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2014

Transaction ID : SA11C.10513

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Denbury Resources Inc. PAC

Mailing Address 5320 Legacy Dr

City State Zip Code
Plano TX 75024

FEC ID number of contributing federal political committee. **C** C00440651

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11C.10514

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
ENPAC Texas

Mailing Address PO Box 2951

City State Zip Code
Beaumont TX 77704

FEC ID number of contributing federal political committee. **C** C00363879

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2014

Transaction ID : SA11C.10515

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 30 OF 57
(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)
IBAT FEDPAC

Mailing Address 1700 Rio Grande St Ste 100

City State Zip Code
Austin TX 78701

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11C.10516

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1700 Rio Grande St Ste 100

City State Zip Code
Austin TX 78701

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 03 / 2014

Transaction ID : SA11C.10517

Amount of Each Receipt this Period
500.00

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

Mailing Address 600 14th St NW Ste 800

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11C.10518

Amount of Each Receipt this Period
2500.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 31 OF 57
(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)
NAIFA-TEXAS PAC

Mailing Address 515 Congress Ave Ste 1650

City Austin State TX Zip Code 78701

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2014

Transaction ID : SA11C.10519

Amount of Each Receipt this Period
 1000.00

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

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).....

1000.00

9500.00

**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 32 OF 57	
	<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) A. Beaumont Enterprise			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014	
Mailing Address PO Box 2991			Amount of Each Disbursement this Period 28.75	
City Beaumont	State TX	Zip Code 77704	Transaction ID : SB17.10527	
Purpose of Disbursement Newspaper Subscription		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. Beaumont Enterprise			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014	
Mailing Address PO Box 2991			Amount of Each Disbursement this Period 28.00	
City Beaumont	State TX	Zip Code 77704	Transaction ID : SB17.10528	
Purpose of Disbursement newspaper subscription		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) C. Beaumont Enterprise			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014	
Mailing Address PO Box 2991			Amount of Each Disbursement this Period 28.00	
City Beaumont	State TX	Zip Code 77704	Transaction ID : SB17.10529	
Purpose of Disbursement newspaper subscription		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:				

SUBTOTAL of Disbursements This Page (optional).....	84.75
TOTAL 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 33 OF 57	
	<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) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014	
Mailing Address 300 First St., SE			Amount of Each Disbursement this Period 235.52	
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.10534	
Purpose of Disbursement Food and beverage-fundraising expense		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. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014	
Mailing Address 300 First St., SE			Amount of Each Disbursement this Period 179.58	
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.10535	
Purpose of Disbursement Food and beverage-fundraising expense		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) C. CCRW PAC			Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014	
Mailing Address 2301 Meadows Blvd			Amount of Each Disbursement this Period 15.00	
City League City	State TX	Zip Code 77573	Transaction ID : SB17.10536	
Purpose of Disbursement Contribution for luncheon		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:				

SUBTOTAL of Disbursements This Page (optional).....	430.10
TOTAL 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 34 OF 57	
	<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) A. Chase Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 1751 W. FM 646		Amount of Each Disbursement this Period 171.02
City League City	State TX Zip Code 77573	
Purpose of Disbursement Office supplies	Candidate Name	Transaction ID : SB17.10537
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. Chase Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 1751 W. FM 646		Amount of Each Disbursement this Period 62.03
City League City	State TX Zip Code 77573	
Purpose of Disbursement Office supplies	Candidate Name	Transaction ID : SB17.10538
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Galveston Daily News		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 8522 Teichman Rd		Amount of Each Disbursement this Period 14.00
City Galveston	State TX Zip Code 77553	
Purpose of Disbursement newspaper subscription	Candidate Name	Transaction ID : SB17.10551
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	247.05
TOTAL 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 35 OF 57	
	<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) A. Galveston Daily News		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 8522 Teichman Rd		Amount of Each Disbursement this Period 14.00 Transaction ID : SB17.10552
City Galveston State TX Zip Code 77553	Purpose of Disbursement newspaper subscription	
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. Galveston Daily News		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 8522 Teichman Rd		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.10553
City Galveston State TX Zip Code 77553	Purpose of Disbursement newspaper subscription	
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) c. Galveston Daily News		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 8522 Teichman Rd		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.10554
City Galveston State TX Zip Code 77553	Purpose of Disbursement newspaper subscription	
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:		

SUBTOTAL of Disbursements This Page (optional).....	44.00
TOTAL 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 36 OF 57	
	<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) A. Klein Investigations and Consulting		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 826 Nederland Ave		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.10565
City Nederland	State TX	
Zip Code 77627	Purpose of Disbursement Political research	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. Lilly & Company		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 1005 Congress Ave, Suite 910 Suite 910		Amount of Each Disbursement this Period 7596.36 Transaction ID : SB17.10572
City Austin	State TX	
Zip Code 78701	Purpose of Disbursement Fundraising consulting-3/15-4/15/14	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) c. Lilly & Company		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 1005 Congress Ave, Suite 910 Suite 910		Amount of Each Disbursement this Period 8429.25 Transaction ID : SB17.10573
City Austin	State TX	
Zip Code 78701	Purpose of Disbursement Fundraising consulting-4/15-5/15/14	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:	

SUBTOTAL of Disbursements This Page (optional).....	19025.61
TOTAL 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 37 OF 57	
	<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) A. Lilly & Company		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 1005 Congress Ave, Suite 910 Suite 910		Amount of Each Disbursement this Period 4733.68 Transaction ID : SB17.10574
City Austin State TX Zip Code 78701	Purpose of Disbursement Fundraising consulting-5/15-6/15/14	
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. Mail Chimp		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 512 Means Street Suite 404		Amount of Each Disbursement this Period 63.75 Transaction ID : SB17.10577
City Atlanta State GA Zip Code 30318	Purpose of Disbursement Campaign Mailings	
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) c. Mail Chimp		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 512 Means Street Suite 404		Amount of Each Disbursement this Period 63.75 Transaction ID : SB17.10578
City Atlanta State GA Zip Code 30318	Purpose of Disbursement Campaign Mailings	
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:		

SUBTOTAL of Disbursements This Page (optional).....	4861.18
TOTAL 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 38 OF 57	
	<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) A. Mail Chimp		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address 512 Means Street Suite 404		Amount of Each Disbursement this Period 63.75 Transaction ID : SB17.10579
City Atlanta State GA Zip Code 30318	Purpose of Disbursement Campaign Mailings	
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. Millan & Co, PC		Date of Disbursement MM / DD / YYYY 05 / 30 / 2014
Mailing Address 823 Congress Ave, Ste 707 Suite 1330		Amount of Each Disbursement this Period 192.00 Transaction ID : SB17.10586
City Austin State TX Zip Code 78701	Purpose of Disbursement accountant 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) c. Miller Spence Group, LLC		Date of Disbursement MM / DD / YYYY 06 / 03 / 2014
Mailing Address PO Box 7557		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.10588
City Arlington State VA Zip Code 22207	Purpose of Disbursement May/ June retainer	
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:		

SUBTOTAL of Disbursements This Page (optional).....	4255.75
TOTAL 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 39 OF 57	
	<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) A. Miller Spencer Group, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address Po Box 7557		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.10589
City Arlington	State VA	
Zip Code 22207	Purpose of Disbursement April Retainer	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. Najvar Law Firm		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 4151 Southwest Freeway Suite 625		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB17.10590
City Houston	State TX	
Zip Code 77027	Purpose of Disbursement Legal and compliance - April	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) c. Najvar Law Firm		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 4151 Southwest Freeway Suite 625		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB17.10591
City Houston	State TX	
Zip Code 77027	Purpose of Disbursement Legal and compliance - May	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:	

SUBTOTAL of Disbursements This Page (optional).....	6800.00
TOTAL 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 40 OF 57	
	<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) A. Najvar Law Firm		Date of Disbursement MM / DD / YYYY 06 / 09 / 2014
Mailing Address 4151 Southwest Freeway Suite 625		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB17.10592
City Houston	State TX Zip Code 77027	
Purpose of Disbursement Legal and compliance - June		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. Omni Hotel		Date of Disbursement MM / DD / YYYY 06 / 07 / 2014
Mailing Address 1300 Houston St		Amount of Each Disbursement this Period 345.85 Transaction ID : SB17.10596
City Fort Worth	State TX Zip Code 76102	
Purpose of Disbursement Lodging RPT convention		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) c. Piryx		Date of Disbursement MM / DD / YYYY 04 / 08 / 2014
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 43.00 Transaction ID : SB17.10600
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement transaction fee		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:		

SUBTOTAL of Disbursements This Page (optional).....	2788.85
TOTAL 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 41 OF 57		
	<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) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 5.38 Transaction ID : SB17.10601
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement transaction fee	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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 21.50 Transaction ID : SB17.10602
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement transaction fee	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) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.30 Transaction ID : SB17.10603
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement transaction fee	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:	

SUBTOTAL of Disbursements This Page (optional).....	31.18
TOTAL 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 42 OF 57			
	<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) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 10.75 Transaction ID : SB17.10604
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement transaction fee	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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.30 Transaction ID : SB17.10605
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement transaction fee	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) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.30 Transaction ID : SB17.10606
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement transaction fee	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:	

SUBTOTAL of Disbursements This Page (optional).....	19.35
TOTAL 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 43 OF 57			
	<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) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.30 Transaction ID : SB17.10607
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement transaction fee	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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.30 Transaction ID : SB17.10608
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement transaction fee	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) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.30 Transaction ID : SB17.10609
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement transaction fee	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:	

SUBTOTAL of Disbursements This Page (optional).....	12.90
TOTAL 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 44 OF 57			
	<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) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.30 Transaction ID : SB17.10610
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement transaction fee	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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 43.00 Transaction ID : SB17.10611
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement transaction fee	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) c. Priceline Hotel		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 800 Connecticut Ave		Amount of Each Disbursement this Period 459.00 Transaction ID : SB17.10613
City Norwalk	State CT Zip Code 06854	
Purpose of Disbursement Lodging-fundraising expense	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:		

SUBTOTAL of Disbursements This Page (optional).....	506.30
TOTAL 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 45 OF 57	
	<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) A. Radisson Hotel		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 111 E Cesar Chavez St		Amount of Each Disbursement this Period 633.03 Transaction ID : SB17.10615
City Austin State TX Zip Code 78701	Purpose of Disbursement Lodging-fundraising expense	
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. Storage Choice		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 141 Maple Leaf St		Amount of Each Disbursement this Period 137.00 Transaction ID : SB17.10617
City League City State TX Zip Code 77573	Purpose of Disbursement campaign storage unit	
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) c. Storage Choice		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 141 Maple Leaf St		Amount of Each Disbursement this Period 137.00 Transaction ID : SB17.10618
City League City State TX Zip Code 77573	Purpose of Disbursement campaign storage unit	
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:		

SUBTOTAL of Disbursements This Page (optional).....	907.03
TOTAL 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 46 OF 57			
	<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)		Date of Disbursement											
A. Storage Choice		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>15</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		15		2014
M M	/	D D	/	Y Y Y Y									
06		15		2014									
Mailing Address 141 Maple Leaf St		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>League City</td> <td>TX</td> <td>77573</td> </tr> </table>		City	State	Zip Code	League City	TX	77573	<table border="1"> <tr> <td>137.00</td> </tr> </table>		137.00			
City	State	Zip Code											
League City	TX	77573											
137.00													
Purpose of Disbursement campaign storage unit		Transaction ID : SB17.10619											
Candidate Name		Category/Type											
Office Sought:	<table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For:					
<input type="checkbox"/>	House												
<input type="checkbox"/>	Senate												
<input type="checkbox"/>	President												
State:	District:	<table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td>Other (specify)</td><td></td><td></td></tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)				
<input type="checkbox"/>	Primary	<input type="checkbox"/>	General										
<input type="checkbox"/>	Other (specify)												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. US House of Representatives		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>09</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		09		2014
M M	/	D D	/	Y Y Y Y									
04		09		2014									
Mailing Address US Capitol Room H154		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20515</td> </tr> </table>		City	State	Zip Code	Washington	DC	20515	<table border="1"> <tr> <td>22.80</td> </tr> </table>		22.80			
City	State	Zip Code											
Washington	DC	20515											
22.80													
Purpose of Disbursement auction flag to donate		Transaction ID : SB17.10623											
Candidate Name		Category/Type											
Office Sought:	<table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For:					
<input type="checkbox"/>	House												
<input type="checkbox"/>	Senate												
<input type="checkbox"/>	President												
State:	District:	<table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td>Other (specify)</td><td></td><td></td></tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)				
<input type="checkbox"/>	Primary	<input type="checkbox"/>	General										
<input type="checkbox"/>	Other (specify)												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. US House of Representatives		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>09</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		09		2014
M M	/	D D	/	Y Y Y Y									
05		09		2014									
Mailing Address US Capitol Room H154		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20515</td> </tr> </table>		City	State	Zip Code	Washington	DC	20515	<table border="1"> <tr> <td>19.25</td> </tr> </table>		19.25			
City	State	Zip Code											
Washington	DC	20515											
19.25													
Purpose of Disbursement auction flag to donate		Transaction ID : SB17.10624											
Candidate Name		Category/Type											
Office Sought:	<table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For:					
<input type="checkbox"/>	House												
<input type="checkbox"/>	Senate												
<input type="checkbox"/>	President												
State:	District:	<table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td>Other (specify)</td><td></td><td></td></tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)				
<input type="checkbox"/>	Primary	<input type="checkbox"/>	General										
<input type="checkbox"/>	Other (specify)												

SUBTOTAL of Disbursements This Page (optional).....	179.05
TOTAL 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 47 OF 57			
	<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) A. US House of Representatives		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address US Capitol Room H154		Amount of Each Disbursement this Period 35.60 Transaction ID : SB17.10625
City Washington	State DC Zip Code 20515	
Purpose of Disbursement auction flag to donate	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. Courtney Weaver		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 5353 Columbia Pike apt 407		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.10629
City Arlington	State VA Zip Code 22204	
Purpose of Disbursement contract labor	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) c. Courtney Weaver		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 5353 Columbia Pike apt 407		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.10634
City Arlington	State VA Zip Code 22204	
Purpose of Disbursement subcontract labor	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:		

SUBTOTAL of Disbursements This Page (optional).....	435.60
TOTAL 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 48 OF 57			
	<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) A. Courtney Weaver		Date of Disbursement MM / DD / YYYY 05 / 28 / 2014
Mailing Address 5353 Columbia Pike apt 407		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.10635
City Arlington	State VA	
Zip Code 22204	Purpose of Disbursement subcontract labor: social media	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. Courtney Weaver		Date of Disbursement MM / DD / YYYY 06 / 26 / 2014
Mailing Address 5353 Columbia Pike apt 407		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.10640
City Arlington	State VA	
Zip Code 22204	Purpose of Disbursement subcontract labor: social media	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) C. RANDY WEBER		Date of Disbursement MM / DD / YYYY 06 / 22 / 2014
Mailing Address PO BOX 1327		Amount of Each Disbursement this Period 20.28 Transaction ID : SB17.10639
City FRIENDSWOOD	State TX	
Zip Code 77549	Purpose of Disbursement Juneteenth parking and candy for parade	Category/ Type
Candidate Name	Office Sought: <input checked="" 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: TX District: 14	

SUBTOTAL of Disbursements This Page (optional).....	420.28
TOTAL 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 49 OF 57			
	<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) A. RANDY WEBER		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address PO BOX 1327		Amount of Each Disbursement this Period 261.80 Transaction ID : SB17.10642
City FRIENDSWOOD	State TX	
Zip Code 77549	Purpose of Disbursement Mileage reimbursement for San Antonio fundraising trip	Category/ Type
Candidate Name	Office Sought: <input checked="" 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: TX District: 14	

Full Name (Last, First, Middle Initial) B. Brooke Weddle		Date of Disbursement MM / DD / YYYY 04 / 10 / 2014
Mailing Address 1818 Oak Lake Cir		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.10632
City Pearland	State TX	
Zip Code 77581	Purpose of Disbursement subcontract labor	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) c. Brooke Weddle		Date of Disbursement MM / DD / YYYY 04 / 28 / 2014
Mailing Address 1818 Oak Lake Cir		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.10633
City Pearland	State TX	
Zip Code 77581	Purpose of Disbursement subcontract labor	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:	

SUBTOTAL of Disbursements This Page (optional).....	1061.80
TOTAL 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 50 OF 57			
	<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) A. Brooke Weddle		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 1818 Oak Lake Cir		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.10636
City Pearlland State TX Zip Code 77581	Purpose of Disbursement subcontract labor	
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. Brooke Weddle		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1818 Oak Lake Cir		Amount of Each Disbursement this Period 61.67 Transaction ID : SB17.10637
City Pearlland State TX Zip Code 77581	Purpose of Disbursement reimbursement for Texas State Society Auction basket	
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) c. Brooke Weddle		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 1818 Oak Lake Cir		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.10641
City Pearlland State TX Zip Code 77581	Purpose of Disbursement subcontract labor	
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:		

SUBTOTAL of Disbursements This Page (optional).....	861.67
TOTAL 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 51 OF 57		
	<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) A. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 2900 South Gordon St		Amount of Each Disbursement this Period 20.50
City Alvin State TX Zip Code 77511	Purpose of Disbursement bank transaction fee	
Candidate Name	Category/Type	Transaction ID : SB17.10626
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.		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	
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) C.		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	
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)	

SUBTOTAL of Disbursements This Page (optional).....	20.50
TOTAL This Period (last page this line number only).....	42992.95

**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 52 OF 57
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AIPAC		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2014
Mailing Address 8 Greenway Plaza STE 1590		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB21.10643
City Houston	State TX Zip Code 77046	
Purpose of Disbursement contribution	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. Alvin Community College Foundation		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2014
Mailing Address 3110 Mustang Rd		Amount of Each Disbursement this Period 90.00 Transaction ID : SB21.10644
City Alvin	State TX Zip Code 77511	
Purpose of Disbursement author's luncheon	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) c. Alvin Community College Foundation		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 3110 Mustang Rd		Amount of Each Disbursement this Period 100.00 Transaction ID : SB21.10645
City Alvin	State TX Zip Code 77511	
Purpose of Disbursement solar lighting grant donation	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:		

SUBTOTAL of Disbursements This Page (optional).....	1690.00
TOTAL 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 53 OF 57	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Beaumont Chamber of Commerce			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014	
Mailing Address PO Box 3150			Amount of Each Disbursement this Period 325.00	
City Beaumont	State TX	Zip Code 77704	Transaction ID : SB21.10647	
Purpose of Disbursement annual membership		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. Greater Port Arthur Chamber of Commerce			Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014	
Mailing Address 4749 Twin City Hwy, Ste 300 Ste 300			Amount of Each Disbursement this Period 25.00	
City Port Arthur	State TX	Zip Code 77642	Transaction ID : SB21.10652	
Purpose of Disbursement membership luncheon		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) C. Southeast Texas Gospel Music			Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014	
Mailing Address 1337 5th St			Amount of Each Disbursement this Period 500.00	
City Port Arthur	State TX	Zip Code 77640	Transaction ID : SB21.10656	
Purpose of Disbursement July Sponsorship		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:				

SUBTOTAL of Disbursements This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	2540.00

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

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4842

WEBER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

RANDY WEBER

Primary

General

Other (specify) ▼

Mailing Address

PO BOX 1327

City

State

ZIP Code

FRIENDSWOOD

TX

77549

Original Amount of Loan

100000.00

Cumulative Payment To Date

11000.00

Balance Outstanding at Close of This Period

89000.00

TERMS

Date Incurred

M 12 / D 30 / Y 2011 Y

Date Due

M / D / Y None Y

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)..... ▶

89000.00

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

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5920

WEBER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

RANDY WEBER

Primary

General

Other (specify) ▼

Runoff

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 12500.00 12500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

06

01

2012

None

0.00

% (apr)

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)..... 12500.00

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/10.5921**

LOAN SOURCE Full Name (Last, First, Middle Initial) RANDY WEBER	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff
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:
	M M / D D / Y Y Y Y 06 / 25 / 2012	M M / D D / Y Y Y Y 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: []

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

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.7910

WEBER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

RANDY WEBER

Primary

General

Other (specify) ▼

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 11 M

D 03 D

Y 2012 Y

M M

D D

Y None Y

0.00

% (apr)

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)..... ▶

25000.00

TOTALS 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.