

**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

M M / D D / Y Y Y Y  
03 04 2014in the  
State of

TX

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
01 01 2014

through

M M / D D / Y Y Y Y  
02 12 2014

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

M M / D D / Y Y Y Y  
04 14 2014

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**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 35

Write or Type Committee Name

**WEBER FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	1	4

	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))....	57037.21	475447.21
(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)) .....	57037.21	469847.21
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	17505.99	260561.59
(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)) .....	17505.99	260247.62
8. Cash on Hand at Close of Reporting Period (from Line 27).....	272669.77	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	226500.00	

**For further information contact:**

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

**WEBER FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	1	4

**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).....**

40652.21

283913.98

**(ii) Unitemized.....**

4885.00

14212.14

**(iii) TOTAL of contributions from individuals ▶**

45537.21

298126.12

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

11500.00

176921.09

**(d) The Candidate.....**

0.00

400.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

57037.21

475447.21

**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)..... ▶**

57037.21

475761.18

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 35

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	17505.99	260561.59
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 .....	14845.00	21955.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	32350.99	288116.59

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	247983.55
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	57037.21
25. SUBTOTAL (add Line 23 and Line 24).....	305020.76
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	32350.99
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	272669.77

# **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 35

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Ms. Patricia Avery</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 30 / 2014	
Mailing Address 333 Pinchback Rd			<b>Transaction ID : SA11AI.9913</b>	
City	State	Zip Code	Amount of Each Receipt this Period 100.00	
Beaumont	TX	77707		
FEC ID number of contributing federal political committee.		C		
Name of Employer Total Petrochemicals		Occupation Administration Manager		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. Franklin W. Carnes IV</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 09 / 2014	
Mailing Address 1201 Tremont St			<b>Transaction ID : SA11AI.9914</b>	
City	State	Zip Code	Amount of Each Receipt this Period 1000.00	
Galveston	TX	77550		
FEC ID number of contributing federal political committee.		C		
Name of Employer Carnes Brothers Funeral Home		Occupation Funeral Director		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Mrs. Joy Crenshaw</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 11782 Brooks Rd			<b>Transaction ID : SA11AI.10121</b>	
City	State	Zip Code	Amount of Each Receipt this Period 900.00	
Beaumont	TX	77713	Redesignated from Will Crenshaw <b>[MEMO ITEM]</b>	
FEC ID number of contributing federal political committee.		C		
Name of Employer Housewife		Occupation Housewife		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 900.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1100.00	
<b>TOTAL</b> This Period (last page this line number only).....				

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

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. Will Crenshaw**

**A.**

Mailing Address PO Box 790

City

Beaumont

State

TX

Zip Code

77704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Modern Group, Ltd.

Occupation

President & Chairman

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 21 / 2014

**Transaction ID : SA11AI.9917**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**Mr. Will Crenshaw**

**B.**

Mailing Address PO Box 790

City

Beaumont

State

TX

Zip Code

77704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Modern Group, Ltd.

Occupation

President & Chairman

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 29 / 2014

**Transaction ID : SA11AI.10119**

Amount of Each Receipt this Period

-900.00

Redesignated below to Joy Crenshaw

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**Paul J. Cunningham**

**C.**

Mailing Address 7103 Broadway St

City

Galveston

State

TX

Zip Code

77554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Best efforts

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 21 / 2014

**Transaction ID : SA11AI.9918**

Amount of Each Receipt this Period

200.00

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

2700.00

**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:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

WEBER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Doornbos Brothers LP

Mailing Address 1148 Helena Ave

City

Nederland

State

TX

Zip Code

77627

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Doornbos Brothers LPOccupation  
Partner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		21		2014

Transaction ID : SA11AI.9919

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Mr. Charles T. Doyle

Mailing Address 1526 19th Ave N

City

Texas City

State

TX

Zip Code

77590

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Texas First BankOccupation  
Banker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.9921

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Charles J. Giglio

Mailing Address 3470 Brentwood Dr

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Giglio Distributing CompanyOccupation  
Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		21		2014

Transaction ID : SA11AI.10134

Amount of Each Receipt this Period

500.00

Reattributed below

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

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

850.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 35

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Charles J. Giglio****A.**

Mailing Address 3470 Brentwood Dr

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Giglio Distributing Company

Occupation

Owner

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2014

**Transaction ID : SA11AI.10135**

Amount of Each Receipt this Period

-500.00

reattributed

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**Mrs. Kim Giglio****B.**

Mailing Address 3470 Brentwood Dr

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Housewife

Occupation

Housewife

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2014

**Transaction ID : SA11AI.10137**

Amount of Each Receipt this Period

500.00

Reattributed from Charles Giglio

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**Hon. Carl R. Griffith Jr.****C.**

Mailing Address 26985 1h 10

City

Winnie

State

TX

Zip Code

77665

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Carl R. Griffith &amp; Associates

Occupation

President/CEO

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		21		2014

**Transaction ID : SA11AI.9923**

Amount of Each Receipt this Period

250.00

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

250.00



# **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 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

WEBER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mr. Keith Guindon

Mailing Address 1902 Wharf Rd

City

Galveston

State

TX

Zip Code

77550

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Katie's Seafood Market

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		14		2014

Transaction ID : SA11AI.9924

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Mr. Jay Hawkins

Mailing Address 3020 Bridle Path Lane

City

Friendswood

State

TX

Zip Code

77546

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Owner of Hawkins Lease Service

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		21		2014

Transaction ID : SA11AI.9926

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Mrs. Nana Hornbeck

Mailing Address PO Box 885

City

Port Bolivar

State

TX

Zip Code

77650

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

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2014

Transaction ID : SA11AI.9927

Amount of Each Receipt this Period

200.00

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

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

5400.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

WEBER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Ms. Lora Jean Kilroy

Mailing Address 3696 Willowick Rd

City

Houston

State

TX

Zip Code

77019

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

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.9928

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Dr. Abel R. Longoria II

Mailing Address 6 Cadena Dr

City

Galveston

State

TX

Zip Code

77554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Greater Houston Emergency

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		06		2014

Transaction ID : SA11AI.9930

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C. Mrs. Mary Longoria

Mailing Address 6 Cadena Dr

City

Galveston

State

TX

Zip Code

77554

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

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		06		2014

Transaction ID : SA11AI.9932

Amount of Each Receipt this Period

2600.00

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

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

6200.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 35

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Dr. George W. Marcom**

Mailing Address 1904 Rampart St

City

League City

State

TX

Zip Code

77573

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 21 / 2014

Transaction ID : SA11AI.9933

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**Jerry A. Mohn**

Mailing Address 4210 Silver Reef - PBW, No.1

City

Galveston

State

TX

Zip Code

77554

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

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 21 / 2014

Transaction ID : SA11AI.9934

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**Mr. Ted Moor III**

Mailing Address 1245 Nottingham Ln

City

Beaumont

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Talon Insurance Agency

Occupation

Insurance

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 21 / 2014

Transaction ID : SA11AI.9935

Amount of Each Receipt this Period

1000.00

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

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

2700.00

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

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

FOR LINE NUMBER:

PAGE 12 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

WEBER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mr. Bernard J. Morello

Mailing Address 5100 San Felipe St Unit 78E

City

Houston

State

TX

Zip Code

77056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Investments

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.9936

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Victor Pierson

Mailing Address 2302 Post Office St

City

Galveston

State

TX

Zip Code

77550

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Moody National Bank - Mayor of Jamaica

Occupation  
President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

Transaction ID : SA11AI.9937

Amount of Each Receipt this Period

452.21

Full Name (Last, First, Middle Initial)

Mr. Donald Pollock

Mailing Address 3718 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 M	/	D D D	/	Y Y Y Y Y
01		21		2014

Transaction ID : SA11AI.9938

Amount of Each Receipt this Period

200.00

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

1152.21

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 13 OF 35

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Dr. Ben Raimer**

Mailing Address 2900 Dominique Dr

City

Galveston

State

TX

Zip Code

77551

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UTMB

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 14 / 2014

Transaction ID : SA11AI.9939

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**Ms. Marie Robb**

Mailing Address PO Box 3930

City

Galveston

State

TX

Zip Code

77552

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COASTAL SOLUTIONS, INC.

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  
01 / 22 / 2014

Transaction ID : SA11AI.9940

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Mr. Jon S Skeele**

Mailing Address PO Box 1447

City

Friendswood

State

TX

Zip Code

77549

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bayway Homes

Occupation

Manager

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 22 / 2014

Transaction ID : SA11AI.9941

Amount of Each Receipt this Period

1000.00

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

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

3500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Mrs. Cheryl Snider**

Mailing Address PO Box 149

City

Sabine Pass

State

TX

Zip Code

77655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Best efforts

Occupation

Best efforts

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		23		2014

**Transaction ID : SA11AI.9943**

Amount of Each Receipt this Period

300.00

**B. Mr. John R.A. Sullivan**

Mailing Address PO Box 131486

City

Houston

State

TX

Zip Code

77219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sullivan Interests

Occupation

Vice President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4266.67

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		28		2014

**Transaction ID : SA11AI.10124**

Amount of Each Receipt this Period

2600.00

Redesignated below

**C. Mr. John R.A. Sullivan**

Mailing Address PO Box 131486

City

Houston

State

TX

Zip Code

77219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sullivan Interests

Occupation

Vice 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
02		10		2014

**Transaction ID : SA11AI.10125**

Amount of Each Receipt this Period

-1666.67

Redesignated below

**[MEMO ITEM]****SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2900.00

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

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

FOR LINE NUMBER:

PAGE 15 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

WEBER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Mr. John R.A. Sullivan

Mailing Address PO Box 131486

City

Houston

State

TX

Zip Code

77219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sullivan Interests

Occupation

Vice President

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4266.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.10126

Amount of Each Receipt this Period

1666.67

Redesignated

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Mr. Todd P. Sullivan

Mailing Address PO Box 131486

City

Houston

State

TX

Zip Code

77219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sullivan Interests

Occupation

President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4266.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		28		2014

Transaction ID : SA11AI.9946

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C. Mr. Todd P. Sullivan

Mailing Address PO Box 131486

City

Houston

State

TX

Zip Code

77219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sullivan Interests

Occupation

President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2599.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.10129

Amount of Each Receipt this Period

-1666.67

Redesignated below

[MEMO ITEM]

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

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

2600.00

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

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

FOR LINE NUMBER:

PAGE 16 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

WEBER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mr. Todd P. Sullivan

Mailing Address PO Box 131486

City

Houston

State

TX

Zip Code

77219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sullivan Interests

Occupation

President

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4266.66

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		10		2014

Transaction ID : SA11AI.10130

Amount of Each Receipt this Period

1666.67

Redesignated from primary 2014

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mr. William W. Sullivan

Mailing Address PO Box 131486

City

Houston

State

TX

Zip Code

77219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sullivan Interests

Occupation

Vice President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4266.67

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		28		2014

Transaction ID : SA11AI.9948

Amount of Each Receipt this Period

2600.00

Redesignation below

Full Name (Last, First, Middle Initial)

Mr. William W. Sullivan

Mailing Address PO Box 131486

City

Houston

State

TX

Zip Code

77219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sullivan Interests

Occupation

Vice 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
02		10		2014

Transaction ID : SA11AI.10132

Amount of Each Receipt this Period

-1666.67

Redesignated below

[MEMO ITEM]

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

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

2600.00



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

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

FOR LINE NUMBER:

PAGE 17 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

WEBER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mr. William W. Sullivan

Mailing Address PO Box 131486

City

Houston

State

TX

Zip Code

77219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sullivan Interests

Occupation

Vice President

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4266.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.10133

Amount of Each Receipt this Period

1666.67

Redesignated from primary 2014

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mrs. Jean Weber

Mailing Address 3302 Hampshire

City

Pearland

State

TX

Zip Code

77581

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

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		21		2014

Transaction ID : SA11AI.9950

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Mr. Norm E. Weber

Mailing Address 3302 Hampshire

City

Pearland

State

TX

Zip Code

77581

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

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		21		2014

Transaction ID : SA11AI.9951

Amount of Each Receipt this Period

2600.00

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

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

5200.00

# **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 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

WEBER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. 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

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.9953

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mrs. Neysa 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's Scrap Metal

Occupation

Administrative Assistant

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		20		2014

Transaction ID : SA11AI.9955

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Keith Zahar

Mailing Address PO Box 1556

City

Crystal Beach

State

TX

Zip Code

77650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Crystal Beach Grocery

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2014

Transaction ID : SA11AI.9956

Amount of Each Receipt this Period

2500.00

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

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

3500.00

40652.21

# **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 35

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Build PAC of the National Association of Home Builders**

Mailing Address 1201 15th St NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00000901

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  
01 / 22 / 2014

**Transaction ID : SA11C.10037**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Enterprise Products Partners, L.P. Political Action Committee**

Mailing Address 1100 Louisiana St

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing  
federal political committee.

**C** C00496752

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  
02 / 03 / 2014

**Transaction ID : SA11C.10038**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**General Electric Company PAC**

Mailing Address 1299 Pennsylvania Ave NW Ste 1100

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C** C00024869

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  
02 / 03 / 2014

**Transaction ID : SA11C.10039**

Amount of Each Receipt this Period

2500.00

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

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

6000.00

# **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 20 OF 35

<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**

Full Name (Last, First, Middle Initial)

**K&L Gates LLP Political Action Committee**

Mailing Address 1717 Main St Ste 2800

City	State	Zip Code
Dallas	TX	75201

FEC ID number of contributing federal political committee.

**C** C00213173

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		23		2014

Transaction ID : SA11C.10040

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**National Beer Wholesalers Association PAC**

Mailing Address 1101 King St Ste 600

City	State	Zip Code
Alexandria	VA	22314

FEC ID number of contributing federal political committee.

**C** C00144766

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		22		2014

Transaction ID : SA11C.10041

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

**The Dow Chemical Company Employees PAC (DowPAC)**

Mailing Address 604 W 14th St

City	State	Zip Code
Austin	TX	78701

FEC ID number of contributing federal political committee.

**C** C00074096

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SA11C.10042

Amount of Each Receipt this Period

2000.00

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

5500.00

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

11500.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 35

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

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NAME OF COMMITTEE (In Full)

**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 First St., SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Fundraising expense

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

1382.23
---------

Transaction ID : SB17.10085

**B. Creative Photography**

Mailing Address 6428 Stewart Rd

City	State	Zip Code
Galveston	TX	77551

Purpose of Disbursement  
campaign photography for mailpieces

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		10		2014

Amount of Each Disbursement this Period

373.46
--------

Transaction ID : SB17.10058

**C. Economic Development Alliance Brazoria County**Mailing Address 4005 Technology Drive, Suite 100  
Suite 1010

City	State	Zip Code
Angerton	TX	77515

Purpose of Disbursement  
annual membership

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		10		2014

Amount of Each Disbursement this Period

210.00
--------

Transaction ID : SB17.10061

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

1965.69

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 35

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

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NAME OF COMMITTEE (In Full)

**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Economic Development Alliance Brazoria County**

Date of Disbursement

M M	D D	Y Y Y Y
01	19	2014

Mailing Address 4005 Technology Drive, Suite 100  
Suite 1010

City Angelton State TX Zip Code 77515

Purpose of Disbursement  
membership Feb 2014- Jan 2015

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Amount of Each Disbursement this Period

210.00
--------

Transaction ID : SB17.10069

**B. High Point Storage**

Date of Disbursement

M M	D D	Y Y Y Y
01	09	2014

Mailing Address 1250 League City Pkwy

City League City State TX Zip Code 77573

Purpose of Disbursement  
Campaign storage unit

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Amount of Each Disbursement this Period

79.00
-------

Transaction ID : SB17.10055

**c. High Point Storage**

Date of Disbursement

M M	D D	Y Y Y Y
02	10	2014

Mailing Address 1250 League City Pkwy

City League City State TX Zip Code 77573

Purpose of Disbursement  
monthly fee for campaign storage unit

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Amount of Each Disbursement this Period

79.00
-------

Transaction ID : SB17.10115

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

368.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Lilly & Company**

Mailing Address 1005 Congress Ave, Suite 910

City	State	Zip Code
Austin	TX	78701

Purpose of Disbursement  
Fundraising consultant-monthly retainer for 12/15/13-1/15/14

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:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 19 / 2014

Amount of Each Disbursement this Period

5102.70
---------

Transaction ID : SB17.10068

**B. Lilly & Company**

Mailing Address 1005 Congress Ave, Suite 910

City	State	Zip Code
Austin	TX	78701

Purpose of Disbursement  
reimbursement for direct mailer

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:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 24 / 2014

Amount of Each Disbursement this Period

1287.42
---------

Transaction ID : SB17.10084

**C. Mail Chimp**

Mailing Address 512 Means Street Suite 404

City	State	Zip Code
Atlanta	GA	30318

Purpose of Disbursement  
Campaign Mailings

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:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 21 / 2014

Amount of Each Disbursement this Period

63.75
-------

Transaction ID : SB17.10075

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

6453.87

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Miller Spencer Group, LLC**

Mailing Address Po Box 7557

City	State	Zip Code
Arlington	VA	22207

Purpose of Disbursement  
Fundraising consulting-Jan & Feb retainer

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2014

Amount of Each Disbursement this Period

4000.00
---------

Transaction ID : SB17.10107

**B. Najvar Law Firm**Mailing Address One Greenway Plaza  
Suite 100

City	State	Zip Code
Houston	TX	77046

Purpose of Disbursement  
Compliance and House ethics as related to campaign- january

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2014

Amount of Each Disbursement this Period

2400.00
---------

Transaction ID : SB17.10074

**c. Pay Pal**

Mailing Address 12312 Port Grace Blvd

City	State	Zip Code
La Vista	NE	68128

Purpose of Disbursement  
Transaction Fee

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:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2014

Amount of Each Disbursement this Period

890.00
--------

Transaction ID : SB17.10089

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

7290.00



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Piryx**

Mailing Address 144 2nd St, 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
transaction fee

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

111.80
--------

Transaction ID : SB17.10092

**B. Piryx**

Mailing Address 144 2nd St, 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
transaction fee

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

111.80
--------

Transaction ID : SB17.10093

**c. Piryx**

Mailing Address 144 2nd St, 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
transaction fee

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

111.80
--------

Transaction ID : SB17.10094

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

335.40

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Piryx**

Mailing Address 144 2nd St, 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2014

City	State	Zip Code
San Francisco	CA	94105

Amount of Each Disbursement this Period

107.50
--------

Purpose of Disbursement  
transaction feeCategory/  
Type**Transaction ID : SB17.10095**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Piryx**

Mailing Address 144 2nd St, 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2014

City	State	Zip Code
San Francisco	CA	94105

Amount of Each Disbursement this Period

1.08
------

Purpose of Disbursement  
transaction feeCategory/  
Type**Transaction ID : SB17.10096**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**c. Piryx**

Mailing Address 144 2nd St, 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2014

City	State	Zip Code
San Francisco	CA	94105

Amount of Each Disbursement this Period

4.30
------

Purpose of Disbursement  
transaction feeCategory/  
Type**Transaction ID : SB17.10113**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

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

112.88

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. US House of Representatives**

Mailing Address House Office Building

City	State	Zip Code
Washington	DC	20515

Purpose of Disbursement  
auction flags-DAR, Lincoln Day Dinner, Sweeny Chamber banquet, Hitchcock  
Chamber banquet

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2014

Amount of Each Disbursement this Period

293.55
--------

Transaction ID : SB17.10063

**B. US House of Representatives**

Mailing Address House Office Building

City	State	Zip Code
Washington	DC	20515

Purpose of Disbursement  
Purchased flags to donate as auction items

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

Amount of Each Disbursement this Period

22.80
-------

Transaction ID : SB17.10090

**c. Courtney Weaver**Mailing Address 5353 Columbia Pike  
apt 407

City	State	Zip Code
Arlington	VA	22204

Purpose of Disbursement  
Campaign services

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2014

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : SB17.10118

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

293.55



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 35

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

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NAME OF COMMITTEE (In Full)

**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Forgotten Angels**Mailing Address 7918 Broadway St  
Suite106

City Pearlrand State TX Zip Code 77581

Purpose of Disbursement  
contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB21.10048

**B. Friends of the River- San Bernard**

Mailing Address PO Box 93

City Brazoria State TX Zip Code 77422

Purpose of Disbursement  
river regatta sponsorship

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2014

Amount of Each Disbursement this Period

300.00
--------

Transaction ID : SB21.10117

**c. Galveston Chamber of Commerce**

Mailing Address 2228 Avenue C, Suite 101

City Galveston State TX Zip Code 77550

Purpose of Disbursement  
job fair sponsorship

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB21.10114

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

1300.00

# **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 30 OF 35

☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)

**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

## **A. Greater Port Arthur Chamber of Commerce**

Mailing Address 4749 Twin City Hwy, Ste 300  
Ste 300

City State Zip Code  
Port Arthur TX 77642

Purpose of Disbursement  
Annual Banquet Sponsorship

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
01 / 06 / 2014

Amount of Each Disbursement this Period

60.00

Transaction ID : SB21.10049

## **B. League City Chamber of Commerce**

Mailing Address 1101 W Main Street #R

City State Zip Code  
League City TX 77573

Purpose of Disbursement  
2 tickets to the chamber annual celebration

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
01 / 22 / 2014

Amount of Each Disbursement this Period

150.00

Transaction ID : SB21.10077

## **C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Mailing Address 320 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
Young Guns Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
02 / 06 / 2014

Amount of Each Disbursement this Period

12000.00

Transaction ID : SB21.10105

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

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

12210.00



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

PAGE 32 OF 35

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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 M / D D / Y Y Y Y  
12 30 / 2011

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

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**

PAGE 33 OF 35

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

25000.00

Cumulative Payment To Date

12500.00

Balance Outstanding at Close of This Period

12500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 01 / 2012

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

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**

PAGE 34 OF 35

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5921

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

100000.00

0.00

100000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
06 / 25 / 2012M M / D D / Y Y Y Y  
/ / /M M / D D / Y Y Y Y  
/ / /M M / D D / Y Y Y Y  
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)..... ►

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

PAGE 35 OF 35

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 M / D D / Y Y Y Y  
11 / 03 / 2012M M / D D / Y Y Y Y  
NoneY Y Y Y  
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)..... ►

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.