



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RECEIVED

2014 OCT 20 AM 10: 27

FEC MAIL CENTER

RQ-2

September 8, 2014

LINDA NEUMAN, TREASURER
WES NEUMAN FOR CONGRESS
280 WEKIVA SPRINGS RD SUITE 3030
LONGWOOD, FL 32779

Response Due Date

10/14/2014

IDENTIFICATION NUMBER: C00553545

REFERENCE: JULY QUARTERLY REPORT (04/01/2014 - 06/30/2014)

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **Failure to adequately respond by the response date noted above could result in an audit or enforcement action.** Additional information is needed for the following 3 item(s):

1. The totals listed on Lines 6(a), 6(c), 7(a), 7(c), 11(a)(iii), 11(e), 13(a), 13(c), 16, 17, and 22, Column B of the Summary and Detailed Summary Pages appear to be incorrect. Column B figures for the Summary and Detailed Summary Pages should equal the sum of the Column B figures on your previous report and the Column A figures on this report. Please file an amendment to your report to correct the Column B discrepancies for this report and all subsequent report(s) which may be affected by this correction. Note that Column B should reflect only the election cycle-to-date totals (11/7/12 through 11/4/14). (52 U.S.C. § 30104(b) (formerly 2 U.S.C. § 434(b)) and 11 CFR § 104.3)

2. On Schedule B supporting Line 17 of your report, you have itemized disbursements for which you have failed to include the purpose. Please amend your report to include the missing information. (11 CFR § 104.3(b)(4))

3. Schedule B supporting Line 17 of your report discloses disbursements to credit card companies. When reporting payments to credit card companies, if the payment to the original vendor aggregates in excess of \$200 in an election cycle, you must itemize the name of the original vendor, address, date, amount, and purpose as a memo entry as well as clearly identify the credit card payment to which each memo entry relates. Please amend your report to include the missing information or provide clarifying information if memo items are not required. (11 CFR § 104.9)

VISION: IMPROVING AMERICAN

WES NEUMAN FOR CONGRESS

Page 2 of 2

Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. **Requests for extensions of time in which to respond will not be considered.**

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended.

If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1187.

Sincerely,



Laura Beaufort
Senior Campaign Finance Analyst
Reports Analysis Division

14330060508

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED

2014 OCT 20 AM 10:27

Office Use Only

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

12FE4M5

Wes Neuman For Congress

ADDRESS (number and street)

280 Wekiva Springs Rd., Suite 3030

Check if different than previously reported. (ACC)

Longwood

FL

32779

2. FEC IDENTIFICATION NUMBER

C00553545

3. IS THIS REPORT NEW OR AMENDED CITY STATE ZIP CODE STATE DISTRICT

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)

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

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

Election on MM/DD/YYYY in the State of

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

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

Election on MM/DD/YYYY in the State of

5. Covering Period

MM/04 / DD/01 / YYYY/2014 through MM/06 / DD/30 / YYYY/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 Linda J Neuman,

Signature of Treasurer

Linda J Neuman, C.P.A.

Date

MM/10 / DD/13 / YYYY/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.

Table with 8 columns for Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 26

Write or Type Committee Name
Wes Neuman 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))	7376.38	14789.13
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	7376.38	14789.13
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	28664.31	44810.88
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	28664.31	44810.88
8. Cash on Hand at Close of Reporting Period (from Line 27)	4953.78	
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)	34975.53	

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)

PAGE 3 / 26

Write or Type Committee Name

Wes Neuman For Congress

Report Covering the Period: From:

MM / DD / YYYY
04 / 01 / 2014

To:

MM / DD / YYYY
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)

3733.00

9901.00

(ii) Unitemized

3643.38

4888.13

(iii) TOTAL of contributions from individuals

7376.38

14789.13

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees (such as PACs)

0.00

0.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS

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

7376.38

14789.13

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate

22139.62

34975.53

(b) All Other Loans

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))

22139.62

34975.53

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

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)

29516.00

49764.66

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	28664.31	44810.88
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	0.00
(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	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	28664.31	44810.88

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4102.09
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	29516.00
25. SUBTOTAL (add Line 23 and Line 24).....	33618.09
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	28664.31
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4953.78

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

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

FOR LINE NUMBER: PAGE 5 OF 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial)
Martha Dervish

A. Mailing Address **1732 Fountainhead Dr.**

City State Zip Code
Lake Mary FL 32746-4402

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

Name of Employer Occupation
none housewife

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y
04 / 24 / 2014
 Transaction ID : **SA11AI.4111**

Amount of Each Receipt this Period
1000.00
 credit card

Full Name (Last, First, Middle Initial)
Martha Dervish

B. Mailing Address **1732 Fountainhead Dr.**

City State Zip Code
Lake Mary FL 32746-4402

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

Name of Employer Occupation
none housewife

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y
05 / 05 / 2014
 Transaction ID : **SA11AI.4112**

Amount of Each Receipt this Period
1000.00
 credit card

Full Name (Last, First, Middle Initial)
Martha Dervish

C. Mailing Address **1732 Fountainhead Dr.**

City State Zip Code
Lake Mary FL 32746-4402

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

Name of Employer Occupation
none housewife

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y
06 / 19 / 2014
 Transaction ID : **SA11AI.4117**

Amount of Each Receipt this Period
500.00
 credit card

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

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

2500.00
2500.00

UNION-NUM-10054

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 26
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) Mark Neuman		Date of Receipt MM / DD / YYYY 04 / 18 / 2014
Mailing Address 650 Longmeadow Circle		Transaction ID : SA11AI.4132
City Longwood	State FL	Zip Code 32779
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 201.00	
Name of Employer US Army Corps of Engineers	Occupation Division Chief	cash
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.99	

Full Name (Last, First, Middle Initial) Mark Neuman		Date of Receipt MM / DD / YYYY 04 / 28 / 2014
Mailing Address 650 Longmeadow Circle		Transaction ID : SA11AI.4313
City Longwood	State FL	Zip Code 32779
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 268.00	
Name of Employer US Army Corps of Engineers	Occupation Division Chief	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 668.99	

Full Name (Last, First, Middle Initial) Mark Neuman		Date of Receipt MM / DD / YYYY 05 / 14 / 2014
Mailing Address 650 Longmeadow Circle		Transaction ID : SA11AI.4130
City Longwood	State FL	Zip Code 32779
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer US Army Corps of Engineers	Occupation Division Chief	cash
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 868.99	

SUBTOTAL of Receipts This Page (optional).....	669.00
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 7 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) Mark Neuman		Date of Receipt MM / DD / YYYY 06 / 17 / 2014
Mailing Address 650 Longmeadow Circle		Transaction ID : SA11AI.4129
City Longwood	State FL	Zip Code 32779
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 9.00
Name of Employer US Army Corps of Engineers	Occupation Division Chief	cash
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 877.99	

Full Name (Last, First, Middle Initial) Mark Neuman		Date of Receipt MM / DD / YYYY 06 / 17 / 2014
Mailing Address 650 Longmeadow Circle		Transaction ID : SA11AI.4131
City Longwood	State FL	Zip Code 32779
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer US Army Corps of Engineers	Occupation Division Chief	check
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 897.99	

Full Name (Last, First, Middle Initial) William Thibodeaux		Date of Receipt MM / DD / YYYY 04 / 11 / 2014
Mailing Address 113 Oakdale Loop		Transaction ID : SA11AI.4102
City Houma	State LA	Zip Code 70360-5932
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer none	Occupation not employed	credit card
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	279.00
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: PAGE 8 OF 26			
	(check only one)			
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
Wes Neuman For Congress

A. Full Name (Last, First, Middle Initial)
Judith Thompson

Mailing Address 3427 Black Willow Trail

City Deland	State FL	Zip Code 32724-1191
----------------	-------------	------------------------

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

Name of Employer none	Occupation retired
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
05 / 22 / 2014

Transaction ID : SA11A1.4114

Amount of Each Receipt this Period
250.00

credit card

B. Full Name (Last, First, Middle Initial)
Joseph Wilson

Mailing Address 225 Pierce St

City San Francisco	State CA	Zip Code 94117
-----------------------	-------------	-------------------

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

Name of Employer Teach For America	Occupation Managing Director, STEM Initiative
---------------------------------------	--

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
234.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2014

Transaction ID : SA11A1.4312

Amount of Each Receipt this Period
35.00

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
MM / DD / YYYY

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	3733.00

DUPLICATE COPY

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 26
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) WESLEY RYAN NEUMAN		Date of Receipt MM / DD / YYYY 04 / 29 / 2014
A. Mailing Address PO BOX 915949		Transaction ID : SA13A.4361
City LONGWOOD	State FL	Zip Code 32791
FEC ID number of contributing federal political committee. C H4FL07087		Amount of Each Receipt this Period 6134.21 campaign expenses
Name of Employer candidate	Occupation professional	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 18970.12	

Full Name (Last, First, Middle Initial) WESLEY RYAN NEUMAN		Date of Receipt MM / DD / YYYY 05 / 12 / 2014
B. Mailing Address PO BOX 915949		Transaction ID : SA13A.4362
City LONGWOOD	State FL	Zip Code 32791
FEC ID number of contributing federal political committee. C H4FL07087		Amount of Each Receipt this Period 8000.00 campaign expenses
Name of Employer candidate	Occupation professional	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 26970.12	

Full Name (Last, First, Middle Initial) WESLEY RYAN NEUMAN		Date of Receipt MM / DD / YYYY 06 / 27 / 2014
C. Mailing Address PO BOX 915949		Transaction ID : SA13A.4363
City LONGWOOD	State FL	Zip Code 32791
FEC ID number of contributing federal political committee. C H4FL07087		Amount of Each Receipt this Period 8005.41 campaign expenses
Name of Employer candidate	Occupation professional	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 34975.53	

SUBTOTAL of Receipts This Page (optional).....	22139.62
TOTAL This Period (last page this line number only).....	22139.62

**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 10 OF 26			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. Activate LLC		Date of Disbursement
Mailing Address 2232 Vermont St		<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Lawrence	State KS	Zip Code 66046
Purpose of Disbursement	<input type="text" value="003"/>	Amount of Each Disbursement this Period <input type="text" value="600.00"/>
Candidate Name Wes Neuman For Congress		Transaction ID : SB17.4331
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) B. Activate LLC		Date of Disbursement
Mailing Address 2232 Vermont St		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City Lawrence	State KS	Zip Code 66046
Purpose of Disbursement	<input type="text" value="003"/>	Amount of Each Disbursement this Period <input type="text" value="300.00"/>
Candidate Name Wes Neuman For Congress		Transaction ID : SB17.4336
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) C. Activate LLC		Date of Disbursement
Mailing Address 2232 Vermont St		<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City Lawrence	State KS	Zip Code 66046
Purpose of Disbursement	<input type="text" value="003"/>	Amount of Each Disbursement this Period <input type="text" value="300.00"/>
Candidate Name Wes Neuman For Congress		Transaction ID : SB17.4353
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1200.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value=""/>

SECTION 1001-1001-1001

**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 11 OF 26			
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. Ashley Parsons Design, LLC			Date of Disbursement MM / DD / YYYY 05 / 04 / 2014	
Mailing Address 1483 Lake Baldwin Lane Ste c			Amount of Each Disbursement this Period 890.94	
City Orlando	State FL	Zip Code 32814	Transaction ID : SB17.4381	
Purpose of Disbursement Ashley Parsons LLC		Category/ Type 006		
Candidate Name Wes Neuman For Congress		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL District: 07				

Full Name (Last, First, Middle Initial) B. Ashley Parsons Design, LLC			Date of Disbursement MM / DD / YYYY 05 / 13 / 2014	
Mailing Address 1483 Lake Baldwin Lane Ste c			Amount of Each Disbursement this Period 500.00	
City Orlando	State FL	Zip Code 32814	Transaction ID : SB17.4343	
Purpose of Disbursement		Category/ Type 004		
Candidate Name Wes Neuman For Congress		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL District: 07				

Full Name (Last, First, Middle Initial) C. Ashley Parsons Design, LLC			Date of Disbursement MM / DD / YYYY 05 / 13 / 2014	
Mailing Address 1483 Lake Baldwin Lane Ste c			Amount of Each Disbursement this Period 300.00	
City Orlando	State FL	Zip Code 32814	Transaction ID : SB17.4344	
Purpose of Disbursement		Category/ Type 003		
Candidate Name Wes Neuman For Congress		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL District: 07				

SUBTOTAL of Disbursements This Page (optional).....	1690.94
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 12 OF 26			
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. Ashley Parsons Design, LLC		Date of Disbursement MM / DD / YYYY 05 / 20 / 2014	
Mailing Address 1483 Lake Baldwin Lane Ste c		Amount of Each Disbursement this Period 369.79	
City Orlando	State FL	Zip Code 32814	Transaction ID : SB17.4345
Purpose of Disbursement		Category/Type 004	
Candidate Name Wes Neuman For Congress		Disbursement For: 2014	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 07		

Full Name (Last, First, Middle Initial) B. AT&T cellular		Date of Disbursement MM / DD / YYYY 06 / 17 / 2014	
Mailing Address 208 S. Akard St.		Amount of Each Disbursement this Period 196.77	
City Dallas	State TX	Zip Code 75202	Transaction ID : SB17.4407
Purpose of Disbursement AT&T phone		Category/Type 001	
Candidate Name Wes Neuman For Congress		Disbursement For: 2014	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 07		

Full Name (Last, First, Middle Initial) C. Crowne Plaza Hotel		Date of Disbursement MM / DD / YYYY 06 / 29 / 2014	
Mailing Address 4000 S Ocean Dr.		Amount of Each Disbursement this Period 351.61	
City Hollywood	State FL	Zip Code 33019	Transaction ID : SB17.4364
Purpose of Disbursement Crowne Plaza		Category/Type 002	
Candidate Name Wes Neuman For Congress		Disbursement For: 2014	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 07		

SUBTOTAL of Disbursements This Page (optional).....	918.17
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 13 OF 26			
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. Florida Democratic Party		Date of Disbursement MM / DD / YYYY 04 / 28 / 2014	
Mailing Address 214 S Bronough St		Amount of Each Disbursement this Period 350.00	
City Tallahassee	State FL	Zip Code 32301	Transaction ID : SB17.4376
Purpose of Disbursement Florida Democratic Party		Category/ Type 011	
Candidate Name Wes Neuman For Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 07		

Full Name (Last, First, Middle Initial) B. Florida Department of State		Date of Disbursement MM / DD / YYYY 04 / 29 / 2014	
Mailing Address P.O. Box 6327		Amount of Each Disbursement this Period 10440.00	
City Tallahassee	State FL	Zip Code 32314	Transaction ID : SB17.4322
Purpose of Disbursement qualifying fees		Category/ Type 005	
Candidate Name Wes Neuman For Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 07		

Full Name (Last, First, Middle Initial) C. Ellen Juliano		Date of Disbursement MM / DD / YYYY 05 / 13 / 2014	
Mailing Address 1042 Rosetta Drive		Amount of Each Disbursement this Period 500.00	
City Deltona	State FL	Zip Code 32725	Transaction ID : SB17.4338
Purpose of Disbursement campaign consultant		Category/ Type 001	
Candidate Name Wes Neuman For Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 07		

SUBTOTAL of Disbursements This Page (optional).....	11290.00
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 14 OF 26			
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. Ellen Juliano		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014	
Mailing Address 1042 Rosetta Drive		Amount of Each Disbursement this Period 750.00	
City Deltona	State FL	Zip Code 32725	Transaction ID : SB17.4356
Purpose of Disbursement campaign consultant		Category/ Type 001	
Candidate Name Wes Neuman For Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 07		

Full Name (Last, First, Middle Initial) B. Tiffany Namey		Date of Disbursement MM / DD / YYYY 05 / 13 / 2014	
Mailing Address 2411 Chinook Trail		Amount of Each Disbursement this Period 500.00	
City Maitland	State FL	Zip Code 32751	Transaction ID : SB17.4339
Purpose of Disbursement campaign consultant		Category/ Type 001	
Candidate Name Wes Neuman For Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 07		

Full Name (Last, First, Middle Initial) C. Tiffany Namey		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014	
Mailing Address 2411 Chinook Trail		Amount of Each Disbursement this Period 1574.36	
City Maitland	State FL	Zip Code 32751	Transaction ID : SB17.4355
Purpose of Disbursement campaign consultant		Category/ Type 001	
Candidate Name Wes Neuman For Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 07		

SUBTOTAL of Disbursements This Page (optional)	2824.36
TOTAL This Period (last page this line number only)	

NOTICE: THIS IS NOT A FINAL COPY

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 26			
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. WESLEY RYAN NEUMAN		Date of Disbursement MM / DD / YYYY 04 / 07 / 2014	
Mailing Address PO BOX 915949		Amount of Each Disbursement this Period 999.99 Transaction ID : SB17.4329	
City LONGWOOD	State FL	Zip Code 32791	Category/ Type 003
Purpose of Disbursement			
Candidate Name Wes Neuman For Congress		Disbursement For: 2014	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 07		

Full Name (Last, First, Middle Initial) B. WESLEY RYAN NEUMAN		Date of Disbursement MM / DD / YYYY 06 / 27 / 2014	
Mailing Address PO BOX 915949		Amount of Each Disbursement this Period 999.99 Transaction ID : SB17.4360	
City LONGWOOD	State FL	Zip Code 32791	Category/ Type 002
Purpose of Disbursement fundraising reimb			
Candidate Name Wes Neuman For Congress		Disbursement For: 2014	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 07		

Full Name (Last, First, Middle Initial) C. WESLEY RYAN NEUMAN		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014	
Mailing Address PO BOX 915949		Amount of Each Disbursement this Period 999.99 Transaction ID : SB17.4415	
City LONGWOOD	State FL	Zip Code 32791	Category/ Type 009
Purpose of Disbursement			
Candidate Name Wes Neuman For Congress		Disbursement For: 2014	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 07		

SUBTOTAL of Disbursements This Page (optional).....	999.99
TOTAL This Period (last page this line number only).....	999.99

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 26			
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. Ngpvan		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014	
Mailing Address 1101 15th St. NW, suite 500		Amount of Each Disbursement this Period 2700.00	
City Washington	State DC	Zip Code 20005	Transaction ID : SB17.4365
Purpose of Disbursement NGP Van	Category/Type 003		
Candidate Name Wes Neuman For Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL District: 07			

Full Name (Last, First, Middle Initial) B. Oviedo-Winter Springs Chamber of Commerce		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014	
Mailing Address 376 North Central Ave		Amount of Each Disbursement this Period 225.00	
City Oviedo	State FL	Zip Code 32765	Transaction ID : SB17.4348
Purpose of Disbursement 2014 Hob Nob event	Category/Type 007		
Candidate Name Wes Neuman For Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL District: 07			

Full Name (Last, First, Middle Initial) C. Piryx, Inc.		Date of Disbursement MM / DD / YYYY 05 / 01 / 2014	
Mailing Address 144 2nd st. Floor 1		Amount of Each Disbursement this Period 500.00	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.4379
Purpose of Disbursement PIRYX Orange County Democrats	Category/Type 007		
Candidate Name Wes Neuman For Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL District: 07			

SUBTOTAL of Disbursements This Page (optional)	3425.00
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 17 OF 26			
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. Precision Signs		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014	
Mailing Address 207 Main St. S		Amount of Each Disbursement this Period 480.00	
City Austin	State MN	Zip Code 55912	Transaction ID : SB17.4359
Purpose of Disbursement brochures and fact sheet		Category/Type 004	
Candidate Name Wes Neuman For Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 07		

Full Name (Last, First, Middle Initial) B. Publix Super Marken		Date of Disbursement MM / DD / YYYY 05 / 28 / 2014	
Mailing Address 2381 W State Rd. 434		Amount of Each Disbursement this Period 86.44	
City Longwood	State FL	Zip Code 32779	Transaction ID : SB17.4392
Purpose of Disbursement Publix supplies		Category/Type 003	
Candidate Name Wes Neuman For Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 07		

Full Name (Last, First, Middle Initial) C. Shell Oil		Date of Disbursement MM / DD / YYYY 05 / 27 / 2014	
Mailing Address 2690 W State Rd 434		Amount of Each Disbursement this Period 52.51	
City Longwood	State FL	Zip Code 32779	Transaction ID : SB17.4394
Purpose of Disbursement Shell		Category/Type 002	
Candidate Name Wes Neuman For Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 07		

SUBTOTAL of Disbursements This Page (optional).....	618.95
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 18 OF 26			
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. Shell Oil		Date of Disbursement
Mailing Address 2690 W State Rd 434		<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City Longwood	State FL	Zip Code 32779
Purpose of Disbursement Shell	<input type="text" value="002"/>	Amount of Each Disbursement this Period <input type="text" value="59.57"/>
Candidate Name Wes Neuman For Congress	Category/ Type	Transaction ID : SB17.4408
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) B. Shell Oil		Date of Disbursement
Mailing Address 2690 W State Rd 434		<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City Longwood	State FL	Zip Code 32779
Purpose of Disbursement Shell	<input type="text" value="002"/>	Amount of Each Disbursement this Period <input type="text" value="4.23"/>
Candidate Name Wes Neuman For Congress	Category/ Type	Transaction ID : SB17.4409
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) C. Shell Oil		Date of Disbursement
Mailing Address 2690 W State Rd 434		<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Longwood	State FL	Zip Code 32779
Purpose of Disbursement Shell oil	<input type="text" value="002"/>	Amount of Each Disbursement this Period <input type="text" value="56.84"/>
Candidate Name Wes Neuman For Congress	Category/ Type	Transaction ID : SB17.4414
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="120.64"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 26			
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. The Silly Grape		Date of Disbursement MM / DD / YYYY 05 / 13 / 2014
Mailing Address 1720 Fennell St. #5		Amount of Each Disbursement this Period 850.00
City Maitland	State FL	
Zip Code 32751	Purpose of Disbursement Event venue	Transaction ID : SB17.4342
Candidate Name Wes Neuman For Congress	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) B. Wells Fargo Bank		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address 1030 Montgomery Rd.		Amount of Each Disbursement this Period 194.47
City Altamonte Springs	State FL	
Zip Code 32714	Purpose of Disbursement merchant fees	Transaction ID : SB17.4337
Candidate Name Wes Neuman For Congress	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) C. Wells Fargo Bank		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address 1030 Montgomery Rd.		Amount of Each Disbursement this Period 5.00
City Allamonte Springs	State FL	
Zip Code 32714	Purpose of Disbursement merchant refund	Transaction ID : SB17.4349
Candidate Name Wes Neuman For Congress	Category/ Type 010	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

SUBTOTAL of Disbursements This Page (optional).....	1049.47
TOTAL This Period (last page this line number only).....	

ACTION PLAN FOR

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 26			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. Wells Fargo Bank		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 1030 Montgomery Rd.		Amount of Each Disbursement this Period 115.38 Transaction ID : SB17.4354
City Altamonte Springs State FL Zip Code 32714	Purpose of Disbursement merchant fees Category/Type 001	
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) B. Without a Paddle Cafe		Date of Disbursement MM / DD / YYYY 04 / 11 / 2014
Mailing Address 1014 Miami Springs Rd.		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4369
City Longwood State FL Zip Code 32779	Purpose of Disbursement without a paddle event Category/Type 007	
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	615.38
TOTAL This Period (last page this line number only)	26321.86

FROM: 11/11/10 10:00

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) **Wes Neuman For Congress** Transaction ID : **SC/10.4448**

LOAN SOURCE Full Name (Last, First, Middle Initial) **WESLEY RYAN NEUMAN** [PERSONAL FUNDS] Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 915949

City State ZIP Code
LONGWOOD FL 32791

Original Amount of Loan 5000.00 Cumulative Payment To Date 0.00 Balance Outstanding at Close of This Period 5000.00

TERMS Date Incurred M 02 / D 10 / Y 2014 Date Due M M / D D / Y 110514 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) ▶ [] 5000.00

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.

13a - 13b

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) **Wes Neuman For Congress** Transaction ID : **SC/10.4449**

LOAN SOURCE Full Name (Last, First, Middle Initial) **WESLEY RYAN NEUMAN** [PERSONAL FUNDS]
Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 915949

City State ZIP Code
LONGWOOD FL 32791

Original Amount of Loan 2335.91 Cumulative Payment To Date 0.00 Balance Outstanding at Close of This Period 2335.91

TERMS
Date Incurred: M 02, D 18, Y 2014 Date Due: M M, D D, Y 110514 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) ▶ [] 2335.91
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) **Wes Neuman For Congress** Transaction ID : SC/10.4450

LOAN SOURCE Full Name (Last, First, Middle Initial) WESLEY RYAN NEUMAN [PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 915949	

City	State	ZIP Code
LONGWOOD	FL	32791

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5500.00	0.00	5500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 27 / Y 2014	M M / D D / Y 110514	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: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="5500.00"/>
TOTALS This Period (last page in this line only).....	<input style="width: 100%;" type="text"/>

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

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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)
Wes Neuman For Congress

Transaction ID : SC/10.4361

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

WESLEY RYAN NEUMAN

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 915949

City State ZIP Code
LONGWOOD FL 32791

Original Amount of Loan 6134.21	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 6134.21
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TERMS

Date Incurred: M 04 / D 29 / Y 2014
Date Due: M M / D D / Y 110514
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) ▶ [] 6134.21

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.

FACSIMILE TRANSMISSION

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)
Wes Neuman For Congress

Transaction ID : SC/10.4362

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

[PERSONAL FUNDS]

WESLEY RYAN NEUMAN

Election: 2014

Primary
 General

Other (specify) ▼

Mailing Address
PO BOX 915949

City State ZIP Code
LONGWOOD FL 32791

Original Amount of Loan 8000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 8000.00
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TERMS

Date Incurred: M 05 / D 12 / Y 2014
Date Due: M / D / Y 110514
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) ► [] 8000.00

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.

UNION: AMN: HONOR

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Wes Neuman For Congress** Transaction ID : **SC/10.4363**

LOAN SOURCE Full Name (Last, First, Middle Initial) **WESLEY RYAN NEUMAN** [PERSONAL FUNDS] Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
 PO BOX 915949

City State ZIP Code
 LONGWOOD FL 32791

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
 8005.41 0.00 8005.41

TERMS Date Incurred Date Due Interest Rate Secured:
 06 M / 27 D / 2014 Y M M / D D / 110514 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: []

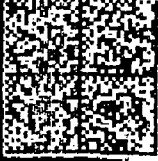
SUBTOTALS This Period This Page (optional) ▶ 8005.41

TOTALS This Period (last page in this line only) ▶ 34975.53

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

Charles Neuman for Congress
30 Wekiva Springs Rd., Suite 3030
Ongwood, FL 32779

7013 1090 0002 2446 6784



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Washington, DC 20463

Federal Election Commission
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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JB

10/20/2014

PREPARER
(8/2013)

DATE PREPARED

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