

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

Wegner for Congress

ADDRESS (number and street)

8221 Tursi Lodge Ct.

Check if different than previously reported. (ACC)

Las Vegas

NV

89131-2059

2. FEC IDENTIFICATION NUMBER ▼

C C00517003

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NV

04

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

in the State of

(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

through

M M /

D D /

Y Y Y Y

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 KENNETH ALEXANDER WEGNER

Signature of Treasurer KENNETH ALEXANDER WEGNER

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Write or Type Committee Name
Wegner 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))....	6386.00	6386.00
(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)).....	6386.00	6386.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5225.22	5225.22
(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)).....	5225.22	5225.22
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1160.78	
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).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Wegner for Congress

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

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).....	2800.00	2800.00
(ii) Unitemized.....	150.00	150.00
(iii) TOTAL of contributions from individuals ▶	2950.00	2950.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	3436.00	3436.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6386.00	6386.00
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	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)..... ▶	6386.00	6386.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5225.22	5225.22
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) ►	5225.22	5225.22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6386.00
25. SUBTOTAL (add Line 23 and Line 24).....	6386.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5225.22
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1160.78

**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 9
	<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)
Wegner for Congress

Full Name (Last, First, Middle Initial) Charmaine Guss		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 29 / 2012
Mailing Address 1461 Arden St.		Transaction ID : SA11AI.4110
City Las Vegas	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation candidate for US Congress	donation by check
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Tal Harel		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 01 / 2012
Mailing Address 5365 Bayou Ct.		Transaction ID : SA11AI.4114
City Las Vegas	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00
Name of Employer Veterans Administration Hospit	Occupation plumber	In-kind - printing
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	

Full Name (Last, First, Middle Initial) Tal Harel		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 01 / 2012
Mailing Address 5365 Bayou Ct.		Transaction ID : SA11AI.4119
City Las Vegas	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Veterans Administration Hospit	Occupation plumber	In-kind - printing
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1300.00	

SUBTOTAL of Receipts This Page (optional).....	1800.00
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 6 OF 9
	<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)
Wegner for Congress

A. Full Name (Last, First, Middle Initial)
Sean Haviland

Mailing Address 95 E. Wigwam Ave.

City Las Vegas State NV Zip Code 89123

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

Name of Employer None Occupation disabled veteran

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2012

Transaction ID : SA11AI.4108

Amount of Each Receipt this Period
500.00
 donation by postal money order

B. Full Name (Last, First, Middle Initial)
Mary K Wegner

Mailing Address 10338 Haledon Ave

City Downey State CA Zip Code 90241

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 19 / 2012

Transaction ID : SA11AI.4100

Amount of Each Receipt this Period
250.00
 donation by check

C. Full Name (Last, First, Middle Initial)
Mary K Wegner

Mailing Address 10338 Haledon Ave

City Downey State CA Zip Code 90241

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2012

Transaction ID : SA11AI.4103

Amount of Each Receipt this Period
250.00
 donation by check

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

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

1000.00

2800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 9
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" 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)
Wegner for Congress

A. Full Name (Last, First, Middle Initial)
KENNETH ALEXANDER WEGNER

Mailing Address 8221 TURSI LODGE CT

City LAS VEGAS State NV Zip Code 89131

FEC ID number of contributing federal political committee. **C H6NV01158**

Name of Employer Retired Occupation Military

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 01 / 2012

Transaction ID : SA11D.4125

Amount of Each Receipt this Period
500.00
contribution by check

B. Full Name (Last, First, Middle Initial)
KENNETH ALEXANDER WEGNER

Mailing Address 8221 TURSI LODGE CT

City LAS VEGAS State NV Zip Code 89131

FEC ID number of contributing federal political committee. **C H6NV01158**

Name of Employer Retired Occupation Military

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
582.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2012

Transaction ID : SA11D.4126

Amount of Each Receipt this Period
82.00
In-kind - paint

C. Full Name (Last, First, Middle Initial)
KENNETH ALEXANDER WEGNER

Mailing Address 8221 TURSI LODGE CT

City LAS VEGAS State NV Zip Code 89131

FEC ID number of contributing federal political committee. **C H6NV01158**

Name of Employer Retired Occupation Military

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3436.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2012

Transaction ID : SA11D.4128

Amount of Each Receipt this Period
2854.00
In-kind - signs, rebar

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

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

3436.00

3436.00

**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 8 OF 9
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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)
Wegner for Congress

Full Name (Last, First, Middle Initial) A. Cox Communications		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2012
Mailing Address PO Box 53262		Amount of Each Disbursement this Period 989.22 Transaction ID : SB17.4112
City Phoenix	State AZ	
Zip Code 85072-3262	Purpose of Disbursement telephone charges	Category/ Type 004
Candidate Name Wegner for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NV District: 04	

Full Name (Last, First, Middle Initial) B. Tal Harel		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2012
Mailing Address 5365 Bayou Ct.		Amount of Each Disbursement this Period 700.00 Transaction ID : SB17.4116
City Las Vegas	State NV	
Zip Code 89130-1759	Purpose of Disbursement In-kind - printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Tal Harel		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2012
Mailing Address 5365 Bayou Ct.		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.4120
City Las Vegas	State NV	
Zip Code 89130-1759	Purpose of Disbursement In-kind - printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2289.22
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 9 OF 9
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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)
Wegner for Congress

Full Name (Last, First, Middle Initial) A. KENNETH ALEXANDER WEGNER		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2012
Mailing Address 8221 TURSI LODGE CT		Amount of Each Disbursement this Period 2854.00
City LAS VEGAS State NV Zip Code 89131	Purpose of Disbursement In-kind - signs, rebar	
Candidate Name	Category/Type	Transaction ID : SB17.4129
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 01	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

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

SUBTOTAL of Disbursements This Page (optional).....	2854.00
TOTAL This Period (last page this line number only).....	5143.22