REPORT OF RECEIPTS AND DISBURSEMENTS

FUNIVI 3	For An Authorize	ed Committee	2022 J. Colinio	27 Jse BAJ 2: 00
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.		
WIESNER FOR SEN	ATE INC. A 1			
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A service of the service of the Process Co. St. St.	Later Grant Control of the Control o		<u> </u>	
	, 6750 W 93RD SUITE 220	, ·. ·		1
ADDRESS (number and street)				
Check if different				
than previously reported. (ACC)	OVERLAND PARK	<u>, .</u> <u> </u>	KS 6621	2
		CITY A	STATE ▲	ZIP CODE A
2. FEC IDENTIFICATION I			• • • • • • • • • • • • • • • • • • • •	30/2017 1/16
C C00563577		THIS (W) X NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT KS 00
4. TYPE OF REPORT (C) (a) Quarterly Reports: April 15 Quarterly July 15 Quarterly October 15 Quart January 31 Year-E Termination Report	Report (Q1) Report (Q2) erly Report (Q3) End Report (YE) (c) 30-	Primary (12P) Convention (12C) ection on Day POST-Election Report for General (30G) ection on	General (12G) Special (12S)	in the State of Special (30S) in the State of
5. Covering Period	10 / 01 / Y Y Y 202	through	12 31 / Y	2021
Certify that I have examined in Type or Print Name of Treasur	. Herl. Kristv. M	of my knowledge and belief it	is true, correct and con	nplete.
He Signature of Treasurer	Huty m	Hero.	Date Date	î.o ' ào àà
NOTE: Submission of false, erro	neous, or incomplete informa	tion may subject the person sign	ning this Report to the per	nalties of 52 U.S.C. §30109
Office Use Only	5% m / 12 4 5 1			EC FORM 3 Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2/7

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name WIESNER FOR SENATE INC

the Committee (Itemize all on

Schedule C and/or Schedule D)

Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 0.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) Net Contributions (other than loans) 0 00 7341.51 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 8.16 15960.99 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 15960.99 8.16 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 497.20 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY

For further information contact:

20500.00

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 05/2016)

PAGE 3 / 7

Write or Type Committee Name

WIESNER FOR SENATE INC

Report Covering the Period:

From:

10 / D D

y y y y 2021

To:

12

31

y y y y 2021

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)	0 00	2250.00		
	(II) Unitemized	0.00	70.00		
	(iii) TOTAL of contributions from individuals	0.00	2320.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0 00	0.00		
	d) The Candidate	0.00	5021.51		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	7341.51		
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
3. l	LOANS:				
(a) Made or Guaranteed by the Candidate	0.00	10000.00		
(b) All Other Loans	0.00	0.00		
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	10000.00		
4. (OFFSETS TO OPERATING				
	EXPENDITURES Refunds, Rebates, etc.)	0.00	0.00		
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00		
•	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	0.00	17341,51		

DETAILED SUMMARY PAGE

of Disbursements

PAGE 4 / 7 FEC Form 3 (Revised 05/2016) **COLUMN A COLUMN B** II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 8.16 15960.99 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0 00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other 0.00 0.00 Than Political Committees..... 0.00 0.00 (b) Political Party Committees..... (c) Other Political Committees 0.00 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 8.16 15960.99 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 505.36 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 0.00 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 505.36 25. SUBTOTAL (add Line 23 and Line 24).....

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)......

(subtract Line 26 from Line 25).....

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

8.16

497.20

SCHEDULE C (FEC Form 3) LC

Use separate schedule(s) FOR LINE NUMBER:

PAGE 5 OF

X	13a
	12h

DANS				Detailed Sum			13a 13b
AME OF COMMITTEE (IN I	·				Transact	ion ID : SC/10.4143	
LOAN SOURCE Full Na WIESNER, PATRI	•	ddle Initial)		Me	emo Item	Election: 2016 x Primary General	
Mailing Address 2717 ANN COURT						Other (specify)	
City		State	ZIP Code	•			
LAWRENCE	·	KS	66046	<u>-</u>		× Personal Funds of th	e Candidate
Original Amount of Loar	10000.00	Cumulative F	Payment To D	ate 0 00	Balan	ice Outstanding at Close o	of This Period
TERMS Date Incu			Date Due		erest Rate	Secu	
M01M / P26P /	Y 2016 Y	M M / D	o / Y12/1		4.0	0	Yes X No
List All Endorsers or G 1. Full Name (Last, Firs		o Loan Sourc		Name of Employ	/er		
Mailing Address			1	Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:			
2. Full Name (Last, First	, Middle Initial)			Name of Employ	/er		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:			
3. Full Name (Last, First	, Middle Initial)			Name of Employ	/er	<u> </u>	
Mailing Address			+	Occupation			
City	State	ZIP Code	,	Amount Guaranteed Outstanding:			
4. Full Name (Last, First	, Middle Initial)			Name of Employ	/er		
Mailing Address			- 	Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:			
SUBTOTALS This Period T	his Page (optional).				. [100	000.00
TOTALS This Period (last p	age in this line only	y)				(1)	
Carry outstanding balance	only to LINE 3, Sci	nedule D, for ti	his line. If no	Schedule D, o	arry forwa	ard to appropriate line of	Summary.

SCHEDULE C (FEC Form 3) LOANS

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

PAGE 6 OF
FOR LINE NUMBER:
(check only one)

×	13a
	125

		Detailed Summary	Page 13b				
NAME OF COMMITTEE (In Full) WIESNER FOR SENATE INC	Trar	nsaction ID : SC/10.4284					
LOAN SOURCE Full Name (Last, First, Middle Initial)							
WIESNER, PATRICK, , ,	tem Election: 2016 Primary General						
Mailing Address 2717 ANN COURT			Other (specify) ▼				
City	State	ZIP Code	Paranal Funda of the Condide				
LAWRENCE	KS	66046	Personal Funds of the Candidat				
Original Amount of Loan	Cumulative Pay	ment To Date	Balance Outstanding at Close of This Perio				
10000.00		0.00	10000.00				
TERMS Date Incurred	D	ate Due Interest					
M10M / 0250 / Y 2016 Y	м м / о о	⁷ 12/31/2016 ⁷	4.00 Yes X N				
List All Endorsers or Guarantors (if any) t	o Loan Source						
Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation					
		Amount Guaranteed					
City	ZIP Code	Outstanding:					
2. Full Name (Last, First, Middle Initial)	-	Name of Employer	Name of Employer				
Mailing Address		Occupation					
		Amount	~ * * * * * * * * * * * * * * * * * * *				
City	ZIP Code	Guaranteed Outstanding:					
3. Full Name (Last, First, Middle Initial)		Name of Employer	***				
Mailing Address		Occupation	.				
		Amount					
City	ZIP Code	Guaranteed Outstanding:					
4. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation					
		Amount					
City State	ZIP Code	Guaranteed Outstanding:					
SUBTOTALS This Period This Page (optional)							
COSTOTALS THIS FERIOD THIS FAGE (OPHONAI).			10000.00				
TOTALS This Period (last page in this line only	/)	·····	(1)				
Carry outstanding balance only to LINE 3. Sch	nedule 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 7 OF
FOR LINE NUMBER:
(check only one)

X	13a
	13b

					Detailed Summary	Page	,	<i>'</i>	13b
	NME OF COMMITTEE (In Full) VIESNER FOR SENATE II	NC			Trar	saction I	D : SC/10.4355	<u></u> L	
	LOAN SOURCE Full Name (Last, WIESNER, PATRICK, , ,	First, Mic	ddle Initial)		☐ Memo It	em Elec	ction: 2016 Primary General		
Mailing Address 2717 ANN COURT						Other (specify)	<u> </u>		
	City LAWRENCE		State KS	ZIP Code 66046	3	×	Personal Funds	of the C	andidate
Original Amount of Loan Cumulative Payme			yment To D	المعصوب	Balance (Outstanding at Cl	-		
	TERMS Date Incurred	0.00		Date Due	0.00 Interest	Rate	(f) (f) (f)	500. Secured:	لــــــــــــــــــــــــــــــــــــــ
	M07M / P09P / ¥ 2020	<u> </u>	M M / D D	/ Y12/1	(If none, 6	4.00	% (apr)	Yes	× No
	List All Endorsers or Guarantors	(if any) to	o Loan Source						
	1. Full Name (Last, First, Middle	Initial)		1	Name of Employer				
	Mailing Address			(Occupation	-			
	City	State	ZIP Code		Amount Guaranteed Outstanding:	(5)]
2. Full Name (Last, First, Middle Initial)					Name of Employer				
	Mailing Address			(Occupation				
					Amount	· ·	~ * * *		7
	City	State	ZIP Code		Guaranteed Outstanding:		6)		J
	3. Full Name (Last, First, Middle In	nitial)	 		Name of Employer				
	Mailing Address			(Occupation				
	City	State	ZIP Code	(Amount Guaranteed Outstanding:	- (i)		<u> </u>]
	4. Full Name (Last, First, Middle In	nitial)		ı	Name of Employer				
Mailing Address			(Occupation					
	0:	lo:	Tain 0 :		Amount Guaranteed	· · · · · · · · · · · · · · · · · · ·			7
	City	State	ZIP Code		Outstanding:				Ţ
SI	UBTOTALS This Period This Page ((optional)				- , - ,		500	00
	OTALS This Period (last page in thi				<u>-</u> _		() 1 () ()	20500.0	
		NE O O O	4.1. 5. 6. 11.	4:			(1)		
	Carry outstanding balance only to LI	NE 3, Sch	edule D, for thi	s line. If no	Schedule D, carry	orward 1	o appropriate lir	ie of Sur	nmary.

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Washington, DC

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USPS Priority Mail Express .		Postmarked				
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No Postmark						
Overnight Delivery Service (Specify):		Shipping Date				
	Next Business	Day Delivery				
Received from House Records & Registrat	tion Office	Date of Receipt				
Received from Senate Public Records Office	се	Date of Receipt				
Received from Electronic Filing Office		Date of Receipt				
Other (Specify):	Date of Re	ceipt or Postmarked				
PREPARER	Ħ	01/28/22 DATE PREPARED				
(3/2015)						