69324

03/16/2016 20 : 35

PAGE 1 / 12

REPO	ORT	OF	REC	<b>EIP</b>	TS
AND	DIS	BUF	RSEN	ΛEN <sup>-</sup>	TS

For Other Than An Authorized Committee

									Office U	Jse Only	
1.	NAME C COMMIT	)F TEE (in full)	TYPE OR	PRINT 🔻		mple: If typin r the lines.	ng, type	12FE	4M5		
M	/eTheP	eople Founda	ation								
	DRESS (n	umber and street)	1301 Inc	ustrial Park [	Drive			<u>     </u>			
C	thar	ck if different previously rted. (ACC)	Tuscalo	osa				AL	3540	)1 	
2.	FEC IDI	ENTIFICATION N	UMBER 🔻	,	CITY 🔺		S			ZIP CO	DE 🔺
	C	00600825			3. IS THIS REPORT		NEW N) <b>OR</b>		AMENDED (A)	1	
4.	<b>TYPE</b> (Choose	<b>DF REPORT</b> One)		nthly port e On:	Feb 20 (M2)		May 20 (M5)		Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Qua	rterly Reports:		×	Mar 20 (M3)		Jun 20 (M6)		Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
		April 15 Quarterly Report (0	Q1)		Apr 20 (M4)		Jul 20 (M7)	<u> </u>	Oct 20 (M10)	) 	Jan 31 (YE)
		July 15 Quarterly Report (0	(C)	12-Day <b>PRE</b> -Electi	on	Primary (12F	?)	Ger	neral (12G)		Runoff (12R)
	П	October 15 Quarterly Report (0		Report for	the:	Convention (	12C)	Spe	ecial (12S)		
		January 31 Year-End Report (			Election on	M M /	D D /	YYYY	Ý	in the State o	f
		July 31 Mid-Year Report (Non-electio Year Only) (MY)	on (d)	30-Day <b>POST</b> -Elec Report for		General (300	ā)	Rur	noff (30R)		Special (30S)
		Termination Report (TER)	t	·	Election on	M M /		Y Y Y	Y	in the State o	f
5.	Covering	Period 02			2016	through	M M 02	/ D 29		)16	
	-	have examined the Name of Treasure	-	and to the b Stan Pate IV	est of my kno	wledge and I	belief it is true	e, correc	ct and comple	ete.	
Sig	nature of	Traceuror Luth	er Stan Pate I	V		[Electronically		ate	M M / D 03 1	6 /	2016
Jigi							, <u></u> , Di				2010
NO		ssion of false, error	neous, or inc	complete info	rmation may su	bject the pers	son signing thi	is Repor	t to the penal	ties of 2 l	J.S.C. §437g.
I	Off Us _ Or									C FOR Rev. 12/20	

iiiid						
Γ	FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2			
٧	Vrite or Type Committee Name					
١	WeThePeople Foundation					
R	Report Covering the Period: From:	02 01 Y Y Y Y Y 2016	To: 02 / 29 / 2016			
		COLUMN A This Period	COLUMN B Calendar Year-to-Date			
6.	(a) Cash on Hand January 1, 2016		0.00			
	(b) Cash on Hand at Beginning of Reporting Period	418.44				
	(c) Total Receipts (from Line 19)	1760.72	129931.13			
	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	2179.16	129931.13			
7.	Total Disbursements (from Line 31)	1764.04	129516.01			
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	415.12	415.12			
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)	21500.00				

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### 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 3X (Rev. 06/2004)

Write or Type Committee Name

# WeThePeople Foundation

Report Covering the Period: From: 02	01 2016 To	b: 02 29 2016
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	1760.72	100201.10
(i) Itemized (use Schedule A)	1700.72	129391.12
(ii) Unitemized	0.00	540.01
(iii) TOTAL (add		7 7
Lines 11(a)(i) and (ii)	1760.72	129931.13
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	1760.72	129931.13
Totals to Line 33, page 5)▶		
Party Committees	0.00	0.00
	7 7	
All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures		7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		
to Federal Candidates and Other Political Committees	0.00	0.00
Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))	1760.72	129931.13

20. Total Federal Receipts (subtract Line 18(c) from Line 19)......►



Page 3

I

# DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)		Page 4
	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. (	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(	(b) Other Federal Operating Expenditures	0.00	0.00
(	(c) Total Operating Expenditures		
_	(add 21(a)(i), (a)(ii), and (b))►	0.00	0.00
	Transfers to Affiliated/Other Party Committees	0.00	0.00
(	Contributions to Federal Candidates/Committees and Other Political Committees		
	and Other Political Committees	0.00	0.00
(	(use Schedule E)	1764.04	129516.01
(	Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
		0.00	0.00
l	Loan Repayments Made		
F	Loans Made Refunds of Contributions To:	0.00	0.00
(	(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	0.00	0.00
	(add Lines 28(a), (b), and (c))►		0.00
. (	Other Disbursements	0.00	0.00
F	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
,	(ii) "Levin" Share	0.00	0.00
(	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))►		0.00
	Total Disbursements (add Lines 21(c), 22,		
2	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1764.04	129516.01
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	1764.04	
t	from Line 31)	1764.04	129516.01

L

### DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Total Contributions (other than loans) (from Line 11(d), page 3)	1760.72	129931.13
. Total Contribution Refunds (from Line 28(d))	0.00	0.00
. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1760.72	129931.13
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	0.00	0.00
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         6         OF         12           (check only one)         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) WeThePeople Foundation			
Full Name (Last, First, Middle Initial) A. Luther Stan Pate IV			Date of Receipt
Mailing Address 1301 Industrial Park Drive			02 01 _ 2016 _
City Tuscaloosa	State AL	Zip Code 35401	Transaction ID : SA11AI.4176 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		200.00
Name of Employer Coal Bed Services Inc.	Occupation Owner		— Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 127930.40	]
Full Name (Last, First, Middle Initial) B. Luther Stan Pate IV			Date of Receipt
Mailing Address 1301 Industrial Park Drive	State	Zip Code	02 07 2016 Transaction ID : SA11AI.4177
Tuscaloosa	AL	35401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		52.25
Name of Employer Coal Bed Services Inc.	Occupation Owner		Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 127982.65	
Full Name (Last, First, Middle Initial) C. Luther Stan Pate IV			Date of Receipt
Mailing Address 1301 Industrial Park Drive			M = M / D = D / Y = Y = Y 02 08 2016
City Tuscaloosa	State AL	Zip Code 35401	Transaction ID : SA11AI.4178 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		8.47
Name of Employer Coal Bed Services Inc.	Occupation Owner		Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 127991.12	]
SUBTOTAL of Receipts This Page (optional)			260.72

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

FEC Schedule A (Form 3X) Rev. 12/2015

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         7         OF         12           (check only one)
or for commercial purposes, other than using t			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) WeThePeople Foundation			
Full Name (Last, First, Middle Initial) A. Luther Stan Pate IV			Date of Receipt
Mailing Address 1301 Industrial Park Drive			M M / D D / Y Y Y Y 02 22 2016
City Tuscaloosa	State AL	Zip Code 35401	Transaction ID : SA11AI.4179 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1500.00
Name of Employer Coal Bed Services Inc.	Occupation Owner	1	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 129491.12	]
Full Name (Last, First, Middle Initial) B. Mailing Address			Date of Receipt
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer	Occupation	1	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	]
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		
Name of Employer	Occupation	1	Memo Item
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	]
SUBTOTAL of Receipts This Page (optional).			1500.00

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

FEC Schedule A (Form 3X) Rev. 12/2015

 1760.72

SCHEDULE D (FEC Form 3X)       Iteles corners       Iteles corner       Iteles corners	60				
Description (Construction (	30	REDULE D (FEC FORM 3X)		(Use separate	PAGE 8 OF 12
Excluding Loans     for each number of ine)     (check only one)     9       INME OF COMMITTEE (in Full)     We The People Foundation       A Full Name (Last, First, Middle Initial) of Debtor or Creditor     Nature of Debt (Purpose):       Balance of Advertising       Mailing Address     Zip Code       Outstanding Balance Beginning This Period     Outstanding Balance at Close of This Period       Data and the period     Payment This Period       Data and the period     Payment This Period       Outstanding Balance Beginning This Period     Outstanding Balance at Close of This Period       Data and the period     Payment This Period       Data and the period     Payment This Period       Outstanding Balance Beginning This Period     Outstanding Balance at Close of This Period       Data and the period     Payment This Period       Outstanding Balance Beginning This Period     Outstanding Balance at Close of This Period       City     State       Data and ing Balance Beginning This Period       Data	DE	BTS AND OBLIGATIONS			
NAME OF COMMITTEE (In Full)       Image: Committee (In Full)         WE THR PEOPLE Foundation       A. Full Name (Last, First, Middle Initial) of Debtor or Creditor         A. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose);         Balance of Adventising       City         State       Zip Code         Williston       Transaction ID : SD10.4108         Image: City       State         0.00       0.00         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose);         Mailing Address       Zip Code         City       State         D. Sull Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose);         Mailing Address       Zip Code         City       State         Zip Code       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period         City       State       Zip Code         City       State <td></td> <td></td> <td></td> <td></td> <td></td>					
WeThePeople Foundation         A. Full Name (Last, First, Middle Initial) of Debtor or Creditor         Mailing Address         City       State         Zip Code         Willston         PL       32696         Outstanding Balance Beginning This Period         Zip Code         Outstanding Balance Beginning This Period         Payment This Period         Outstanding Balance at Close of This Period         Difference         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor         Mailing Address         City       State         City       State         Zip Code         Outstanding Balance Beginning This Period         Outstandi				numbered line)	X 10
AirSign       Balance of Advertising         Mailing Address       12 NW 5th Place         City       State       Zip Code         Villation       FL       32696         Outstanding Balance Beginning This Period       Cutstanding Balance at Cicse of This Period         0.00       21500.00       Anount Incurred This Period         0.00       21500.00       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Cicse of This Period         Outstanding Balance Beginning This Period       Outstanding Balance at Cicse of This Period         City       State       Zip Code         City       State       Zip Code         City       State       Zip Code         Outstanding Balance at Cicse of This Period       Interest of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance at Cicse of This Period       Interest of Debt (Purpose):       Interest of Debt (Purpose):         Mailing Address       City       State       Zip Code       Outstanding Balance at Cicse of This Period         Interest This Period       Period       Payment This					
AIrSign         Mailing Address       12 NW 6th Place         City       State       Zip Code         Williston       FL       32696         Outstanding Balance Beginning This Period       Transaction ID : SD10.4108		A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of D	ebt (Purpose):
Mailing Address       12 NW Sh Place         City       State       Zip Code         Williston       FL       32696         Outstanding Balance Beginning This Period       Cutstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         City       State       Zip Code       Outstanding Balance at Close of This Period         City       State       Zip Code       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         City       State       Zip Code       Outstanding Balance at Close of This Period         City       State       Zip Code       Outstanding Balance at Close of This Period         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Quitanding Balance at Clos		AirSian		Balance of	Advertising
City       State       Zip Code         Vulsanding Balance Beginning This Period       Transaction ID : SD10.4108         21500.00       Amount Incurred This Period       Outstanding Balance at Close of This Period         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         Internet <t< td=""><td></td><td>/ e.g.:</td><td></td><td></td><td></td></t<>		/ e.g.:			
Williston       FL       32696         Outstanding Balance Beginning This Period       Transaction ID : SD10.4108         21500.00       Amount Incurred This Period       Outstanding Balance at Close of This Period         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         Intervent This Period       Payment This Period       Outstanding Balance at Close of This Period		Mailing Address 12 NW 5th Place			
Williston       FL       32696         Outstanding Balance Beginning This Period       Transaction ID : SD10.4108         21500.00       Amount Incurred This Period       Outstanding Balance at Close of This Period         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         Intervent This Period       Payment This Period       Outstanding Balance at Close of This Period	ŀ	City State	Zip Code		
Outstanding Balance Beginning This Period       Transaction ID : SD10.4108         21500.00       Amount Incurred This Period       Outstanding Balance at Close of This Period         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Outstan		5	-		
Cutationing balance degining This Period       Outstanding Balance at Close of This Period         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         I)       SUBTOTALS This Period This Page (optional)			32030		
Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         I       SUBTOTALS This Period This Period       Payment This Period         Outstanding Balance at Close of This Period       21500.00         I       Subtortals This Period (last page this line number only)       0.00         I       Outstanding Loans from Schedule C (last page only)       0.00 </td <td></td> <td>Outstanding Balance Beginning This Period</td> <td></td> <td>Transacti</td> <td>on ID : SD10.4108</td>		Outstanding Balance Beginning This Period		Transacti	on ID : SD10.4108
Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         I       SUBTOTALS This Period This Period       Payment This Period         Outstanding Balance at Close of This Period       21500.00         I       Subtortals This Period (last page this line number only)       0.00         I       Outstanding Loans from Schedule C (last page only)       0.00 </td <td></td> <td>21500.00</td> <td></td> <td></td> <td></td>		21500.00			
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         City       State       Zip Code       Outstanding Balance at Close of This Period         City       State       Zip Code         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Intervention This Period       Payment This Period       Outstanding Balance at Close of This Period         Intervention This Period This Period       Payment This Period       Outstanding Balance at Close of This Period         Intervention This Period (last page this line number only)       Payment This Period       0.00         Introduction This Period (last page this line number only)       Payment This Period       0.00         Introduction This		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         Image: City       State       Zip Code       Outstanding Balance at Close of This Period         Image: City       State       Zip Code       Outstanding Balance at Close of This Period         Image: City       State       Zip Code       Outstanding Balance at Close of This Period         Image: City       State       Zip Code       Outstanding Balance at Close of This Period         Image: City       State       Zip Code       Outstanding Balance at Close of This Period         Image: City       State       Zip Code       Image: City City City City City City Cit		Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         Image: City       State       Zip Code       Outstanding Balance at Close of This Period         Image: City       State       Zip Code       Outstanding Balance at Close of This Period         Image: City       State       Zip Code       Outstanding Balance at Close of This Period         Image: City       State       Zip Code       Outstanding Balance at Close of This Period         Image: City       State       Zip Code       Outstanding Balance at Close of This Period         Image: City       State       Zip Code       Image: City City City City City City Cit		0.00	0.0	0	21500.00
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C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         1)       SUBTOTALS This Period This Page (optional)					
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         1)       SUBTOTALS This Period This Page (optional)		Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
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Mailing Address         City       State       Zip Code         Outstanding Balance Beginning This Period					
Mailing Address         City       State       Zip Code         Outstanding Balance Beginning This Period	ļ				
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City       State       Zip Code         Outstanding Balance Beginning This Period					
City       State       Zip Code         Outstanding Balance Beginning This Period					
Outstanding Balance Beginning This Period         Amount Incurred This Period         Payment This Period         Outstanding Balance at Close of This Period         Outstanding Balance at Close of This Period         1) SUBTOTALS This Period This Page (optional)		Mailing Address			
Outstanding Balance Beginning This Period         Amount Incurred This Period         Payment This Period         Outstanding Balance at Close of This Period         Outstanding Balance at Close of This Period         1) SUBTOTALS This Period This Page (optional)					
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1) SUBTOTALS This Period This Page (optional)					
1) SUBTOTALS This Period This Page (optional)		Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
<ul> <li>2) TOTALS This Period (last page this line number only)</li></ul>					, , , , , , , , , , , , , , , , , , , ,
<ul> <li>2) TOTALS This Period (last page this line number only)</li></ul>					
<ul> <li>2) TOTALS This Period (last page this line number only)</li></ul>		, , ,			, ,
<ul> <li>2) TOTALS This Period (last page this line number only)</li></ul>					
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	1)	SUBTOTALS This Period This Page (optional)		🕨	21500.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	Η.				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	2)	TOTALS This Period (last page this line number of	only)	🕨 🔰 💶 🗉	21500.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	É			_	
24500.00	3)	TOTAL OUTSTANDING LOANS from Schedule C	(last page only)	►	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) > 21500.00	<u> </u>				
	4)	ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page or	nly) ▶	21500.00

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 9 OF 12 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER V
WeThePeople Foundation		C C00600825
Check if 24-hour report 48-hour report New rep	ort Amends report f	iled on
Full Name of Payee	Memo Item	Date of Public Distribution/Dissemination
Bank of Tuscaloosa		02 01 Y Y Y Y 02 01 2016
Mailing Address P O Box 2508		Amount
City State	Zip Code	43.00
Tuscaloosa AL	35403	Transaction ID : SE.4180 Date of Disbursement or Obligation
Purpose of Expenditure Service Charge	Category/ Type 001	02 / 01 / 2016
Name of Federal Candidate	Support O	ffice Sought: House District:
INC. DONALD J. TRUMP FOR PRESIDENT		Image: Second state     Image: Second state       Image: Second state     Image: Second state
Calendar Year-To-Date		isbursement For: Primary X General
Per Election for Office Sought	127794.97 20	Other (specify)
Full Name of Payee Bank of Tuscaloosa	Memo Item	Date of Public Distribution/Dissemination
		02 03 Y Y Y Y Y 2016
Mailing Address P O Box 2508		Amount
City State	Zip Code	137.47
Tuscaloosa AL	35403	Transaction ID : SE.4181 Date of Disbursement or Obligation
Purpose of Expenditure	Category/	M M / D D / Y Y Y Y
Deluxe Business Checks	Type 001	02 03 2016
Name of Federal Candidate	Support C	ffice Sought: House District:
INC. DONALD J. TRUMP FOR PRESIDENT	X Oppose	X         President         Senate         State:
Calendar Year-To-Date		isbursement For: Primary X General
Per Election for Office Sought		Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	••••••	180.47
(b) SUBTOTAL of Uniternized Independent Expenditures		
(c) TOTAL Independent Expenditures	•	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Luther Stan Pate IV [Electron]	ically Filed] Date	03 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 10 OF 12 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
WeThePeople Foundation		C C00600825
Check if 24-hour report 48-hour report	New report Amends report	filed on
Full Name of Payee	Memo Iten	Date of Public Distribution/Dissemination
Bank of Tuscaloosa		02 29 2016
Mailing Address P O Box 2508		Amount
City State	Zip Code	25.00
Tuscaloosa AL	35403	Transaction ID : SE.4187 Date of Disbursement or Obligation
Purpose of Expenditure Service Fees	Category/ Type 001	02 / 29 / 2016
Name of Federal Candidate	Support (	Dffice Sought: House District:
INC. DONALD J. TRUMP FOR PRESIDENT	X Oppose	President Senate State:
Calendar Year-To-Date		Disbursement For: Primary X General
Per Election for Office Sought	129518.16	2016 Other (specify) ►
Full Name of Payee Bryan Cleveland	Memo Item	Date of Public Distribution/Dissemination
		02 22 2016
Mailing Address 1701 King James Drive		Amount
City State	Zip Code	1500.00
Alabaster AL	35007	Transaction ID : SE.4185 Date of Disbursement or Obligation
Purpose of Expenditure Website Graphics and Design	Category/ Type 004	
Name of Federal Candidate	Support	Office Sought: House District:
INC. DONALD J. TRUMP FOR PRESIDENT	X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary X General 2016 Other (specify) ►
	,	
(a) SUBTOTAL of Itemized Independent Expenditures		1525.00
(b) SUBTOTAL of Unitemized Independent Expenditures		
(a) TOTAL Independent Expanditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent exper- with, or at the request or suggestion of, any candidate or au party committee) any political party committee or its agent.		
Luther Stan Pate IV [.	Electronically Filed] Date	03 16 / Y Y Y Y Y
Signature		

Image# 201603169009769334

ITE	EMIZED INDEPENDENT EXPENDITURES				PAGE 11 OF 12 FOR LINE 24 OF FORM 3X		
	AME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER V		
	VeThePeople Foundation			С	C00600825		
				Г М /	/ D D / Y Y Y Y Y		
Ch	neck if 24-hour report 48-hour report New rep	ort Amends repo	ort filed on				
	Full Name of Payee Constant Contact	Memo It	em Date	of Publi	c Distribution/Dissemination		
			N	02	07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Mailing Address 1601 Trapelo Road		Amou	int			
	Suite 329			-			
	City State	Zip Code			52.25		
	Waltham MA	02451			D: SE.4182 ursement or Obligation		
	Purpose of Expenditure Mass Email	Category/ Type 004	N	02	/ D D / Y Y Y Y 07 / 2016		
	Name of Federal Candidate	Support	Office Sough	nt:	House District:		
	INC. DONALD J. TRUMP FOR PRESIDENT	X Oppose	X Preside	_	Senate State:		
	Calendar Year-To-Date		Disbursemer	nt For:	Primary X General		
	Per Election for Office Sought	127984.69	2016	ther (sp	pecify) ►		
	Full Name of Payee	Memo Ite	em Date	of Publi	ic Distribution/Dissemination		
	Daddy Go			02	/ D D / Y Y Y Y 08 2016		
	Mailing Address		Amou	unt			
	City State	Zip Code			8.47 D : SE.4183		
	Purpose of Expenditure	Category/			ursement or Obligation		
	Domain Name	Type 001	L	02	08 2016		
	Name of Federal Candidate	Support	Office Sough	nt:	House District:		
	INC. DONALD J. TRUMP FOR PRESIDENT	X Oppose	X Presid	ent	Senate State:		
	Calendar Year-To-Date	107002 16	Disbursemer 2016	nt For:	Primary X General		
	Per Election for Office Sought	127993.16		Other (s	pecify) ►		
(a) SUBTOTAL of Itemized Independent Expenditures							
(b) SUBTOTAL of Unitemized Independent Expenditures							
	(c) TOTAL Independent Expenditures		•		1 1 7 1 1 7 1		
	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
		<i>ically Filed]</i> Date	e 03 /	D D D 16	/ Y Y Y Y 2016		
	Signature			_			

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 12 OF 12 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER V
WeThePeople Foundation		C C00600825
Check if 24-hour report 48-hour report New report	ort Amends report	filed on
Full Name of Payee PayPal	Memo Iter	
Mailing Address		02 29 2016
		Amount
City State	Zip Code	0.60 Transaction ID : SE.4188
Purpose of Expenditure Fees	Category/ Type 001	Date of Disbursement or Obligation
Name of Federal Candidate	Support	Office Sought: House District:
INC. DONALD J. TRUMP FOR PRESIDENT	X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary X General 2016 Other (specify) ►
Full Name of Payee	Memo Item	
PayPal		02 29 2016
Mailing Address		
		Amount
City State	Zip Code	-2.75 Transaction ID : SE.4189 Date of Disbursement or Obligation
Purpose of Expenditure Reimburse Fees	Category/ Type 001	02 / <sup>D</sup> D / <sup>Y</sup> Y Y Y 2016
Name of Federal Candidate	Support	Office Sought: House District:
INC. DONALD J. TRUMP FOR PRESIDENT	X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	129516.01	Disbursement For: Primary X General 2016 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures		-2.15
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		▶ 1764.04
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Luther Stan Pate IV [Electron	ically Filed] Date	03 / D D / Y Y Y Y Y 16 2016
Signature		