

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

16 FEB -8 AM 11:45

Office Use Only

12FE4M5

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT**

Example: If typing, type over the lines.

People for Rick Weiland

ADDRESS (number and street)

PO Box 1488

Check if different than previously reported. (ACC)

Sioux Falls

SD

57101

2. FEC IDENTIFICATION NUMBER

C00545160

CITY

STATE

ZIP CODE

STATE

DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

SD

56

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

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

10

01

2015

through

12

31

2015

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 Ms. Beverly H Casey

Signature of Treasurer

Beverly Casey

Date

01

29

2016

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)

201602080200069353

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 12
18

Write or Type Committee Name
People for Rick Weiland

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))	241.13	33069.37
(b) Total Contribution Refunds (from Line 20(d))	0.00	1066.00
(c) Net Contribution (other than loans) (subtract Line 6(b) from Line 6(a))	241.13	32003.37
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	376.74	97109.24
(b) Total Offsets to Operating Expenditures (from Line 14)	239.40	239.40
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	137.34	96869.84
8. Cash on Hand at Close of Reporting Period (from Line 27)	313.86	
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)		

For further information contact:

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

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

201602080200069354

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 02/2003)

PAGE 3 / 12/18

Write or Type Committee Name

People for Rick Weiland

Report Covering the Period: From:

10 01 2015

To:

12 31 2015

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)	25.00	1559.00
(ii) Unitemized	216.13	21510.37
(iii) TOTAL of contributions from individuals	241.13	23069.37
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	10000.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add lines 11(a)(iii), (b), (c), and (d))	241.13	33069.37
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.)	239.40	239.40
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)	480.53	33308.77

201602080200069355

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 1

12/16

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES _____	376.74	97109.24
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES _____	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate _____	0.00	100000.00
(b) Of All Other Loans _____	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)) _____	0.00	100000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees _____	0.00	1066.00
(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	1066.00
21. OTHER DISBURSEMENTS _____	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) _____	376.74	198175.24

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD _____	210.07
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3) _____	480.53
25. SUBTOTAL (add Line 23 and Line 24) _____	690.60
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) _____	376.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) _____	313.86

201602080200069356

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

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

FOR LINE NUMBER: PAGE 5 / ¹²/₁₃
 (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
People for Rick Weiland

Full Name (Last, First, Middle Initial) Kathleen Dalton			Date of Receipt		
Mailing Address 206 Hillsborough St			<input type="text" value="11"/>	<input type="text" value="12"/>	<input type="text" value="2015"/>
City Chapel Hill	State NC	Zip Code 27514-3521	Transaction Id: VN8PXD MX3A1		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period		
<input type="text"/>			<input type="text" value="25.00"/>		
Name of Employer RTI International		Occupation Health Economist			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	<input type="text" value="250.00"/>		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="25.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="25.00"/>

201602080200069357

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

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

FOR LINE NUMBER: PAGE 6 / 13
 (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
 People for Rick Weiland

Full Name (Last, First, Middle Initial) NGP VAN			Date of Receipt		
Mailing Address 1101 15th St NW Ste 500			12	14	2015
City Washington	State DC	Zip Code 20005-5006	Transaction Id: VN8PXDMSG50		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period		
Name of Employer			239.40		
Occupation			Fee Refund		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 239.40			

SUBTOTAL of Receipts This Page (optional)	239.40
TOTAL This Period (last page this line number only)	239.40

201602080200069358

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 13
	(check only one) <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)
People for Rick Weiland

Full Name (Last, First, Middle Initial) ActBlue		Date of Disbursement	
Mailing Address 14 Arrow St		10	23
City State Zip Code Cambridge MA 02138-5106		2015	
Purpose of Disbursement Credit Card Processing Fee		Amount of Disbursement this Period	
Candidate Name		1.93	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID: VN7QN9VJ1T9	
Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/Type	
State:	District:		

Full Name (Last, First, Middle Initial) ActBlue		Date of Disbursement	
Mailing Address 14 Arrow St		10	30
City State Zip Code Cambridge MA 02138-5106		2015	
Purpose of Disbursement Credit Card Processing Fee		Amount of Disbursement this Period	
Candidate Name		0.72	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID: VN7QN9VJ1S1	
Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/Type	
State:	District:		

Full Name (Last, First, Middle Initial) ActBlue		Date of Disbursement	
Mailing Address 14 Arrow St		11	30
City State Zip Code Cambridge MA 02138-5106		2015	
Purpose of Disbursement Credit Card Processing Fee		Amount of Disbursement this Period	
Candidate Name		2.36	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID: VN7QN9VJ1R3	
Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/Type	
State:	District:		

SUBTOTAL of Receipts This Page (optional)	5.01
TOTAL This Period (last page this line number only)	

201602080200069359

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

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

FOR LINE NUMBER: PAGE 8 / 12/3
(check only one)
 17 18 19a 19b 20a 20b
 20c 21

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NAME OF COMMITTEE (In Full)

People for Rick Weiland

Full Name (Last, First, Middle Initial) ActBlue		Date of Disbursement	
Mailing Address 14 Arrow St		12	21
City State Zip Code Cambridge MA 02138-5106		2015	
Purpose of Disbursement Credit Card Processing Fee		Amount of Disbursement this Period	
Candidate Name		0.69	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID: VN7QN9VJ1Q5	
Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) First Bank and Trust		Date of Disbursement	
Mailing Address 110 N Minnesota Ave Ste 100		10	01
City State Zip Code Sioux Falls SD 57104-6467		2015	
Purpose of Disbursement Bank Fees		Amount of Disbursement this Period	
Candidate Name		5.39	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID: VN7QN9VJ121	
Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) First Bank and Trust		Date of Disbursement	
Mailing Address 110 N Minnesota Ave Ste 100		10	05
City State Zip Code Sioux Falls SD 57104-6467		2015	
Purpose of Disbursement Bank Fees		Amount of Disbursement this Period	
Candidate Name		19.95	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID: VN7QN9VJ106	
Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

SUBTOTAL of Receipts This Page (optional)	26.03
TOTAL This Period (last page this line number only)	

201602080200069360

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

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

FOR LINE NUMBER: PAGE 10 / 13
(check only one)
 17 18 19a 19b 20a 20b
 20c 21

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NAME OF COMMITTEE (In Full)

People for Rick Weiland

Full Name (Last, First, Middle Initial)
First Bank and Trust

Date of Disbursement

11 03 2015

Mailing Address

110 N Minnesota Ave Ste 100

City State Zip Code
Sioux Falls SD 57104-6467

Amount of Disbursement this Period

19.95

Purpose of Disbursement
Bank Fees

Category/
Type

Transaction ID: VN7QN9VJ0Y0

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)
First Bank and Trust

Date of Disbursement

12 01 2015

Mailing Address

110 N Minnesota Ave Ste 100

City State Zip Code
Sioux Falls SD 57104-6467

Amount of Disbursement this Period

5.14

Purpose of Disbursement
Bank Fees

Category/
Type

Transaction ID: VN7QN9VJ0W4

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)
Mileage Plus United Visa

Date of Disbursement

10 07 2015

Mailing Address

PO Box 94014

City State Zip Code
Palatine IL 60094-4014

Amount of Disbursement this Period

50.00

Purpose of Disbursement
Credit Card Payment

Category/
Type

Transaction ID: VN7QN9VJ139

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

SUBTOTAL of Receipts This Page (optional)

75.09

TOTAL This Period (last page this line number only)

201602080200069362

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

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

FOR LINE NUMBER: PAGE 11 / 13
(check only one)
 17 18 19a 19b 20a 20b
 20c 21

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NAME OF COMMITTEE (In Full)

People for Rick Weiland

Full Name (Last, First, Middle Initial) Media Temple		Date of Disbursement 10 07 2015
Mailing Address 8520 National Blvd # A		Amount of Disbursement this Period 50.00
City Culver City	State CA	
Zip Code 90232-2418		Transaction ID: VN7QN9VJ147
Purpose of Disbursement Office Expense		[MEMO ITEM] *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) Mileage Plus United Visa		Date of Disbursement 11 13 2015
Mailing Address PO Box 94014		Amount of Disbursement this Period 175.00
City Palatine	State IL	
Zip Code 60094-4014		Transaction ID: VN7QN9VJ155
Purpose of Disbursement Credit Card Payment		[MEMO ITEM] *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) Media Temple		Date of Disbursement 11 13 2015
Mailing Address 8520 National Blvd # A		Amount of Disbursement this Period 50.00
City Culver City	State CA	
Zip Code 90232-2418		Transaction ID: VN7QN9VJ163
Purpose of Disbursement Office Expense		[MEMO ITEM] *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Receipts This Page (optional)	175.00
TOTAL This Period (last page this line number only)	

201602080200069363

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

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

FOR LINE NUMBER: PAGE 12 / 13
(check only one)
 17 18 19a 19b 20a 20b
 20c 21

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NAME OF COMMITTEE (In Full)
People for Rick Weiland

Full Name (Last, First, Middle Initial) NGP VAN		Date of Disbursement 11 30 2015	
Mailing Address 1101 15th St NW Ste 500		Amount of Disbursement this Period 125.00	
City Washington	State DC	Zip Code 20005-5006	Transaction ID: VN7QN9VJ171
Purpose of Disbursement Office Expense		Category/ Type	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) Mileage Plus United Visa		Date of Disbursement 12 04 2015	
Mailing Address PO Box 94014		Amount of Disbursement this Period 50.00	
City Palatine	State IL	Zip Code 60094-4014	Transaction ID: VN7QN9VJ189
Purpose of Disbursement Credit Card Payment		Category/ Type	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) Media Temple		Date of Disbursement 12 04 2015	
Mailing Address 8520 National Blvd # A		Amount of Disbursement this Period 50.00	
City Culver City	State CA	Zip Code 90232-2418	Transaction ID: VN7QN9VJ197
Purpose of Disbursement Office Expense		Category/ Type	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Receipts This Page (optional)	50.00
TOTAL This Period (last page this line number only)	376.74

201602080200069364

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

January 30, 2016

16 FEB -8 AM 11:44

Senate Office of Public Records
232 Hart Senate Office Building
Washington, DC 20510

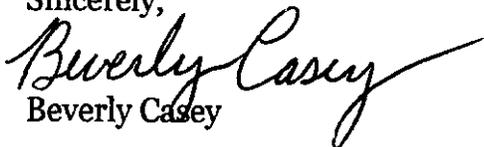
Enclosed please find 2015 Year End Report and Amendment 2 for Post-General Report.

This letter serves as intent to terminate this Candidate Committee.

As of 12/31/15 this account shows Cash on Hand that will be donated to TakeItBack.Org-Political Action, FEC ID# C00572453, and our bank account will be closed.

Should you need additional information, please contact me at (605) 906-0935.

Sincerely,


Beverly Casey

201602080200069365

TION

United States Senate
Post Office



FOR
INSPECTION

United States Senate
Post Office



FOR
INSPECTION



U.S. POSTAGE
CPU \$ 5.09⁰
MAILED JAN 30 2016
57105



The Office of Public Records
512 Hart 503
Washington, DC 20510

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Senate Post Office
FEB 02 2016

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Senate Post Office
FEB 02 2016



7015 0640 0002 6259 9285



John Brickwell
Box 2017
Sioux Falls, SD 57105

936690002080209102

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED 1-30-16
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

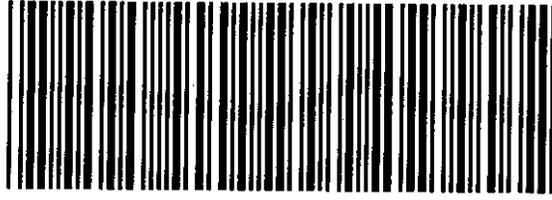
POSTMARK ILLEGIBLE POSTMARK

FAX _____
Date of Receipt

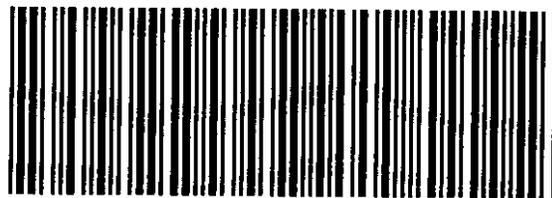
OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 2-8-16

201602080200069367



SEN PATCH



SEN PATCH

201602080200069368