

HAND DELIVERED

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

RECEIVED

13 MAY 23

PM 2:00

2013 MAY 22 PM 4:28

Office Use Only

FEC-MAIL CENTER

12FE4M5

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

People for Rick Weiland

ADDRESS (number and street)

P.O. Box 1488

(Check if address is changed)

Sioux Falls

CITY

SD

STATE

57101-1488

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

Rickerickweiland.com

Optional Second E-Mail Address

info@rickweiland.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

MM / DD / YYYY

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Beverly Casey

Signature of Treasurer

Beverly Casey

Date

05 / 08 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 06/2012)

1320251196

5. TYPE OF COMMITTEE

Candidate Committee:

- (a)  This committee is a principal campaign committee. (Complete the candidate information below.)
- (b)  This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate Rick Weiland

Candidate Party Affiliation  Dem Office Sought:  House  Senate  President State  S.D. District

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

Party Committee:

- (d)  This committee is a \_\_\_\_\_ (National, State or subordinate) committee of the \_\_\_\_\_ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
  - Corporation  Corporation w/o Capital Stock  Labor Organization
  - Membership Organization  Trade Association  Cooperative
  - In addition, this committee is a Lobbyist/Registrant PAC.
- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
  - In addition, this committee is a Lobbyist/Registrant PAC.
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	<input checked="" type="checkbox"/> C _____
2.	_____	FEC ID number	<input checked="" type="checkbox"/> C _____
3.	_____	FEC ID number	<input checked="" type="checkbox"/> C _____
4.	_____	FEC ID number	<input checked="" type="checkbox"/> C _____

13020251197

Write or Type Committee Name

People for Rick Weiland

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Helena Majusiak

Mailing Address

1821 North Maple

Watertown

SD

57201

Title or Position

CITY

STATE

ZIP CODE

Comptroller

Telephone number

605-868-3006

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

BEVERLY CASEY

Mailing Address

5817 SOUTH NATURE RUN PLACE

SIOUX FALLS

SD

57108

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

605-366-5428

13020251198

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for Telephone number]

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

FIRST BANK and TRUST

Mailing Address

110 NORTH MINNESOTA AVENUE

[Grid for Mailing Address Line 2]

SIoux FALLS SD 57104

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

13020251199

United States Senate

INSPECTION

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United States Senate  
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0.9 LBS LTR  
SHP WT: 1 LBS  
DATE: 20 MAY 2013

SHIP SENATE OFFC OF PUBLIC RECORDS  
TO: 232 HART SENATE OFFICE BLDG

WASHINGTON DC 20510



MD 201 9-48



UPS NEXT DAY AIR  
TRACKING #: 1Z A3V 574 01 1074 3398

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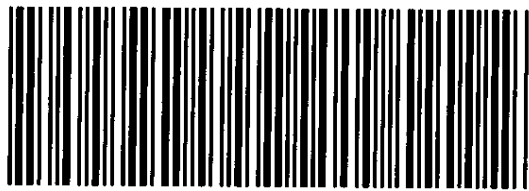
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