



Statement of Organization

[SDCL 12-27-6](#)

The Treasurer for a political committee shall file a statement of organization not later than 15 days after the date upon which the committee made contributions, received contributions, or paid expenses in excess of \$500.00. However, if such activity falls within 30 days of any statewide election, the statement of organization shall be filed within 48 hours. A candidate shall file a statement of organization for a candidate campaign committee not later than 15 days after becoming a candidate ([SDCL 12-27-3](#)).

If you are required to file with your local jurisdiction (county, school or municipality: candidate, ballot question committees and PACs) contact your local election official for the necessary form(s).

If you are submitting this Statement to the Secretary of State's office choose a **Committee Type** below.

Committee Type (you must select one):

- | | | |
|--|---|--|
| ☐ Auxiliary Political Parties | ☐ Statewide Ballot Question Committees | ☐ Statewide Candidate Committees |
| ☐ County Political Parties | ☐ Statewide Political Action Committee (PAC) | ☒ Legislative Candidate Committees |
| ☐ Statewide Political Parties | | |

Committee Information

(ALL fields required unless indicated otherwise, please print):

➔ only **ONE candidate campaign committee** may be organized for each candidate ([SDCL 12-27-1 \(3\)](#)) ➔
Exception: a candidate can have both a statewide and legislative committee.

Full Name of Committee Healy for House

Telephone Number (605) 212-9597

Enter your name below as it appears on your nominating petition and the office you are seeking.

Candidate Name Erin Kay Healy Ms.

Office Sought SD House - District:14

Mailing Address 2801 E Marson Drive #116, Sioux Falls, SD 57103

Street Address Same as Mailing Address

Committee website address (optional) _____

Chair (Candidate can serve as Chair of their Committee)

Name Erin Healy

Telephone Number (605) 212-9597

Mailing Address 2801 E Marson Drive #116, Sioux Falls, SD 57103

Street Address Same as Mailing Address

Email Address erinkhealy@gmail.com

Co-Chair

Name Sharon Boysen

Telephone Number (605) 310-9960

Mailing Address 4205 E 36th Street, Sioux Falls, SD 57103

Street Address Same as Mailing Address

Email Address ssboysen@yahoo.com



Check this box if **Chair is also serving as Treasurer**. If the same, you are not required to fill out Treasurer fields below.

* the Treasurer is responsible for all campaign finance reports and forms; letters and notices, sent by the Secretary of State's office, will go to the Treasurer only.

Treasurer*

Name _____

Telephone Number _____

Mailing Address _____

Street Address _____

Email Address _____

Political Action or Ballot Question Committees (required): You **must** include a concise statement of the committee's purpose and goals. You must also list the full name, street address and mailing address of the entity with which the committee is connected or affiliated. If the committee is not connected or affiliated with any one entity, provide the trade, profession, or primary interest of the committee.

Statement of Purpose or Goals N/A

Name of Affiliated Organization N/A

Mailing Address N/A

Street Address N/A

Trade, Profession, or Primary Interest of Committee N/A

If you are a **Ballot Question Committee**, indicate which measure the committee was involved with during the reporting period and whether the measure was supported or opposed.

Ballot Measure Number: N/A

☐

Support

☐

Oppose

Verification below must be SIGNED BEFORE SUBMITTING this Statement

This statement shall be signed by the candidate and treasurer for a candidate committee and by the chair and treasurer for other political committees. The treasurer of a political committee shall file and updated statement of organization not later than fifteen days after ANY change in the information contained on this statement.

No person may execute this report knowing it is false in any material respect. Any violation may be subject to a civil and/or criminal penalty. Any person who, with intent to defraud, falsely makes, completes, or alters a written instrument of any kind, or passes any forged instrument of any kind is guilty of forgery. Forgery is a Class 5 felony ([SDCL 22-39-36](#)). I also understand that failure to timely file any statement, amendment, or correction required subjects the Treasurer, who is responsible for filings under [SDCL 12-27](#), to a civil penalty of \$200.00 (county political parties and auxiliary organizations, \$50.00) for each violation ([SDCL 12-27-29.1](#)). Additional penalties not to exceed \$250.00 could be assessed per [SB 151](#). I also understand that failure to timely file reports or pay penalties could result in the candidate not being certified for office ([SDCL 12-27-29.3](#)).

Sharon Boysen (Treasurer),

Erin Kay Healy Ms. (Candidate),

I Sharon Boysen (Co-Chair),

Date: Nov 24 2017 4:05PM

Document submitted electronically by Sharon Boysen

Signature of Treasurer

Date: Nov 24 2017 4:05PM

Document submitted electronically by Erin Kay Healy Ms.

Signature of Candidate

Date: 11/27/2017

Document submitted electronically by Sharon Boysen

Signature of Co-Chair

Date/Time Received: Nov 24 2017 4:05PM

Date/Time Filed: Nov 24 2017 4:05PM