



# 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; 12-27-23](#)). The treasurer of a political committee shall file an updated statement of organization not later than fifteen days after ANY change in the information on this statement.

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):

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Auxiliary Political Parties | <input checked="" type="checkbox"/> Statewide Ballot Question Committees | <input type="checkbox"/> Statewide Candidate Committees   |
| <input type="checkbox"/> County Political Parties    | <input type="checkbox"/> Statewide Political Action Committee (PAC)      | <input type="checkbox"/> Legislative Candidate Committees |
| <input type="checkbox"/> 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** South Dakotans Against the Deceptive Rx Ballot Issue

Telephone Number (605) 274-3714

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

Candidate Name N/A

Office Sought N/A

Mailing Address 2329 N. Career Avenue, Suite 115, Sioux Falls, SD 57107

Street Address Same as Mailing Address

Committee website address (optional) \_\_\_\_\_

**Chair** (Candidate can serve as Chair of their Committee)

Name Joni Johnson

Telephone Number (605) 274-3714

Mailing Address 2329 N. Career Avenue, Suite 115, Sioux Falls, SD 57107

Street Address Same as Mailing Address

Email Address jjohnson@sdbio.org

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 Oppose the proposed deceptive drug pricing scheme that would grant special litigation privileges to a few people

Name of Affiliated Organization South Dakotans Against the Deceptive Rx Ballot Issue (SD Nonprofit Corp.)

Mailing Address 2329 N. Career Avenue, Suite 115, Sioux Falls, SD 57107

Street Address Same as Mailing Address

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: Initiated Measure 26 - Prescription Drug  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](#)).

Joni Johnson (Treasurer),

Joni Johnson (Chair)

Date: Apr 25 2018 5:09PM Document submitted electronically by Joni Johnson  
*Signature of Treasurer*

Date: Apr 25 2018 5:09PM Document submitted electronically by Joni Johnson  
*Signature of Chair*

Date/Time Received: Apr 25 2018 5:09PM

Date/Time Filed: Apr 25 2018 5:09PM