

## Ballot Question Contribution Statement

ID:SD SEC.OF STATE

RECEIVED OCT 2 7 2016

S.D. SEC. OF STATE

A ballot question committee may only accept contributions from a person, organization, political committee, or political party. A violation of this section is a Class 1 misdemeanor (<u>SDCL 12-27-18.1</u>).

Organizations must complete the followard this statement with the No on "U"sury	wing sections that apply (SDCL 12-27-19).  Ballot Question committee.	
File this statement with the		
STEEDS 1 - choose one of the following		
	oreign entity in good standing with the South Dakota Secretary	
of State. Name of Organization:	14 G 44-2	
☑ Check here if your organization is filed as an entity in good		
☐ Check here if the previous statements do not apply and pr	oceed to Section 3.	
STREET TENE		
Full name of organization: Center for Responsible Lending		
State or country under whose law the organization is incorporated or organized: North Carolina		
Complete address (address, city, state, zip) of organization's principal office: 302 W Main Street, Durham NC 27701		
SECTIONS - required if you did not fill out So	ections 1 and 2.	
Full name of organization:	27th 100	
Complete address (address, city, state, zip) of organization's	Filed thisday of	
	()CADO 2000	
Name of person authorizing the contribution:  Shartel Krebs  Shartel Krebs		
Complete address (address, city, state, zip) of person autho	SECRETARY OF STATE	
You must provide the names and street addresses of any ow and street address of the person authorizing the contribution		
Name of Organization's Owners, Directors or Officers	Complete Address (address, city, state, zip)	

Last updated 5.09.16

## **SECTION 4** - (SDCL 12-27-19)

Before contributing more than ten thousand dollars in the aggregate to a ballot question committee pursuant to § 12-27-18, an organization shall provide to the ballot question committee a sworn written statement below made by the president and treasurer of the organization declaring and affirming, under the penalty of perjury, the following:

- (1) The name and street address of every person who owns ten percent or more of the organization, has provided ten percent or more of the organization's gross receipts, including capital contributions, in the current or preceding year, or has provided ten percent or more of the funds being contributed to the ballot question committee; and
- (2) That no part of the contribution was raised or collected by the organization for the purpose of influencing the ballot question.

Name of Shareholder or Member	Complete Address (address, city, state, zip)

\*\* This statement required only for those organizations that are required to fill out section 4. \*\*

I hereby declare and affirm under penalty of perjury that the name and address of every person who owns ten percent or more of the organization, has provided ten percent or more of the organization's gross receipts, including capital contributions, in the current or preceding year, or has provided ten percent or more of the funds being contributed to the ballot question committee is included above and that no part of the contribution was raised or collected by the organization for the purpose of influencing the ballot questions.

Date:	President Signature: (required)
Date:	Treasurer Signature: (required)

State law requires you to submit this information to the treasurer of the ballot question committee you are making the contribution to.

Last updated 5.09.16



## **Ballot Question Contribution Statement**

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A ballot question committee may only accept committee, or political party. A violation of this	contributions from a person, organization, political section is a Class 1 misdemeanor ( <u>SDCL 12-27-18.1</u> ).	
File this statement with the NO on 'U'.  SECTION: -choose one of the following		
Full name of organization: Bread for the World-South Dakota chapter  State or country under whose law the organization is incorporated or organized: USA  Complete address (address, city, state, zip) of organization's principal office:  Bread for the World, 425 3rd 5t 5W, Swite 1200, Washington Dc 20024		
SECTION 3 - required if you did not fill out S Full name of organization:  Complete address (address, city, state, zip) of organization	day of	
Name of person authorizing the contribution:  Complete address (address, city, state, zip) of person authorizing the contribution:  SECRETARY OF STATE		
You must provide the names and street addresses of any ov and street address of the person authorizing the contribution	wners, directors, or officers of the organization including the name n.	
Name of Organization's Owners, Directors or Officers	Complete Address (address, city, state, zip)	

Last updated 5.09.16