



# Ballot Question Contribution Statement

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OCT 27 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 (SDCL 12-27-18.1).

Organizations must complete the following sections that apply (SDCL 12-27-19).

File this statement with the YES on 21 Ballot Question committee.

**SECTION 1** - choose one of the following

- Check here if your organization is filed as a domestic or foreign entity in good standing with the South Dakota Secretary of State. Name of Organization: \_\_\_\_\_
- Check here if your organization is filed as an entity in good standing with another jurisdiction. Proceed to Section 2.
- Check here if the previous statements do not apply and proceed to Section 3.

**SECTION 2**

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 St SW, suite 1200, Washington DC 20024

**SECTION 3** - required if you did not fill out Sections 1 and 2.

Full name of organization: \_\_\_\_\_  
 Complete address (address, city, state, zip) of organization's principal office: \_\_\_\_\_

Filed this 27<sup>th</sup> day of October 2016

Name of person authorizing the contribution: Shantal Krebs  
 Complete address (address, city, state, zip) of person authorizing the contribution: \_\_\_\_\_  
**SECRETARY OF STATE**

You must provide the names and street addresses of any owners, directors, or officers of the organization including the name 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.**



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Organizations must complete the following sections that apply (SDCL 12-27-19).

File this statement with the Yes on 21 Ballot Question committee.

**SECTION 1** - choose one of the following

- Check here if your organization is filed as a domestic or foreign entity in good standing with the South Dakota Secretary of State. Name of Organization: \_\_\_\_\_
- Check here if your organization is filed as an entity in good standing with another jurisdiction. **Proceed to Section 2.**
- Check here if the previous statements do not apply and proceed to **Section 3.**

**SECTION 2**

Full name of organization: Center for Responsible Lending

State or country under whose law the organization is incorporated or organized: NC

Complete address (address, city, state, zip) of organization's principal office:  
302 W Main Street St. Durham NC 27701

**SECTION 3** - required if you did not fill out Sections 1 and 2.

Full name of organization: \_\_\_\_\_ Filed this 27<sup>th</sup> day of October 2016

Complete address (address, city, state, zip) of organization's principal office: \_\_\_\_\_

Name of person authorizing the contribution: Shantel Krebs

Complete address (address, city, state, zip) of person authorizing the contribution: SECRETARY OF STATE

You must provide the names and street addresses of any owners, directors, or officers of the organization including the name 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

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(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)

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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.**