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OCT 28 2016
S.D. SEC. OF STATE



Ballot Question Contribution Statement

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 #SDR1Thing2do 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 Farmers Educational & Cooperative Union of America, SD Division
- 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: _____

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

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

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: _____

Name of person authorizing the contribution: _____

Complete address (address, city, state, zip) of person authorizing the contribution: _____

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)

Filed this 28th day of Oct. 2016

Shantel Krebs

SECRETARY OF STATE

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 after state also)
No member owns 10% or more of the	
organization nor has one person	
given more than 10% of the	
donated amount	

**** 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: 10-27-16 President Signature: (required) *Alan Smith*

Date: 10-27-16 Treasurer Signature: (required) *Kevin K. Hrenko*

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

Appendix F

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Ballot Question Contribution Statement

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

File this statement with the #SDR+Thing2Do 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: Represent US

State or country under whose law the organization is incorporated or organized: District of Columbia

Complete address (address, city, state, zip) of organization's principal office:
296 Norwiche St. floor 3 Florence MA 01062

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: _____

Name of person authorizing the contribution: _____

Complete address (address, city, state, zip) of person authorizing the contribution: _____

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)
	Filed this <u>28th</u> day of <u>October</u> <u>2016</u>
	<u>Shantel Krebs</u>

APPENDIX I



Ballot Question Contribution Statement

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

File this statement with the #SDRTThing2Do 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 South Dakota Education Association

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: South Dakota Education Association

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

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

411 East Capitol Ave, Pierre, SD 57501

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: _____

Name of person authorizing the contribution: _____

Complete address (address, city, state, zip) of person authorizing the contribution: _____

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)
	Filed this <u>29th</u> day of
	<u>Oct 2016</u>
	<u>Shantel Krebs</u>
	SECRETARY OF STATE