

## **COMMUNICATION EXPENDITURE**

(Made with or without consultation) SDCL 12-27-16 and SDCL 12-27-16.1

(	heck the box below to identify if the communication was ma	de with or without consultation:
	This communication clearly identified a candidate, public office holder, based of the second political committee, or agent of a candidate or political committee.	
<b>√</b>	This communication clearly identified a candidate, public office holder, ba  AND WAS MADE upon consultation with that candidate, political comm committee.	
hold be re Disc	o files this statement: Any PERSON or ENTITY that makes a payment of 0.00, including donated goods or services for a communication expenditure there is a ballot question, or political party. SDCL 12-27-16(a)-(e) outlines what reported on this form. POLITICAL COMMITTEES list Communication Eclosure Form.  dline to file: Within 48 hours of the time that the communication is dissemined.	that concerns a candidate, public office types of communications do not need to expenditures on their Campaign Finance
rne	with: The Secretary of State except local political committees file with the	
Disc	claimers for communications: follow SDCL 12-27-16(1)(a)-(c)	SUBMITTED
Plea	ase print (all fields are required):	OCT
Yaı	nkton Area Progressive Growth	OCT 2 6 2018  S.D. SEC. OF STATE
	ne of Person or Entity	SEC. OF STATE
803	B East 4th St., Yankton, SD 57078	
	nplete Mailing (PO Box or Street) Address City, State and Zip Code	
yar	nktonedc.com	F.,
	osite Address of Entity (if applicable)	Filed this Z646
Ch	ristine Tielke, Communications Coordinator	
	ne and Title of Person Filing the Report for the Entity	Could day of
	ncy Wenande	COLO
	ne of Person who Authorized the Expenditures on Behalf of the Entity	mil K
	ncy Wenande	SECRETARY OF STATE
Nam	ne of Chief Executive (if any) of the Entity	SECRETARY OF STATE

List the **NAME(S)** of each candidate, public office holder, ballot question, or political party mentioned or identified in each communication, the **AMOUNT SPENT** on each communication, and a **DESCRIPTION** of the content of each communication.

NAME	COMMUNICATION TYPE & DESCRIPTION	AMOUNT SPENT	DATE
IM 25	Newspaper Ad	\$385.35	10/30 & 11/5

Name of each person, partner, etc	Mailing (PO Box or Street) Address City, State and Zip Code
50.	
40.0	
	partners, owners, trustees, beneficiaries, participants, members, owned by, controlled by, held for the benefit of, or comprised of
lentified in the statements meets the ownership test set f	
entified in the statements meets the ownership test set f	orth above. ( <u>SDCL 12-27-16 (5)</u> )
entified in the statements meets the ownership test set f	orth above. (SDCL 12-27-16 (5))
entified in the statements meets the ownership test set f	orth above. (SDCL 12-27-16 (5))
entified in the statements meets the ownership test set f	orth above. (SDCL 12-27-16 (5))
lentified in the statements meets the ownership test set f	Street Address, City, State and Zip Code
Please include extra communication expenditure sheets if mo	Street Address, City, State and Zip Code  Street Address, City, State and Zip Code  ore space is needed.  ny material respect. Any violation may be subject to a civil and/falsely makes, completes, or alters a written instrument of any of forgery. Forgery is a Class 5 felony (SDCL 22-39-36).

(1). For an entity whose majority ownership is owned by, controlled by, held for the benefit of, or comprised of twenty or

Secretary of State's Office • Elections Department 500 E. Capitol Ave., Ste. 204 • Pierre, SD • 57501 Office 605-773-3537 • Fax 605-773-6580 • Email <a href="mailto:cfr@state.sd.us">cfr@state.sd.us</a>