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JAN 27 2015

State of South Dakota Campaign Finance Disclosure Statement

S.D. SEC. OF STATE

Full Name of Committee: Duvall for House

Mary Duvall, Bob Clair maryduvall@midco.net
Committee Chair, Treasurer, Candidate E-Mail

115 S. Adams, Pierre SD
Committee Street Address

P.O. Box 453, Pierre SD 57501
Committee Postal Address

Mary Duvall 605-280-8544 605-224-4070
Name of Person Making Report Daytime Telephone # Evening Telephone #

If Candidate Committee, please note office being sought, and District # (If applicable) Political party affiliation (if any)

District 24 House of Representatives
If Ballot Question Committee, Ballot Question number or letter. Supporting? Opposing?

Type of Campaign Statement:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pre-Primary	Pre-Convention	Pre-General	Year-End	Amendment	Supplement	Termination

VERIFICATION OF PERSON MAKING REPORT

I, Mary Duvall
(print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. I also understand that failure to timely file any statement, amendment, or correction required subjects the treasurer responsible for filing to a civil penalty per day for each day that the statement remains delinquent.

Date 24 January 2015 Filed this 27th day of January 2015
[Signature]
Signature of Treasurer
Shantal Krebs
SECRETARY OF STATE

County, municipal and school candidates file this statement with the person in charge of the local election.

Statewide PACs, political party, ballot question and other committees file this statement with the Secretary of State's Office.

Secretary of State, Elections Department
500 East Capitol Ave., Ste 204
Pierre, SD 57501
p: 605-773-3537 f: 605-773-6580
e-mail to kea.warne@state.sd.us

Fax and e-mail images must contain the signature(s).

Direct Contributions from Political Parties

Contributions from Political Parties

Name	Residential (Street) Address including city, state and zip	Amount
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
Enter total of all contributions from Political Parties here:		\$.

Line item C1

Direct Contributions from In-State Political Action Committees

Contributions from South Dakota Political Action Committees

Name	Residential (Street) Address including city, state and zip	Amount
VIA Travel PAC	222 E Capitol Pierre SD 57501	\$ 100 .-
SD Physical Therapy Assn	309 Washington Ave Ortonville MN 56278	\$ 100 .-
Black Hills Corp PAC	625 9 th Street Rapid City SD 57709	\$ 100 .-
BIPAC	222 E Capitol Pierre SD 57501	\$ 100 .-
		\$.
		\$.
		\$.
		\$.
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		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
Enter total of all contributions from South Dakota Political Action Committees or South Dakota Candidate Committees here:		\$ 400 .-

Line item D1

Direct Contributions from Out-of-State Political Action Committees

Contributions from Federal Political Action Committees		
Name	Filing Website Address	Amount
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
Enter total of all contributions from Federal Political Action Committees or Out-of-State Candidate Committees here:		\$.

Line item D2

Direct Contributions from Candidate Committees

Contributions from Candidate Committees		
Name	Residential (Street) Address including city, state and zip	Amount
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
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		\$.
		\$.
		\$.
		\$.
Enter total of all contributions from Candidate Committees here:		\$.

Line item E1

In-Kind Contributions

<i>Non-cash contributions of good and services and the estimated fair market value</i>		
Description	Name and residential address	Estimated value
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
Enter total of all estimated in-kind contributions here:		\$.

Line item F1

Other Income

<i>Refunds, rebates, interest earned, sale of property, or other income which is not a direct contribution.</i>		
Source of Income	Description of Income (i.e. raffles and auctions income)	Amount
		\$.
		\$.
		\$.
Enter total of other income here:		\$.

Line item G1

Establishing and Administering Committee/Solicitation Costs

List a categorical description and the estimated value of funds or donations by any organization to its political committee for establishing and administering the political committee or solicitation costs of the political committee.

Organizational Name and Categorical Description for Direct Funds	Amount
	\$.
	\$.
	\$.
Enter total here:	\$.

Line item H1

SUMMARY OF INCOME AND EXPENDITURES

Balance of cash and cash equivalents on hand, if any, at the beginning of the reporting period:		\$ 2136.92
		Income
		Expenses
	Candidate's Personal Contribution to Own Campaign	\$.
Income:		
	Unitemized Contributions (A1)	\$ 560.00
	Itemized Contributions (A2)	\$ 200.00
	Contributions from Organizations (B1)	\$.
	Contributions from Political Parties (C1)	\$.
	Contributions from In-State PACs (D1)	\$ 400.00
	Contributions from Out-of-State or Federal PACs (D2)	\$.
	Contributions from Candidate Committees (E1)	\$.
	Other Income (G1)	\$.
	Expenditures from an external source to establish a committee (H1)	\$.
Expenditures		
	Operational Expenditures (X1)	\$ 130.00
	Contributions to Candidates and Committees (X2)	\$.
	Debts and Obligations Owed by the Committee (X3)	\$.
Loan Activity		
	Monetary loan made to this Committee during reporting period (Y1)	\$.
	Monetary loan repaid to this Committee during reporting period (Y2)	\$.
Amount on hand at the end of the reporting period:		\$ 3166.92

In-Kind Contributions (F1) which are not included in your ending balance \$ _____

***Note: You cannot end the reporting period with a negative balance.**

County, municipal and school candidates file with the person in charge of the local election.