



# COMMUNICATION EXPENDITURE

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

Check the box below to identify if the communication was made with or without consultation:

<input type="checkbox"/>	This communication clearly identified a candidate, public office holder, ballot question, or political party <b>BUT WAS NOT</b> controlled by, coordinated with, requested by, or made upon consultation with that candidate, political committee, or agent of a candidate or political committee.
<input checked="" type="checkbox"/>	This communication clearly identified a candidate, public office holder, ballot question, or political party <b>AND WAS MADE</b> upon consultation with that candidate, political committee, or agent of a candidate or political committee.

**Who files this statement :** Any **PERSON** or **ENTITY** that makes a payment or promise of payment totaling more than \$100.00, including donated goods or services for a communication expenditure that concerns a candidate, public office holder, ballot question, or political party. [SDCL 12-27-16\(a\)-\(e\)](#) outlines what types of communications do not need to be reported on this form. **POLITICAL COMMITTEES** list Communication Expenditures on their Campaign Finance Disclosure Form.

**Deadline to file:** Within 48 hours of the time that the communication is disseminated, broadcast, or otherwise published.

**File with:** The Secretary of State except local political committees file with their local election official.

**Disclaimers for communications:** follow SDCL 12-27-16(1)(a)-(c) and 12-27-16.1

**Please print** (all fields are required):

American Cancer Society Cancer Action Network (ACS CAN)

Name of Person or Entity

PO Box 1146, Sioux Falls, SD 57101

Complete Mailing (PO Box or Street) Address, City, State and Zip Code

[www.fightcancer.org](http://www.fightcancer.org)

Website Address of Entity (if applicable)

Kendra Krueger, SD Grassroots Manager

Name and Title of Person Filing the Report for the Entity

Carter Steger

Name of Person who Authorized the Expenditures on Behalf of the Entity

Lisa Lacasse

Name of Chief Executive (if any) of the Entity

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 DESCRIPTION	AMOUNT	DATE
An initiated amendment to the South Dakota Constitution expanding Medicaid eligibility	Tele town hall and recorded phone calls supporting Medicaid expansion 12/13/2021-12/14/2021	\$13,270.51	12/14/2021

No person may execute this report knowing it is false in any material respect. Any violation may be subject to a civil and/or criminal penalty. Any person who, with intent to defraud, falsely makes, completes, or alters a written instrument of any kind, or passes any forged instrument of any kind is guilty of forgery. Forgery is a Class 5 felony ([SDCL 22-39-36](#)). Penalties not to exceed \$250 could be assessed per [SDCL 12-27-29.4](#).

Date: 12/15/2021

Document submitted electronically by Kendra Krueger, SD Grassroots Manager

Signature of person filing the report

**Secretary of State's Office • Elections Department**

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