

Statement of Organization

SDCL 12-27-6

The Treasurer for a political committee shall file a statement of organization not later than 15 days after the date upon which the committee made contributions, received contributions, or paid expenses in excess of \$500.00. However, if such activity falls within 30 days of any statewide election, the statement of organization shall be filed within 48 hours. A candidate shall file a statement of organization for a candidate campaign committee not later than 15 days after becoming a candidate (SDCL 12-27-3; 12-27-23). The treasurer of a political committee shall file an updated statement of organization not later than fifteen days after ANY change in the information on this statement.

If you are required to file with your local jurisdiction (county, school or municipality: candidate, ballot question committees and PACs) contact your local

election official for the necessary form(s).

	If you are submit	ting this Statement to the Secretary of this Statement to the Secretary of this statement to the Secretary of the Secretary o		ommittee Type below.				
Auxiliary P	olitical Parties	Statewide Ballot Question Co	·	Statewide Candidate Committees				
County Pol	itical Parties	Statewide Political Action Co	ommittee (PAC)	Legislative Candidate Committees				
Statewide F	Political Parties							
Committee Information (ALL fields required unless indicated otherwise, please print):								
	only ONE candi	idate campaign committee may be ception: a candidate can have both a	organized for each candida	te (<u>SDCL 12-27-1 (3))</u>				
Full Name of Co	mmittee Amber Arlint	t for SD House						
Telephone Numb	er <u>(605) 670-0626</u>							
Enter your name below as it appears on your nominating petition and the office you are seeking.								
Candidate Name	Amber Arlint							
Office Sought	SD House - District:12							
Mailing Address	8 8605 S Regent Park Dr, Sioux Falls, SD 57108							
Street Address	Same as Mailing Addre	ess						
Committee websi	te address <i>(optional)</i>							
Chair	(Candidate can serve as Chair of their Committee)							
Name	Amber Arlint							
Telephone Numb	er <u>(605) 670-0626</u>							
	(000) 070 0020			8605 S Regent Park Dr, Sioux Falls, SD 57108				
Mailing Address		r, Sioux Falls, SD 57108						
Mailing Address Street Address								
_	8605 S Regent Park D	ess						
Street Address Email Address	8605 S Regent Park D Same as Mailing Addre amberarlintsd@gmail.c	ess	u are not required to fill out	Treasurer fields below.				
Street Address Email Address Check this	8605 S Regent Park D Same as Mailing Addre amberarlintsd@gmail.c	ess com erving as Treasurer. If the same, yo	•	Treasurer fields below. Secretary of State's office, will go to the				
Street Address Email Address Check this	8605 S Regent Park D Same as Mailing Addre amberarlintsd@gmail.c	ess com erving as Treasurer. If the same, yo	•					
Street Address Email Address Check this * the Treasurer is Treasurer only.	8605 S Regent Park D Same as Mailing Addre amberarlintsd@gmail.c	ess com erving as Treasurer. If the same, yo	•					
Street Address Email Address Check this * the Treasurer is Treasurer only. Treasurer* Name	8605 S Regent Park D Same as Mailing Addre amberarlintsd@gmail.c box if Chair is also se responsible for all camp	ess com erving as Treasurer. If the same, yo	•					
Street Address Email Address Check this * the Treasurer is Treasurer only. Treasurer* Name Telephone Numb	8605 S Regent Park D Same as Mailing Addre amberarlintsd@gmail.c b box if Chair is also se responsible for all camp Scott Stern er (605) 925-7999	ess com erving as Treasurer. If the same, yo	•					
Street Address Email Address Check this * the Treasurer is Treasurer only. Treasurer* Name Telephone Numb	8605 S Regent Park D Same as Mailing Addre amberarlintsd@gmail.c b box if Chair is also se responsible for all camp Scott Stern er (605) 925-7999	ess com erving as Treasurer. If the same, yo paign finance reports and forms; lette	•					

also list the full na	me, street address and mailing add	equired): You must include a concise statement of the committee's purpose and goals. You must dress of the entity with which the committee is connected or affiliated. If the committee is not e trade, profession, or primary interest of the committee.
Statement of Purp	ose or Goals N/A	
Name of Affiliated	Organization N/A	
Mailing Address	N/A	
Street Address	N/A	
Trade, Profession,	, or Primary Interest of Committee	N/A
	nis committee on behalf of the spon with <u>SDCL 2-1-1.1 and 1.2</u> ?	nsor of an initiated constitutional amendment or initiated measure Yes No
If you are a Ballot or oppose(s) them		e measure(s) and/or issue(s) the committee is involved with and whether the committee support(s)
N/A		
forgery. Forgery is subjects the Treas organizations, \$50	s a Class 5 felony (<u>SDCL 22-39-36</u>) surer, who is responsible for filings 0.00) for each violation (<u>SDCL 12-2</u>	s, or alters a written instrument of any kind, or passes any forged instrument of any kind is guilty of). I also understand that failure to timely file any statement, amendment, or correction required under SDCL 12-27, to a civil penalty of \$200.00 (county political parties and auxiliary 27-29.1). Additional penalties not to exceed \$250.00 could be assessed per SDCL 12-27-29.4. I ay penalties could result in the candidate not being certified for office (SDCL 12-27-29.3). (Treasurer),
Amber Arlint		(Candidate)
Date: <u>Jan 19 20</u>	22 4:33PM	Document submitted electronically by Scott Stern Signature of Treasurer
Date: <u>Jan 19 20</u>	22 4:33PM	Document submitted electronically by Amber Arlint Signature of Candidate
Date/Time Receive	ed: Jan 19 2022 4:33PM	
Date/Time Filed:	Jan 19 2022 4:33PM	