

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 submitting this Statement to the Secretary of State's office choose a Committee Type below. | | | | | | | | |
|--|---|---|-------------------------------|--|---|--|--|--|
| | | Commi | ttee Type (you must select o | ne): | | | | |
| Auxiliary F | Political Parties | Statewide Ball | ot Question Committees | Statewide Candidate Committees | | | | |
| County Po | litical Parties | X Statewide Polit | ical Action Committee (PAC | Legislative Candidate Committees | | | | |
| Statewide | Political Parties | | | | | | | |
| Committee Information (ALL fields required unless indicated otherwise, please print): | | | | | | | | |
| only ONE candidate campaign committee may be organized for each candidate (<u>SDCL 12-27-1 (3))</u> <u>Exception: a candidate can have both a statewide and legislative committee.</u> | | | | | | | | |
| Full Name of Committee Say No To Noem | | | | | | | | |
| Telephone Number (605) 430-9522 | | | | | | | | |
| Enter your name below as it appears on your nominating petition and the office you are seeking. | | | | | | | | |
| Candidate Name | N/A | | | | | | | |
| Office Sought | N/A | | | | | | | |
| Mailing Address | ailing Address 8990 S. Hwy. 16, Rapid City, SD 57702 | | | | | | | |
| Street Address | reet Address Same as Mailing Address | | | | | | | |
| Circot / taarooc | Carrie as Maining Adam | 555 | | | | | | |
| | ite address (optional) | 555 | | | _ | | | |
| | - | | nittee) | | | | | |
| Committee webs | ite address (optional) | | nittee) | | | | | |
| Committee webs | ite address (optional) (Candidate can serve a | | nittee) | | | | | |
| Chair Name | ite address (optional) (Candidate can serve a | as Chair of their Comi | nittee) | | | | | |
| Chair Name Telephone Numl | (Candidate can serve a Marguerite McPhillips per (605) 430-9532 | as Chair of their Comi | nittee) | | | | | |
| Chair Name Telephone Numl Mailing Address | (Candidate can serve a Marguerite McPhillips per (605) 430-9532 | as Chair of their Comi | nittee) | | | | | |
| Chair Name Telephone Numl Mailing Address Street Address Email Address | ite address (optional) (Candidate can serve a Marguerite McPhillips per (605) 430-9532 8990 S. Hwy. 16, Rapi Same as Mailing Addre | as Chair of their Comi d City, SD 57702 | , | red to fill out Treasurer fields below. | | | | |
| Chair Name Telephone Numl Mailing Address Street Address Email Address X Check thi | (Candidate can serve at Marguerite McPhillips over (605) 430-9532 8990 S. Hwy. 16, Rapit Same as Mailing Address trooper 1949@q.com | as Chair of their Comi d City, SD 57702 ess | f the same, you are not requi | red to fill out Treasurer fields below. s, sent by the Secretary of State's office, will go to the | | | | |
| Chair Name Telephone Numl Mailing Address Street Address Email Address X Check thi | (Candidate can serve at Marguerite McPhillips over (605) 430-9532 8990 S. Hwy. 16, Rapit Same as Mailing Address trooper 1949@q.com | as Chair of their Comi d City, SD 57702 ess | f the same, you are not requi | | | | | |
| Chair Name Telephone Numl Mailing Address Street Address Email Address X Check thi * the Treasurer is Treasurer only. | (Candidate can serve at Marguerite McPhillips over (605) 430-9532 8990 S. Hwy. 16, Rapit Same as Mailing Address trooper 1949@q.com | as Chair of their Comi d City, SD 57702 ess | f the same, you are not requi | | | | | |
| Chair Name Telephone Numl Mailing Address Street Address Email Address X Check thi * the Treasurer is Treasurer only. Treasurer* | ite address (optional) (Candidate can serve a Marguerite McPhillips per (605) 430-9532 8990 S. Hwy. 16, Rapi Same as Mailing Addre trooper_1949@q.com s box if Chair is also se | as Chair of their Comi d City, SD 57702 ess | f the same, you are not requi | | | | | |
| Chair Name Telephone Numl Mailing Address Street Address Email Address X Check thi * the Treasurer is Treasurer only. Treasurer* Name | ite address (optional) (Candidate can serve a Marguerite McPhillips per (605) 430-9532 8990 S. Hwy. 16, Rapi Same as Mailing Addre trooper_1949@q.com s box if Chair is also se | as Chair of their Comi d City, SD 57702 ess | f the same, you are not requi | | | | | |
| Chair Name Telephone Numl Mailing Address Street Address Email Address X Check thi * the Treasurer is Treasurer only. Treasurer Name Telephone Numl | ite address (optional) (Candidate can serve a Marguerite McPhillips per (605) 430-9532 8990 S. Hwy. 16, Rapi Same as Mailing Addre trooper_1949@q.com s box if Chair is also se | as Chair of their Comi d City, SD 57702 ess | f the same, you are not requi | | | | | |

| also list the full na | me, street address and mailing address | of the entity with which the committee is connected or affiliated. If the committee, profession, or primary interest of the committee. | | | | | |
|---|--|--|---|--|--|--|--|
| Statement of Purp | Statement of Purpose or Goals Political Action Committee For Candidate Donations | | | | | | |
| Name of Affiliated | Organization N/A | | | | | | |
| Mailing Address | N/A | | | | | | |
| Street Address | N/A | | | | | | |
| Trade, Profession, | , or Primary Interest of Committee <u>Car</u> | ndidate Donations | | | | | |
| | nis committee on behalf of the sponsor of with SDCL 2-1-1.1 and 1.2? | f an initiated constitutional amendment or initiated measure Yes | No | | | | |
| If you are a Ballot or oppose(s) them | | sure(s) and/or issue(s) the committee is involved with and whether the comm | ittee support(s) | | | | |
| N/A | | | | | | | |
| | | | | | | | |
| No person may ex who, with intent to forgery. Forgery is subjects the Treas organizations, \$50 | tecute this report knowing it is false in an odefraud, falsely makes, completes, or als a Class 5 felony (SDCL 22-39-36). I als surer, who is responsible for filings under 0.00) for each violation (SDCL 12-27-29. | e SIGNED BEFORE SUBMITTING this Statement by material respect. Any violation may be subject to a civil and/or criminal penalters a written instrument of any kind, or passes any forged instrument of any so understand that failure to timely file any statement, amendment, or correction and the subject of \$200.00 (county political parties and auxiliar). Additional penalties not to exceed \$250.00 could be assessed per SDCL analties could result in the candidate not being certified for office (SDCL 12-27- | kind is guilty of on required ry 12-27-29.4. I | | | | |
| Marguerite McP | hillips | | (Treasurer), | | | | |
| Marguerite McP | hillips | | (Chair) | | | | |
| Date: <u>Feb 22 20</u> | 22 10:45AM | Document submitted electronically by Marguerite McPhillips Signature of Treasurer | | | | | |
| Date: <u>Feb 22 20</u> | 22 10:45AM | Document submitted electronically by Marguerite McPhillips Signature of Chair | | | | | |
| Date/Time Receive | ed: Feb 22 2022 10:45AM | | | | | | |
| Date/Time Filed: | Feb 22 2022 10:45AM | | | | | | |