

Ballot Question Contribution Statement

OCT 2 1 2024 S.D. SEC. OF STATE

A ballot question committee may only accept contributions from a person, entity, or political committee. A violation of this section is a Class 2 misdemeanor and a subsequent offense within a calendar year is a Class 1 misdemeanor.

This form is not required if an entity contributes donated goods or services.

(SDCL 12-27-18.1 and SDCL 12-27-19)

and submit it to the ballot question committee
ribution. (SDCL 12-27-19). Ballot Question committee.
Date of contribution: 9/25/2024
October da
state, zip) of entity's office: Monas
of person authorizing the contribute CRETARY OF STATE
ses of any owners or directors and officers of the entity. **
Mailing Address (PO Box or Street Address, City, State, Zip)
523 N DULUTH AVE SIOUX FALLS SID 57104
POBOX 80 BRANDON SD 57005
523 N DULLITH AVE STOUR FALLS SD 57104
ny material respect. Any violation may be subject to a civil and/or falsely makes, completes, or alters a written instrument of any of forgery. Forgery is a Class 5 felony (SDCL 22-39-36). AND A. PALS

** The information below <u>must be provided by the entity</u> before contributing more than \$10,000 to the ballot question committee. (SDCL 12-27-19) **

Before contributing more than ten thousand dollars in the aggregate to a ballot question committee pursuant to <u>SDCL 12-27-18</u>, an entity shall provide to the ballot question committee a sworn written statement made by the president and treasurer of the entity declaring and affirming, under the penalty of perjury, the following:

(1) The name and street address of every person who owns ten percent or more of the entity, has provided ten percent or more of the entity's gross receipts, including capital contributions, in the current or preceding year, or has provided ten percent or more of the funds being contributed to the ballot question committee

Name of Shareholder or Member	Complete Street Address (address, city, state, zip)
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SECRETARY	n di makan di kata mada yifa a sin sa na mata katika s

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). Additional civil penalties not to exceed \$250 could be assessed per SDCL 12-27-29.4.

I hereby declare and affirm under penalty of perjury that no part of the contribution was raised or collected by the entity for the purpose of influencing the ballot questions.

Date: 9/25/2024	Entity Treasurer Printed Name: THAD A. PALS
	Entity Treasurer Signature:
Date: 9/25/2024	Entity President Printed Name: MOST REVEREND BISHOP DE GROOD
	Entity President Signature: + Honald EDe Level

State law requires you to submit this information to the treasurer of the ballot question committee you are making the contribution to.



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(550512571	8.1 and <u>SDCL 12-27-19</u>).
	and submit it to the ballot question committee
File this statement with the NoGfor SD	Ballot Question committee.
Amount of contribution: \$100,000.00	Date of contribution: October 9, 2024
Full name of entity or fictitious name (if any): Catholic Chancery Office	October day
Complete mailing address (PO Box or street address, city, 523 N Duluth Ave Sioux Falls, SD 57104	state, zip) of entity's office:
Mailing address (PO Box or street address, city, state, zip) 523 N Duluth Ave Sioux Falls SD 57104	of person authorizing the contribution TARY OF STATE
	ses of any owners or directors and officers of the entity. **
Name of Entity's Owners or Directors & Officers (List what is applicable)	Mailing Address (PO Box or Street Address, City, State, Zip)
Most Revelend Donald De Grood	523 N DWARL AVE SIONE FELL SP 57104
Very Reverend Andrew Yours	PUBUL BU Brandon 50 5 7005
Very Reverent Andrew Young Thad A. Palr	523 N Dulyth Ave Sione Fells SD 57104
criminal penalty. Any person who, with intent to defraud, kind, or passes any forged instrument of any kind is guilty Additional civil penalties not to exceed \$250.00 could be a Print name of person authorizing the contribution: Thad Signature of the person authorizing the contribution:	

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Name of Shareholder or Member	Complete Street Address (address, city, state, zip)
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I hereby declare and affirm under penalty of perjury that no part of the contribution was raised or collected by the entity for the purpose of influencing the ballot questions.

Date: October 9, 2024	Entity Treasurer Printed Name: Thad A. Pal	
	Entity Treasurer Signature:	
Date: October 9, 2024	Entity President Printed Name: Most Russes Donald De Good	
	Entity President Signature:	

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