

## **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 State's office choose a	Committee Type below.		
		Committee Type (yo	u must select one):			
Auxiliary Po	olitical Parties	Statewide Ballot Question C	ommittees	Statewide Candidate Committees		
County Pol	itical Parties	Statewide Political Action C	ommittee (PAC)	X Legislative Candidate Committees		
Statewide F	Political Parties					
Committee Information						
,		(ALL fields required unless indic		,		
	only <b>ONE cand</b>	idate campaign committee may be ception: a candidate can have both a	e organized for each cand a statewide and legislative	idate (SDCL 12-27-1 (3)) e committee.		
Full Name of Co	mmittee Schoenbeck	for House				
Telephone Numb	er <u>(605) 868-9352</u>					
Enter your name	below as it appears on	your nominating petition and the offi	ce you are seeking.			
Candidate Name	Jake Donald Schoenb	eck				
Office Sought	SD House - District:2					
Mailing Address	7210 E 45th St, Sioux	Falls, SD 57110				
Street Address	Same as Mailing Addr	ess				
Committee websi	te address <i>(optional)</i>					
Chair	· · · · · · ·	as Chair of their Committee)				
	· · · · · · ·	as Chair of their Committee)				
Chair	(Candidate can serve	as Chair of their Committee)				
Chair Name Telephone Numb	(Candidate can serve					
Chair Name Telephone Numb	(Candidate can serve Jake Schoenbeck er (605) 868-9352	Falls, SD 57110				
Chair Name Telephone Numb Mailing Address	(Candidate can serve  Jake Schoenbeck  er (605) 868-9352  7210 E 45th St, Sioux	Falls, SD 57110				
Chair Name Telephone Numb Mailing Address Street Address Email Address	(Candidate can serve  Jake Schoenbeck  er (605) 868-9352  7210 E 45th St, Sioux  Same as Mailing Addr  jakeschoenbeck@gma	Falls, SD 57110	ou are not required to fill o	ut Treasurer fields below.		
Chair Name Telephone Numb Mailing Address Street Address Email Address  Check this	(Candidate can serve  Jake Schoenbeck  er (605) 868-9352  7210 E 45th St, Sioux  Same as Mailing Addr  jakeschoenbeck@gma	Falls, SD 57110 ess ail.com erving as Treasurer. If the same, yo				
Chair Name Telephone Numb Mailing Address Street Address Email Address  Check this	(Candidate can serve  Jake Schoenbeck  er (605) 868-9352  7210 E 45th St, Sioux  Same as Mailing Addr  jakeschoenbeck@gma	Falls, SD 57110 ess ail.com erving as Treasurer. If the same, yo		out Treasurer fields below.  the Secretary of State's office, will go to the		
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also list the full nar	or Ballot Question Committees (required): You must include a concise statement of the committee's purpose and goals. If the committee is at address and mailing address of the entity with which the committee is connected or affiliated. If the committee is ated with any one entity, provide the trade, profession, or primary interest of the committee.	
Statement of Purpo	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	
Are you forming th in order to comply	his committee on behalf of the sponsor of an initiated constitutional amendment or initiated measure with SDCL 2-1-1.1 and 1.2?	
If you are a <b>Ballot</b> or oppose(s) them.	t Question Committee, explain the measure(s) and/or issue(s) the committee is involved with and whether the committee so.	support(s)
N/A		
V	/erification below must be SIGNED BEFORE SUBMITTING this Statement	
No person may ex who, with intent to forgery. Forgery is subjects the Treas organizations, \$50 also understand th	execute this report knowing it is false in any material respect. Any violation may be subject to a civil and/or criminal penalty. A defraud, falsely makes, completes, or alters a written instrument of any kind, or passes any forged instrument of any kind is a Class 5 felony (SDCL 22-39-36). I also understand that failure to timely file any statement, amendment, or correction reconsurer, who is responsible for filings under SDCL 12-27, to a civil penalty of \$200.00 (county political parties and auxiliary 0.00) for each violation (SDCL 12-27-29.1). Additional penalties not to exceed \$250.00 could be assessed per SDCL 12-27-29.1 hat failure to timely file reports or pay penalties could result in the candidate not being certified for office (SDCL 12-27-29.3)	s guilty of quired  -29.4. I
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