

Administrative Rule Changes for the State Board of Elections

ARTICLE 5:02

STATE BOARD OF ELECTIONS

Chapter

5:02:03 Forms for registration.

5:02:04 Forms of notices.

5:02:06 Ballot forms and color.

5:02:08 Petitions.

5:02:10 Absentee voting.

CHAPTER 5:02:03

FORMS FOR REGISTRATION

(1) 5:02:03:14. Acknowledgement notice for invalid or incomplete voter registration applications.

The acknowledgement notice sent by forwardable mail to each person who submits a voter registration application to the county auditor that is invalid or incomplete and cannot be filed shall be in the following form:

Invalid or Incomplete Voter Registration Acknowledgement Notice

_____ Your voter registration is not valid because you are not eligible to be a registered voter. Reason:

_____.

_____ Your voter registration has not been processed because your application is incomplete. Please call or visit our office to complete your registration. You will not be able to vote unless you have provided the needed information by within 30 days _____.

To complete your voter registration or if you have further questions, please call our office at _____.

Thank You,

_____ County Auditor

Source: 21 SDR 77, effective October 24, 1994; 22 SDR 95, effective January 18, 1996; 28 SDR 99, effective January 17, 2002.

General Authority: SDCL 12-4-35.

Law Implemented: SDCL 12-4-5.3.

CHAPTER 5:02:04

FORMS OF NOTICES

(2) **5:02:04:13. Notice of secondary runoff election.** The notice of secondary runoff election must be in the following form:

NOTICE OF SECONDARY RUNOFF ELECTION
MUNICIPALITY OF _____

The following candidates will appear on the ballot for the secondary runoff election to be held on _____, _____. If the polls cannot be opened because of bad weather, the election may be postponed one week.

(HERE LIST CANDIDATES APPEARING ON THE BALLOT AND POSITION FOR WHICH THEY ARE RUNNING.)

The election will be held during the same hours and at the same polling places as the annual municipal election held on _____.

Voters with disabilities may contact the city finance officer for information and special assistance in absentee voting or polling place accessibility.

Finance Officer

Source: 4 SDR 26, effective October 27, 1977; 16 SDR 20, effective August 10, 1989; 23 SDR 236, effective July 17, 1997; 25 SDR 8, effective August 3, 1998.

General Authority: SDCL 12-1-9(3).

Law Implemented: SDCL 9-13-27.1, 12-2-4.

(3) **5:02:04:17. Notice of deadline for filing primary nominating petitions.** Not less than ten nor more than fifteen days before the deadline for filing primary nominating petitions, the person in charge of the local election shall publish a notice in the following form:

NOTICE OF DEADLINE FOR FILING NOMINATING PETITIONS FOR THE PRIMARY ELECTION AND FOR FILING INDEPENDENT CANDIDATE PETITIONS

The deadline for filing nominating petitions for the primary election is _____, _____, at 5:00 p.m. (mountain or central) time. If a petition is mailed by registered mail by _____, _____, at 5:00 p.m. (mountain or central) time, it shall be considered filed.

The deadline for filing nominating petitions to run as an independent candidate in the general election is _____, _____, at 5:00 p.m. (mountain or central) time. If a petition is mailed by registered mail by _____, _____, at 5:00 p.m. (mountain or central) time, it shall be considered filed.

The deadline for filing nominating petitions to run as an independent candidate for president in the general election is _____, _____, at 5:00 p.m. central time. If a petition is mailed by registered mail by _____, _____, at 5:00 p.m. central time, it shall be considered filed. (Only include this deadline in addition to the independent deadline above if it is a presidential election year.)

Nominating petitions for the offices of (here list county offices) shall be filed in the office of the county auditor located in the county courthouse during regular business hours. Nominating petitions for the offices of (here list legislative, state, judicial, and federal offices) shall be filed in the Office of the Secretary of State, State Capitol Building, Pierre, SD 57501, between the hours of 8:00 a.m. and 5:00 p.m. central time.

(County Auditor or County Finance Officer)

Source: 6 SDR 25, effective September 24, 1979; 8 SDR 24, effective September 16, 1981; 30 SDR 171, effective May 10, 2004; 42 SDR 178, effective July 1, 2016.

General Authority: SDCL 12-1-9(3).

Law Implemented: SDCL 12-12-1.

(4) **5:02:04:18. Notice of statewide secondary runoff election.** The notice of the statewide secondary runoff election shall be in the following form:

**NOTICE OF SECONDARY RUNOFF ELECTION
STATE OF SOUTH DAKOTA**

Because no candidate for _____ received the required thirty-five percent of the vote in the primary election held on June _____, _____, a secondary runoff election will be held on Tuesday, August _____, _____, in each county in the state. The polling places will be the same as those used in the primary election, and the polls will be open from seven a.m. to seven p.m. _____ (~~mountain or central daylight savings~~) local time.

The candidates for nomination for _____, as determined by the official state canvass, are

Secretary of State, South Dakota

Source: 12 SDR 43, effective September 23, 1985; 29 SDR 113, effective January 30, 2003; 40 SDR 40, effective September 9, 2013.

General Authority: SDCL 12-1-9(3).

Law Implemented: SDCL 12-6-51.1, 12-12-1.

(5) **5:02:04:19. Publication of ballot for secondary runoff election.** A copy of the secondary runoff election ballot as prescribed in § 5:02:06:17 shall be printed with the notice prescribed in § 5:02:04:18.

Source: 12 SDR 43, effective September 23, 1985; 14 SDR 19, effective August 9, 1987.

General Authority: SDCL 12-1-9.

Law Implemented: SDCL 12-12-1.

CHAPTER 5:02:06

BALLOT FORMS AND COLOR

(6) **5:02:06:01. General election.** The general election ballot ~~must~~ shall be white and ~~must~~ shall be in the following form, as applicable:

Front Side:

| OFFICIAL GENERAL ELECTION BALLOT | | |
|--|--|--|
| November _____ | County, South Dakota | |
| INSTRUCTIONS TO THE VOTER: Insert appropriate instructions from ARSD 5:02:06:01.02 | | |
| For Presidential Electors You may vote for <u>one</u> slate or leave it blank. | For Secretary of State You may vote for <u>one</u> or leave it blank. | For State Senator, District _____ You may vote for <u>one</u> or leave it blank. |
| <input type="radio"/> Doe & Roe Electors Party Label John Hall Jane Smith Pat Jones | <input type="radio"/> John Doe Party Label <input type="radio"/> Jane Smith Party Label <input type="radio"/> Pat Jones Independent | <input type="radio"/> John Doe Party Label <input type="radio"/> Jane Smith Party Label <input type="radio"/> Pat Jones Independent |
| <input type="radio"/> Lee & Jones Electors Party Label Jill Doe John Doe Shannon McGee | For Attorney General You may vote for <u>one</u> or leave it blank. | For State Representative, District _____ You may vote for up to <u>two</u> or leave it blank. |
| <input type="radio"/> Hill & Hall Electors Party Label Bill Smith June Johnson Kim Olson | <input type="radio"/> John Doe Party Label <input type="radio"/> Jane Smith Party Label <input type="radio"/> Pat Jones Independent | <input type="radio"/> John Doe Party Label <input type="radio"/> Jane Smith Party Label <input type="radio"/> Pat Jones Party Label |
| INSTRUCTIONS TO THE VOTER: Insert appropriate instructions from ARSD 5:02:06:01.02 | | |
| For United States Senator You may vote for <u>one</u> or leave it blank. | For State Auditor You may vote for <u>one</u> or leave it blank. | <input type="radio"/> Jill Doe Party Label <input type="radio"/> Shannon McGee Independent <input type="radio"/> Bill Smith Independent |
| <input type="radio"/> John Doe Party Label <input type="radio"/> Jane Smith Party Label <input type="radio"/> Pat Jones Independent | <input type="radio"/> John Doe Party Label <input type="radio"/> Jane Smith Party Label <input type="radio"/> Pat Jones Independent | For State Representative, District _____ (A or B) You may vote for <u>one</u> or leave it blank. |
| For United States Representative You may vote for <u>one</u> or leave it blank. | For State Treasurer You may vote for <u>one</u> or leave it blank. | <input type="radio"/> John Doe Party Label <input type="radio"/> Jane Smith Party Label <input type="radio"/> Pat Jones Independent |
| <input type="radio"/> John Doe Party Label <input type="radio"/> Jane Smith Party Label <input type="radio"/> Pat Jones Independent | <input type="radio"/> John Doe Party Label <input type="radio"/> Jane Smith Party Label <input type="radio"/> Pat Jones Independent | For County Treasurer You may vote for <u>one</u> or leave it blank. |
| <input type="radio"/> John Doe Party Label for Governor and Jane Doe for Lieutenant Governor <input type="radio"/> Pat Jones Party Label | For Commissioner of School and Public Lands You may vote for <u>one</u> or leave it blank. | <input type="radio"/> John Doe Party Label <input type="radio"/> Jane Smith Party Label <input type="radio"/> Pat Jones Independent |
| <input type="radio"/> Pat Jones Party Label for Governor and Kim Olson for Lieutenant Governor <input type="radio"/> Mary Johnson Independent | For Public Utilities Commissioner You may vote for <u>one</u> or leave it blank. | For (County Auditor) or (County Finance Officer) You may vote for <u>one</u> or leave it blank. |
| <input type="radio"/> John Doe Party Label for Governor and Shannon McGee for Lieutenant Governor | <input type="radio"/> John Doe Party Label <input type="radio"/> Jane Smith Party Label <input type="radio"/> Pat Jones Independent | <input type="radio"/> John Doe Party Label <input type="radio"/> Jane Smith Party Label <input type="radio"/> Pat Jones Independent |
| Go to top of next column | Go to top of next column | Turn Page |

Reverse Side:

| November _____, _____ | _____ County, South Dakota | |
|--|--|---|
| For Sheriff You may vote for <u>one</u> or leave it blank. | NONPOLITICAL BALLOT | INSTRUCTIONS TO THE VOTER: Insert appropriate instructions from ARSD 5:02:06:01.02 |
| <input type="radio"/> John Doe Party Label | Supreme Court Justice Retention Vote on each justice. Shall the justice(s) of the Supreme Court named on this ballot, whose term(s) expire(s) (date), be retained in office? | Constitutional Amendment(s) The following amendment(s) to the State Constitution (is/are) submitted to the voters by (the Legislature/petition). The amendment(s) will not become effective unless approved by majority vote. |
| <input type="radio"/> Jane Smith Party Label | Justice John Doe , representing the _____ Supreme Court District | Constitutional Amendment A |
| <input type="radio"/> Pat Jones Independent | <input type="radio"/> Yes <input type="radio"/> No | Title: |
| For Register of Deeds You may vote for <u>one</u> or leave it blank. | Justice John Doe , representing the _____ Supreme Court District | Attorney General Explanation: |
| <input type="radio"/> John Doe Party Label | <input type="radio"/> Yes <input type="radio"/> No | <u>Legislative Research Council's Prison/Jail Population Cost Estimate and/or Fiscal Note:</u> |
| <input type="radio"/> Jane Smith Party Label | | <input type="radio"/> Yes <input type="radio"/> No |
| <input type="radio"/> Pat Jones Independent | Judge of the Circuit Court For _____ Circuit, Position _____, you may vote for <u>one</u> or leave it blank | Initiated Measure(s) The following initiated measure(s) (was/were) proposed by petition for submission to the voters. Th(is/ese) initiated measure(s) will not become effective unless approved by majority vote. |
| For Coroner You may vote for <u>one</u> or leave it blank. | <input type="radio"/> John Doe <input type="radio"/> Jane Smith | Initiated Measure 1 |
| <input type="radio"/> John Doe Party Label | | Title: |
| <input type="radio"/> Jane Smith Party Label | | Attorney General Explanation: |
| <input type="radio"/> Pat Jones Independent | Water Development District For _____ Water Development District Director, Area _____, you may vote for <u>one</u> or leave it blank | <u>Legislative Research Council's Prison/Jail Population Cost Estimate and/or Fiscal Note:</u> |
| | <input type="radio"/> John Doe | <input type="radio"/> Yes <input type="radio"/> No |
| For County Commissioner, District _____ You may vote for <u>one</u> or leave it blank. | <input type="radio"/> Jane Smith | Referred Law(s) The following law(s) (was/were) adopted by the Legislature and referred to the voters by petition. Th(is/ese) referred measure(s) will not become effective unless approved by majority vote. |
| <input type="radio"/> John Doe Party Label | Heartland Consumers Power District For Subdivision No. _____ Director, you may vote for <u>one</u> or leave it blank | Referred Law 2 |
| <input type="radio"/> Jane Smith Party Label | <input type="radio"/> John Doe | Title: |
| <input type="radio"/> Pat Jones Independent | <input type="radio"/> Jane Smith | Attorney General Explanation: |
| | | <u>Legislative Research Council's Prison/Jail Population Cost Estimate and/or Fiscal Note:</u> |
| For County Commissioner At Large You may vote for up to _____ or leave it blank. | Conservation District For _____ Conservation District Supervisor, you may vote for <u>one</u> or leave it blank | <input type="radio"/> Yes <input type="radio"/> No |
| <input type="radio"/> John Doe Party Label | <input type="radio"/> John Doe _____ | |
| <input type="radio"/> Jane Smith Party Label | <input type="radio"/> Jane Smith _____ | |
| <input type="radio"/> Pat Jones Party Label | | |
| <input type="radio"/> Jill Doe Party Label | | |
| <input type="radio"/> Shannon McGee Independent | | |
| <input type="radio"/> Kim Olson Independent | | |
| | | |
| | | |
| Go to top of next column | Go to top of next column | Turn Page |

Printing note: The top right corner of the front side of each ballot must be cut off approximately as indicated by the dashed line on the ballot form one half inch from the right and top of the ballot. The person in charge of the election may select where to have the ballot stamp watermark printed on the ballot if the location is within the vendor's printing limitations.

If a ballot marking device does not use optical scan ballots, the general election ballot shall be white and shall be in the following form, as applicable:

|||||
00000001

OFFICIAL GENERAL ELECTION BALLOT

COUNTY, SOUTH DAKOTA

NOVEMBER _____

PRECINCT _____

PRESIDENTIAL ELECTORS-----
 _____ PARTY LABEL CANDIDATE & CANDIDATE ELECTORS
 _____ ELECTOR A, ELECTOR B, ELECTOR C

UNITED STATES SENATOR-----
 _____ PARTY LABEL CANDIDATE NAME

UNITED STATES REPRESENTATIVE-----
 _____ PARTY LABEL CANDIDATE NAME

GOVERNOR AND LIEUTENANT GOVERNOR-----
 _____ PARTY LABEL CANDIDATE NAME FOR GOVERNOR
 _____ CANDIDATE NAME FOR LIEUTENANT GOVERNOR

SECRETARY OF STATE-----
 _____ PARTY LABEL CANDIDATE NAME

ATTORNEY GENERAL-----
 _____ PARTY LABEL CANDIDATE NAME

STATE AUDITOR-----
 _____ PARTY LABEL CANDIDATE NAME

STATE TREASURER-----
 _____ PARTY LABEL CANDIDATE NAME

COMMISSIONER OF SCHOOL AND PUBLIC LANDS-----
 _____ PARTY LABEL CANDIDATE NAME

PUBLIC UTILITIES COMMISSIONER-----
 _____ PARTY LABEL CANDIDATE NAME

STATE SENATOR, DISTRICT _____
 _____ PARTY LABEL CANDIDATE NAME

STATE REPRESENTATIVE, DISTRICT _____
 _____ PARTY LABEL CANDIDATE NAME

COUNTY TREASURER-----
 _____ PARTY LABEL CANDIDATE NAME

COUNTY AUDITOR-----
 _____ PARTY LABEL CANDIDATE NAME

STATES ATTORNEY-----
 _____ PARTY LABEL CANDIDATE NAME

SHERIFF-----
 _____ PARTY LABEL CANDIDATE NAME

REGISTER OF DEEDS-----

| |
|--|
| <u>PARTY LABEL CANDIDATE NAME</u> |
| <u>CORONER-----</u> |
| <u>PARTY LABEL CANDIDATE NAME</u> |
| <u>COUNTY COMMISSIONER, DISTRICT -----</u> |
| <u>PARTY LABEL CANDIDATE NAME</u> |
| <u>COUNTY COMMISSIONER AT LARGE-----</u> |
| <u>PARTY LABEL CANDIDATE NAME</u> |
| <u>SUPREME COURT JUSTICE RETENTION - CANDIDATE NAME</u> |
| <u>YES OR NO</u> |
| <u>JUDGE OF THE CIRCUIT COURT, _____ CIRCUIT, POSITION _____</u> |
| <u>CANDIDATE NAME</u> |
| <u>NAME WATER DEVELOPMENT DISTRICT DIRECTOR, AREA _____</u> |
| <u>CANDIDATE NAME</u> |
| <u>HEARTLAND CONSUMERS POWER DISTRICT,</u> |
| <u>SUBDIVISION # _____ DIRECTOR-----</u> |
| <u>CANDIDATE NAME</u> |
| <u>NAME CONSERVATION DISTRICT SUPERVISOR-----</u> |
| <u>CANDIDATE NAME</u> |
| <u>CONSTITUTIONAL AMENDMENT A-----</u> |
| <u>YES OR NO</u> |
| <u>INITIATED MEASURE 1-----</u> |
| <u>YES OR NO</u> |
| <u>REFERRED LAW 2-----</u> |
| <u>YES OR NO</u> |

OFFICIAL GENERAL ELECTION BALLOT
_____ COUNTY, SOUTH DAKOTA
NOVEMBER _____,
PRECINCT _____

Printing note: The top right corner of the front side of each ballot must be cut off approximately one half inch from the right and top of the ballot. The person in charge of the election shall instruct the election worker to place the ballot stamp on the reverse side of the ballot.

The ballot style specific activation bar code and associated number must be preprinted at the top left of the ballot and the election name, date of the election, county, state, and precinct name/number must be printed at the bottom of the ballot on 4.25” wide, white thermal ballot paper prior to being distributed to the polling location.

The pre-printing requirements above are **only** waived for a county that uses the ExpressVote and the ExpressLink ballot printer for in-person absentee voting in the county auditor’s office. The county auditor will purchase blank white thermal ballot paper. The auditor or auditor’s staff shall use the ExpressLink ballot printer to print the following on the blank white thermal ballot paper prior to distributing a ballot to a voter: the activation barcode and ballot style number, the words Official General Election Ballot, date of the election, county, state, and precinct name/number. This information must be printed on the top left of the ballot.

Source: 2 SDR 5, effective July 30, 1975; 2 SDR 46, effective December 30, 1975; 6 SDR 25, effective September 24, 1979; 8 SDR 24, effective September 16, 1981; 12 SDR 43, effective September 23, 1985; 19 SDR 12, effective August 5, 1992; 22 SDR 95, effective January 18, 1996; 23 SDR 115, effective January 22, 1997; 23 SDR 236, effective July 17, 1997; 27 SDR 146, effective July 9, 2001; 28 SDR 99,

effective January 17, 2002; 29 SDR 177, effective July 2, 2003; 33 SDR 230, effective July 1, 2007; 35 SDR 48, effective September 8, 2008; 36 SDR 209, effective June 30, 2010; 42 SDR 15, effective August 11, 2015; 42 SDR 178, effective July 1, 2016.

General Authority: SDCL 12-1-9(2).

Law Implemented: SDCL 12-16-2.1, 12-16-9, 12-16-10.

(7) 5:02:06:10. Primary ballot. The primary election ballot must have a blue indicator for the Democratic Party, white for the Republican Party, and a different color as certified by the Secretary of State for any other party. The ballot must be in one of the following forms, as applicable:

Hand counted paper ballots may only be used if there is no federal race on the ballot and must be in the following form, as applicable:

_____ PARTY
OFFICIAL PRIMARY ELECTION BALLOT
_____ COUNTY, SOUTH DAKOTA
JUNE _____, _____

To vote use a cross (X) or a check mark (✓) in the square in front of the name. DO NOT cast more votes than are allowed in each race.

For Governor, you may vote for one or leave it blank

- _____
- _____

For State Senator, District _____, you may vote for one or leave it blank

- _____
- _____

For State Representative, District _____, (you may vote for up to two or leave it blank) or (you may vote for one or leave it blank)

- _____
- _____

For County Treasurer, you may vote for one or leave it blank

- _____
- _____

For County Auditor or Finance Officer, you may vote for one or leave it blank

- _____
- _____

For States Attorney, you may vote for one or leave it blank

- _____
- _____

For Sheriff, you may vote for one or leave it blank

- _____

For Register of Deeds, you may vote for one or leave it blank

For Coroner, you may vote for one or leave it blank

For County Commissioner, District _____, you may vote for one or leave it blank

For County Commissioner at Large, you may vote for up to _____ or leave it blank

For Delegates to State Convention, you may vote for up to _____ or leave it blank

For Precinct Committeeman, you may vote for one or leave it blank

For Precinct Committeewoman, you may vote for one or leave it blank

If there is a federal race on the ballot, an optical scan ballot must be used and in the following format, as applicable:

Front Side:

| OFFICIAL PARTY PRIMARY ELECTION BALLOT | | |
|---|--|---|
| June _____, _____ INSTRUCTIONS TO THE VOTER: Insert appropriate instructions from ARSD 5:02:06:01.02 | County, South Dakota | Ballot Stamp |
| For Presidential Delegates and Alternates You may vote for one slate or leave it blank. <input type="radio"/> Candidates preferring John Hall for President Delegates: John Doe Jane Doe Pat Jones Alternates: John Doe Jane Doe Pat Jones <input type="radio"/> Candidates preferring Jane Smith for President <u>Delegates:</u> John Doe Jane Doe Pat Jones <u>Alternates:</u> John Doe Jane Doe Pat Jones <input type="radio"/> Candidates preferring Pat Jones for President <u>Delegates:</u> John Doe Jane Doe <u>Alternates:</u> John Doe Jane Doe Pat Jones | For United States Senator You may vote for one or leave it blank. <input type="radio"/> John Doe <input type="radio"/> Jane Smith <input type="radio"/> Pat Jones For United States Representative You may vote for one or leave it blank. <input type="radio"/> John Doe <input type="radio"/> Jane Smith <input type="radio"/> Pat Jones For Governor You may vote for one or leave it blank. <input type="radio"/> John Doe <input type="radio"/> Pat Jones <input type="radio"/> Mary Johnson For State Senator, District _____ You may vote for one or leave it blank. <input type="radio"/> John Doe <input type="radio"/> Jane Smith <input type="radio"/> Pat Jones For State Representative, District _____ You may vote for up to two or leave it blank. <input type="radio"/> John Doe <input type="radio"/> Jane Smith <input type="radio"/> Pat Jones | For State Representative, District _____ (A or B) You may vote for one or leave it blank. <input type="radio"/> John Doe <input type="radio"/> Jane Smith <input type="radio"/> Pat Jones For County Treasurer You may vote for one or leave it blank. <input type="radio"/> John Doe <input type="radio"/> Jane Smith <input type="radio"/> Pat Jones For States Attorney You may vote for one or leave it blank. <input type="radio"/> John Doe <input type="radio"/> Jane Smith <input type="radio"/> Pat Jones For Sheriff You may vote for one or leave it blank. <input type="radio"/> John Doe <input type="radio"/> Jane Smith <input type="radio"/> Pat Jones For (County Auditor) or (County Finance Officer) You may vote for one or leave it blank. <input type="radio"/> John Doe <input type="radio"/> Jane Smith <input type="radio"/> Pat Jones |
| INSTRUCTIONS TO THE VOTER: Insert appropriate instructions from ARSD 5:02:06:01.02 For Delegates to Support a Presidential Candidate You may vote for one or leave it blank. <input type="radio"/> Delegates to support John Doe <input type="radio"/> Delegates to support Jane Smith <input type="radio"/> Delegates to support Pat Jones | <input type="radio"/> Jill Doe <input type="radio"/> Shannon McGee <input type="radio"/> Bill Smith | For Register of Deeds You may vote for one or leave it blank. <input type="radio"/> John Doe <input type="radio"/> Jane Smith <input type="radio"/> Pat Jones |
| Go to top of next column | Go to top of next column | Turn Page |

| | | |
|--|--|--|
| Reverse Side: | | |
| June _____, _____ | County, South Dakota | |
| For Coroner You may vote for <u>one</u> or leave it blank. | For Precinct Committeewoman You may vote for <u>one</u> or leave it blank. | For City Commission, _____ year term You may vote for up to _____ or leave it blank. |
| <input type="radio"/> John Doe | <input type="radio"/> Jolene Doe | <input type="radio"/> John Doe |
| <input type="radio"/> Jane Smith | <input type="radio"/> Jane Smith | <input type="radio"/> Jane Smith |
| <input type="radio"/> Pat Jones | <input type="radio"/> Patricia Jones | <input type="radio"/> Pat Jones |
| For County Commissioner, District _____ You may vote for <u>one</u> or leave it blank. | NONPOLITICAL BALLOT | <input type="radio"/> Jill Doe |
| <input type="radio"/> John Doe | | <input type="radio"/> Shannon McGee |
| <input type="radio"/> Jane Smith | | <input type="radio"/> Kim Olson |
| <input type="radio"/> Pat Jones | | |
| | | INSTRUCTIONS TO THE VOTER: Insert appropriate instructions from ARSD 5:02:06:01.02 |
| | | County Initiated Ordinance(s) The following initiated ordinance(s) (was/were) proposed by petition for submission to the voters. Th(is/ese) initiated ordinance(s) will not become effective unless approved by majority vote. |
| For County Commissioner At Large You may vote for up to _____ or leave it blank. | Water Development District For _____ Water Development District Director, Area _____, you may vote for <u>one</u> or leave it blank. | Initiated Measure 1 Title: States Attorney Explanation: |
| <input type="radio"/> John Doe | <input type="radio"/> John Doe | <input type="radio"/> Yes |
| <input type="radio"/> Jane Smith | <input type="radio"/> Jane Smith | <input type="radio"/> No |
| <input type="radio"/> Pat Jones | | |
| <input type="radio"/> Jill Doe | Heartland Consumers Power District For Subdivision No. _____ Director, you may vote for <u>one</u> or leave it blank. | County Referred Ordinance(s)/Resolution(s) The following <u>referred</u> ordinance(s) or resolution(s) (was/were) adopted by the County Commission and referred to the voters by petition proposed by petition for submission to the voters. Th(is/ese) referred ordinance(s) or resolution(s) will not become effective unless approved by majority vote. |
| <input type="radio"/> Shannon McGee | <input type="radio"/> John Doe | |
| <input type="radio"/> Kim Olson | <input type="radio"/> Jane Smith | Referred Law 2 Title: States Attorney Explanation: |
| For Delegates to State Convention You may vote for up to _____ or leave it blank. | School District For School Board Member, _____ year term You may vote for up to _____ or leave it blank. | <input type="radio"/> Yes |
| <input type="radio"/> John Doe | <input type="radio"/> John Doe | <input type="radio"/> No |
| <input type="radio"/> Jane Smith | <input type="radio"/> Jane Smith | |
| <input type="radio"/> Pat Jones | <input type="radio"/> Pat Jones | Municipal Initiated Ordinance(s) (was/were) proposed by petition for |
| <input type="radio"/> Jill Doe | <input type="radio"/> Jill Doe | Initiated Measure 1 Title: City Attorney Explanation: |
| <input type="radio"/> Shannon McGee | <input type="radio"/> Shannon McGee | <input type="radio"/> Yes |
| <input type="radio"/> Kim Olson | <input type="radio"/> Kim Olson | <input type="radio"/> No |
| For Precinct Committeeman You may vote for <u>one</u> or leave it blank. | City of _____ For Mayor You may vote for one or leave it blank. | Municipal Referred Ordinance(s) Municipal Referred Ordinance(s) (was/were) adopted by the City Council and referred to the voters by petition. Th(is/ese) ordinance(s) will not become effective unless approved by majority vote. |
| <input type="radio"/> John Doe | <input type="radio"/> John Doe | Referred Law 2 Title: City Attorney Explanation: |
| <input type="radio"/> Jim Smith | <input type="radio"/> Jim Smith | <input type="radio"/> Yes |
| <input type="radio"/> Pat Jones | <input type="radio"/> Patricia Jones | <input type="radio"/> No |
| Go to top of next column | Go to top of next column | Turn Page |

If the political party does not print the delegates and alternates for the presidential race on the ballot you will use this format for that race:

| | |
|---|---|
| OFFICIAL | PARTY PRIMARY ELECTION BALLOT |
| June _____ | County, South Dakota |
| INSTRUCTIONS TO THE VOTER: Insert appropriate instructions from ARSD 5:02:06:01.02 | For Governor You may vote for <u>eng</u> or leave it blank. |
| For Delegates to Support a Presidential Candidate You may vote for one or leave it blank. | |
| <input type="radio"/> Delegates to support Pat Jones | |
| <input type="radio"/> Delegates to support John Doe | |

Printing notes: For county commissioners at large or delegates to state convention, use the correct number designations for the number of candidates to be elected. For state representative, use the correct "vote for" phrase for the number to be elected. The top right corner of the front side of each ballot must be cut off approximately one half inch from the right and top of the ballot. The person in charge of the election may select where to have the ballot stamp watermark printed on the ballot if the location is within the vendor's printing limitations.

If a municipality, school district ,or other local jurisdiction has a local ballot measure and the jurisdiction combines with the primary election, that ballot measure must be included on the county ballot and must follow the administrative rule for the layout of that specific ballot measure.

The primary election ballot must have a blue indicator for the Democratic Party, white for the Republican Party, and a different color as certified by the Secretary of State for any other party which must be printed at the bottom of the front side of the ballot. The ballot must be in the following forms, as applicable for a ballot marking device that does not use optical scan ballots:

|||||
 00000001

OFFICIAL **PARTY PRIMARY ELECTION BALLOT**
 JUNE _____
 COUNTY, SOUTH DAKOTA
 PRECINCT _____

 PRESIDENTIAL DELEGATES AND ALTERNATES-----
 CANDIDATES PREFERRING CANDIDATE A FOR PRESIDENT
 DELEGATE A, DELEGATE B, DELEGATE C,
 ALTERNATE A, ALTERNATE B, ALTERNATE C
 DELEGATES TO SUPPORT A PRESIDENTIAL CANDIDATE-----
 DELEGATES TO SUPPORT CANDIDATE A

UNITED STATES SENATOR-----

 CANDIDATE NAME
 UNITED STATES REPRESENTATIVE-----

 CANDIDATE NAME
 GOVERNOR-----

 CANDIDATE NAME
 STATE SENATOR, DISTRICT -----

 CANDIDATE NAME
 STATE REPRESENTATIVE, DISTRICT -----

 CANDIDATE NAME
 COUNTY TREASURER-----

 CANDIDATE NAME
 COUNTY AUDITOR-----

 CANDIDATE NAME
 STATES ATTORNEY-----

 CANDIDATE NAME
 SHERIFF-----

 CANDIDATE NAME
 REGISTER OF DEEDS-----

 CANDIDATE NAME
 CORONER-----

 CANDIDATE NAME
 COUNTY COMMISSIONER, DISTRICT -----

 CANDIDATE NAME
 COUNTY COMMISSIONER AT LARGE-----

 CANDIDATE NAME
 DELEGATES TO STATE CONVENTION-----

 CANDIDATE NAME
 PRECINCT COMMITTEEMAN-----

 CANDIDATE NAME
 PRECINCT COMMITTEEWOMAN-----

 CANDIDATE NAME
 JUDGE OF THE CIRCUIT COURT CIRCUIT, POSITION -----

 CANDIDATE NAME
 NAME WATER DEVELOPMENT DISTRICT DIRECTOR, AREA -----

 CANDIDATE NAME
 HEARTLAND CONSUMERS POWER DISTRICT,
 SUBDIVISION # DIRECTOR-----

 CANDIDATE NAME
 SCHOOL BOARD MEMBER, YEAR TERM-----

 CANDIDATE NAME
 MAYOR-----

 CANDIDATE NAME
 CITY COMMISSION, YEAR TERM-----

 CANDIDATE NAME
 COUNTY INITIATED MEASURE 1-----

 YES OR NO
 COUNTY REFERRED LAW 2-----

 YES OR NO
 MUNICIPAL INITIATED MEASURE 1-----

 YES OR NO
 MUNICIPAL REFERRED LAW 2-----

 YES OR NO

OFFICIAL PARTY PRIMARY ELECTION BALLOT
COUNTY, SOUTH DAKOTA
JUNE ,
PRECINCT

Printing note: The top right corner of the front side of each ballot must be cut off approximately one half inch from the right and top of the ballot. The person in charge of the election shall instruct the election worker to place the ballot stamp on the reverse side of the ballot.

The ballot style specific activation bar code and associated number must be preprinted at the top left of the ballot and the official election name, date of the election, county, state, precinct name/number, and party color indicator (as prescribed by administrative rule 5:02:06:10) must be printed at the bottom of the ballot on 4.25" wide, white thermal ballot paper prior to being distributed to the polling location.

The pre-printing language requirements above are **only** waived for a county that uses the ExpressVote and the ExpressLink ballot printer for in-person absentee voting in the county auditor's office. The county auditor shall purchase white thermal ballot paper with the party color indicator (as prescribed by administrative rule 5:02:06:10) printed at the bottom of the ballot. The county auditor or county auditor's staff shall use the ExpressLink ballot printer to print the following on the blank white thermal ballot paper prior to distributing a ballot to a voter: the activation barcode and ballot style number, the words Official _____ Party Primary Election Ballot, date of the election, county, state and precinct name/number. This information must be printed on the top left of the ballot.

General Authority: SDCL 12-1-9(2).

Law Implemented: SDCL 12-6-14, 12-16-2.1, 12-5-3.11.

- (8) **5:02:06:17. Ballot for statewide secondary runoff election.** The ballot for a statewide secondary runoff election shall be in the same form prescribed in 5:02:06:10. The form may only include the races to be voted upon. The heading shall state "OFFICIAL SECONDARY RUNOFF ELECTION BALLOT".

Source: 12 SDR 43, effective September 23, 1985; 25 SDR 8, effective August 3, 1998; 28 SDR 99, effective January 17, 2002; 29 SDR 177, effective July 2, 2003; 32 SDR 225, effective July 3, 2006; 40 SDR 40, effective September 9, 2013.

General Authority: SDCL 12-1-9(2).

Law Implemented: SDCL 12-6-51.1.

- (9) **5:02:06:20. County, municipal, or school tax levy opt-out ballot.** The tax levy opt-out ballot must be white and in the following form:

OFFICIAL TAX LEVY OPT-OUT ELECTION BALLOT
(_____ County) (Name of Municipality) or (_____ School District No. _____)
_____, SOUTH DAKOTA
(Election Date)

The following tax levy opt-out was passed by the governing body and (submitted) (referred by petition) to the voters. The tax levy opt-out will not become effective unless approved by majority vote.

(HERE LIST THE AMOUNT AND TERMS OF THE INCREASED TAX LEVY)

To vote use a cross (X) or check mark (✓) in the square in front of "Yes" or "No".

- Yes A vote "Yes" will increase the tax levy by the amount of the opt-out.
- No A vote "No" will leave the tax levy as it is without the amount of the opt-out.

Source: 32 SDR 225, effective July 3, 2006.
General Authority: SDCL 12-1-9(2).
Law Implemented: SDCL 10-12-43, 10-13-36.

(10) **New Rule 5:02:06:26:** School board capital outlay ballot. The capital outlay ballot must be white and in the following form:

OFFICIAL SCHOOL CAPITAL OUTLAY BALLOT
 _____ **SCHOOL DISTRICT NO.** _____
SOUTH DAKOTA
(Election Date)

The following decision was passed by the school board and submitted to the voters. The decision will not become effective unless approved by sixty percent of the vote.

(HERE LIST THE AMOUNT AND TERMS OF THE INSTALLMENT PURCHASE CONTRACT OR LEASE-PURCHASE, OR ISSUANCE OF CAPITAL OUTLAY CERTIFICATES)

To vote use a cross (X) or check mark (✓) in the square in front of "Yes" or "No".

- Yes A vote "Yes" will approve the board's capital outlay decision.
- No A vote "No" will not approve the board's capital outlay decision.

Source:
 General Authority: SDCL 12-1-9(2).
 Law Implemented: SDCL 13-16-6.4.

(11) **New Rule 5:02:06:27:** School sentinel program ballot. The ballot shall be white and shall be in the following form:

OFFICIAL SCHOOL SENTINEL PROGRAM BALLOT
 _____ **SCHOOL DISTRICT NO.** _____
South Dakota
(Election Date)

The following school board decision regarding the implementation of a school sentinel program was referred by petition for submission to the voters. The sentinel program will not become effective unless approved by majority vote.

Title:

State's Attorney Explanation: (HERE LIST STATE'S ATTORNEY'S EXPLANATION)

To vote use a cross (X) or check mark (✓) in the square next to "Yes" or "No".

- YES A vote "Yes" will adopt the sentinel program.
- NO A vote "No" will not adopt the sentinel program.

Source:

General Authority: SDCL 12-1-9(2)

Law Implemented: SDCL 13-64-7, 13-64-13, and 13-64-14

(12) New Rule 5:02:06:28: County annual tax levy for maintaining, repairing, constructing and reconstructing roads and bridges ballot. The tax levy ballot must be white and in the following form:

OFFICIAL ROADS AND BRIDGES TAX LEVY ELECTION BALLOT
 _____, COUNTY, SOUTH DAKOTA
 (Election Date)

The following tax levy was passed by the governing body and referred by petition for submission to the voters. The tax levy will not become effective unless approved by majority vote.

Title: (HERE LIST TITLE OF REFERENDUM TO BE VOTED ON)

States Attorney Explanation: (HERE LIST STATES ATTORNEY'S EXPLANATION)

To vote use a cross (X) or check mark (✓) in the square in front of "Yes" or "No."

- Yes A vote "Yes" will adopt the annual tax levy.
- No A vote "No" will not adopt the annual tax levy.

Source:

General Authority: SDCL 12-1-9(2).

Law Implemented: SDCL 10-12-13, 7-18A-21, and 7-18A-22.

CHAPTER 5:02:08

PETITIONS

(13) 5:02:08:00.01. Requirements for counting signatures on petitions. Requirements for counting signatures on a petition sheet are as follows:

- (1) No signature on a petition sheet may be counted if one of the following conditions is present:

(a) The form of the petition does not meet the requirements of this chapter;

(b) The petition sheet is not a self-contained sheet of paper printed front and back;

(bc) The circulator's verification is not completed or is improperly completed, according to subdivision 5:02:08:00(3) unless the missing information is completed elsewhere on the petition sheet. A completed circulator's verification must include the printed name of the circulator, the circulator's residence address as provided in subdivision 5:02:08:00.01(2)(c), and complete date;

(ed) The declaration of candidacy has not been completed on or after the first date authorized by statute to circulate the petition, and signed by the candidate and the signature witnessed by an official empowered to administer oaths in South Dakota; or

(de) The circulator's verification was signed by more than one circulator; and

(2) An individual signature on a petition sheet may not be counted if one of the following conditions is present:

(a) It was signed prior to the signing of the candidate's declaration of candidacy or, if for a ballot question, it was signed before a copy of the text was filed with the secretary of state;

(b) It was signed after the circulator completed the verification;

(c) The residence address does not include a street and house number or a rural route and box number and the town. If the signer is a resident of a second or third class municipality, a post office box number may be used. If the signer does not have a residence address or post office box number, a description of the residence location must be provided. If the signer is a resident of a building with a publicly known name, the building name may be used;

(d) The date of signing, including month and day, is not indicated;

(e) The signer's name is not printed and legible; or

(f) The signer's county of voter registration is not provided.

Source: 10 SDR 27, effective September 26, 1983; 12 SDR 43, effective September 23, 1985; 14 SDR 19, effective August 9, 1987; 16 SDR 20, effective August 10, 1989; 19 SDR 12, effective August 5, 1992; 21 SDR 77, effective October 24, 1994; 26 SDR 168, effective June 25, 2000; 33 SDR 230, effective July 1, 2007; 35 SDR 48, effective September 8, 2008.

General Authority: SDCL 12-1-9(6).

Law Implemented: SDCL 2-1-2, 2-1-2.1, 2-1-4, 9-13-11, 12-1-1, 12-1-1.1, 12-1-2, 12-6-8, 13-7-6.

(14) 5:02:08:00.02. Sections of pPetition sheets. ~~A petition may contain more than one section. Each sheet is considered a section of a petition containing more than one sheet of paper.~~ A petition may be composed of multiple sheets, which each sheet must be a self-contained sheet of paper printed front and backside and have identical headings printed at the top.

Source: 16 SDR 20, effective August 10, 1989.

General Authority: SDCL 12-1-9.

Law Implemented: SDCL 12-1-3(14).

Cross-Reference: Guidelines for acceptance of petitions, § 5:02:08:00(3).

(15) 5:02:08:00.05. Methodology for conducting the random sample for a statewide candidate, initiative petition, referred law petition, or initiated constitutional amendment petition. Upon receiving any statewide candidate petition, initiative petition, referred law petition, or initiated

constitutional amendment petition, the secretary of state shall use the following method for conducting the random sample:

(1) Each sheet within the petition shall be consecutively numbered;

(2) A spreadsheet consisting of rows and columns shall be created listing each petition sheet number in a column and the number of eligible signatures, as defined in subsection 4(d), in a separate column;

(3) The Office of Secretary State must use the graph in subdivision (8) which identifies how many signatures shall be randomly sampled to meet the statutory requirement based on the number of petition signatures submitted. Microsoft Excel functions, or a similar program as determined by the secretary of state, shall be used to randomly select the signatures for validation;

(4) Each signature in the ~~five percent~~ random sample shall be evaluated as to whether the signature is valid or invalid pursuant to §§ 5:02:08:00 and 5:02:08:00.01, and in accordance with:

(a) No signature line may be counted unless the person is a registered voter in the county indicated in the signature line;

(b) When validating a statewide partisan candidate petition, the party affiliation is also validated for each randomly selected eligible signature;

(c) A signature line consists of two rows containing six fields each, signature line is separately numbered as per § 5:02:08:00.03;

(d) An eligible signature is a signature line that is filled in partially or completely. If a signature line is empty or crossed out, said signature line is not included as an eligible signature. A signature line containing an abstract mark or markings shall be counted as an eligible signature; and

(e) A random sample signatures are those eligible signatures contained in the ~~five percent~~ random sample generated by the program designated in subdivision (3). The total number of valid signatures submitted is extrapolated from the ~~five percent~~ random sample;

(5) The total number of valid signatures is determined by:

(a) Subtracting the number of invalid random sample signatures from the total number of random sample signatures;

(b) Next, determine the percentage of valid signatures in the random sample signatures by dividing the number of valid signatures by the total number of random sample signatures;

(c) The resulting percentage is multiplied by the total number of eligible signatures submitted;
and

(d) The resulting number is the number of valid signatures the secretary of state uses to determine how the petition is certified;

(6) If the number of valid signatures as determined in subdivision (5) is equal to or greater than the required number of signatures needed to file the petition, the secretary of state shall certify the petition as filed; and

(7) If the number of valid signatures as determined in subdivision (5) is less than the required number of signatures needed to file the petition, the secretary of state shall certify the petition as not filed.

(8) The graph below identifies how many signatures shall be randomly sampled to meet the state requirements.

(a) If the "Sample Size" number is less than the "Safe Harbor" Sample Size number the Secretary of State will use the Safe Harbor number.

(b) If the number of submitted signatures is between two numbers listed in the "Signatures Submitted" column, the Secretary of State will round down to the lower number if the number is 500 or less and will round up if 501 and higher. Ex. 16,500 signatures submitted, the sample size will be 703. 16,887 signatures submitted, the sample size will be 704.

| Sample Size | Signatures Submitted | "Safe Harbor" Sample Size | Sample size % of total |
|-------------|----------------------|---------------------------|------------------------|
| 694 | 13,871 | 699 | 5.0032% |
| 699 | 15,000 | 701 | 4.6600% |
| 701 | 16,000 | 703 | 4.3813% |
| 703 | 17,000 | 704 | 4.1353% |
| 704 | 18,000 | 706 | 3.9111% |
| 706 | 19,000 | 707 | 3.7158% |
| 707 | 20,000 | 708 | 3.5350% |
| 708 | 21,000 | 709 | 3.3714% |
| 709 | 22,000 | 710 | 3.2227% |
| 710 | 23,000 | 711 | 3.0870% |
| 711 | 24,000 | 712 | 2.9625% |
| 712 | 25,000 | 713 | 2.8480% |
| 713 | 26,000 | 714 | 2.7423% |
| 714 | 27,000 | 714 | 2.6444% |
| 714 | 28,000 | 715 | 2.5500% |
| 715 | 29,000 | 715 | 2.4655% |
| 715 | 30,000 | 716 | 2.3833% |
| 716 | 31,000 | 716 | 2.3097% |
| 716 | 32,000 | 717 | 2.2375% |
| 717 | 33,000 | 717 | 2.1727% |
| 717 | 34,000 | 718 | 2.1088% |
| 718 | 35,000 | 718 | 2.0514% |
| 718 | 36,000 | 719 | 1.9944% |

| | | | |
|-----|--------|-----|---------|
| 719 | 37,000 | 719 | 1.9432% |
| 719 | 38,000 | 719 | 1.8921% |
| 719 | 39,000 | 720 | 1.8436% |
| 720 | 40,000 | 720 | 1.8000% |
| 720 | 41,000 | 720 | 1.7561% |
| 720 | 42,000 | 721 | 1.7143% |
| 721 | 43,000 | 721 | 1.6767% |
| 721 | 44,000 | 721 | 1.6386% |
| 721 | 45,000 | 721 | 1.6022% |
| 721 | 46,000 | 722 | 1.5674% |
| 722 | 47,000 | 722 | 1.5362% |
| 722 | 48,000 | 722 | 1.5042% |
| 722 | 49,000 | 722 | 1.4735% |
| 722 | 50,000 | 723 | 1.4440% |
| 723 | 51,000 | 723 | 1.4176% |
| 723 | 52,000 | 723 | 1.3904% |
| 723 | 53,000 | 723 | 1.3642% |
| 723 | 54,000 | 723 | 1.3389% |
| 723 | 55,000 | 723 | 1.3145% |
| 723 | 56,000 | 724 | 1.2911% |
| 724 | 57,000 | 724 | 1.2702% |
| 724 | 58,000 | 724 | 1.2483% |
| 724 | 59,000 | 724 | 1.2271% |
| 724 | 60,000 | 724 | 1.2067% |
| 724 | 61,000 | 724 | 1.1869% |
| 724 | 62,000 | 724 | 1.1677% |
| 724 | 63,000 | 725 | 1.1492% |
| 725 | 64,000 | 725 | 1.1328% |
| 725 | 65,000 | 725 | 1.1154% |
| 725 | 66,000 | 725 | 1.0985% |
| 725 | 67,000 | 725 | 1.0821% |
| 725 | 68,000 | 725 | 1.0662% |
| 725 | 69,000 | 725 | 1.0507% |
| 725 | 70,000 | 725 | 1.0357% |
| 725 | 71,000 | 726 | 1.0211% |
| 726 | 72,000 | 726 | 1.0083% |
| 726 | 73,000 | 726 | 0.9945% |
| 726 | 74,000 | 726 | 0.9811% |
| 726 | 75,000 | 726 | 0.9680% |
| 726 | 76,000 | 726 | 0.9553% |
| 726 | 77,000 | 726 | 0.9429% |

| | | | |
|-----|--------|-----|---------|
| 726 | 78,000 | 726 | 0.9308% |
| 726 | 79,000 | 726 | 0.9190% |
| 726 | 80,000 | 726 | 0.9075% |
| 726 | 81,000 | 726 | 0.8963% |
| 726 | 82,000 | 726 | 0.8854% |
| 726 | 83,000 | 727 | 0.8747% |
| 727 | 84,000 | 727 | 0.8655% |
| 727 | 85,000 | 727 | 0.8553% |

Source: 33 SDR 230, effective July 1, 2007; 42 SDR 178, effective July 1, 2016.

General Authority: SDCL 2-1-16.

Law Implemented: SDCL 2-1-16, 12-1-35, 12-1-36.

(16) 5:02:08:36. Form of petition for taxpayer of real property conservation district supervisor -- Nonpartisan election. The nominating petition for taxpayer of real property conservation district supervisor must be in the following form:

**NONPOLITICAL CONSERVATION DISTRICT PETITION
~~TAXPAYER OF REAL PROPERTY CONSERVATION DISTRICT SUPERVISOR~~**

INSTRUCTIONS TO CANDIDATE: The heading of this petition and the declaration of candidacy must be fully completed before the petition is circulated for signatures.

WE, THE UNDERSIGNED registered voters of _____ Conservation District in _____ County(ies), South Dakota, nominate _____ of _____ County, State of South Dakota, whose mailing address is _____, _____, SD _____, as a candidate for the office of Conservation District Supervisor, ~~Taxpayer of Real Property~~, for "a four" "the remaining two years of a four" (cross out incorrect option) year term, within the _____ Conservation District at the general election to be held on November _____, _____.

DECLARATION OF CANDIDATE

I, _____ (print name here exactly as you want it on the election ballot), under oath, declare that I reside in _____ County, ~~that I am a taxpayer of real property~~, and that I am eligible to seek the office for which I am a candidate. If nominated and elected, I will qualify and serve as Conservation District Supervisor.

(Signed) _____

Sworn to before me this _____ day of _____, _____.

(Seal)

Signature of Officer Administering Oath

Title of Officer Administering Oath

My commission expires _____.

The balance of this petition form is prescribed in § 5:02:08:00.03.

Source: 20 SDR 4, effective July 19, 1993; 27 SDR 146, effective July 9, 2001.
General Authority: SDCL 12-1-9(7).
Law Implemented: SDCL 38-8-39.

(17) Repeal: 5:02:08:37. Form of petition for urban area conservation district supervisor -- Nonpartisan election. The nominating petition for urban area conservation district supervisor must be in the following form:

~~NONPOLITICAL CONSERVATION DISTRICT PETITION~~
~~URBAN AREA CONSERVATION DISTRICT SUPERVISOR~~

~~INSTRUCTIONS TO CANDIDATE: The heading of this petition and the declaration of candidacy must be fully completed before the petition is circulated for signatures.~~

~~_____ WE, THE UNDERSIGNED registered voters of _____ Conservation District in _____ County(ies), South Dakota, nominate _____ of _____ County, State of South Dakota, whose mailing address is _____, _____, SD _____, as a candidate for the office of Conservation District Supervisor, Urban Area, for "a four" "the remaining two years of a four" (cross out incorrect option) year term, within the _____ Conservation District at the general election to be held on November _____, _____.~~

DECLARATION OF CANDIDATE

~~I, _____ (print name here exactly as you want it on the election ballot), under oath, declare that I reside in _____ County, that I am a resident of an urban area, and that I am eligible to seek the office for which I am a candidate. If nominated and elected, I will qualify and serve as Conservation District Supervisor.~~

~~_____ (Signed) _____~~

~~Sworn to before me this _____ day of _____, _____.~~

~~(Seal) _____
Signature of Officer Administering Oath~~

~~_____ Title of Officer Administering Oath~~

~~My commission expires _____.~~

~~The balance of this petition form is prescribed in § 5:02:08:00.03. Repealed.~~

Source: 20 SDR 4, effective July 19, 1993; 27 SDR 146, effective July 9, 2001.

General Authority: SDCL 12-1-9(7).

Law Implemented: SDCL 38-8-39.

(18) Repeal: 5:02:08:38. Form of petition for rural landowner or occupier conservation district supervisor -- Nonpartisan election. ~~The nominating petition for rural landowner or occupier conservation district supervisor must be in the following form:~~

~~**NONPOLITICAL CONSERVATION DISTRICT PETITION
RURAL LANDOWNER OR OCCUPIER CONSERVATION DISTRICT SUPERVISOR**~~

~~INSTRUCTIONS TO CANDIDATE: The heading of this petition and the declaration of candidacy must be fully completed before the petition is circulated for signatures.~~

~~WE, THE UNDERSIGNED registered voters of _____ Conservation District in _____ County(ies), South Dakota, nominate _____ of _____ County, State of South Dakota, whose mailing address is _____, _____, SD _____, as a candidate for the office of Conservation District Supervisor, Rural Landowner or Occupier, for "a four" "the remaining two years of a four" (cross out incorrect option) year term, within the _____ Conservation District at the general election to be held on November _____, _____.~~

~~DECLARATION OF CANDIDATE~~

~~I, _____ (print name here exactly as you want it on the election ballot), under oath, declare that I reside in _____ County, that I am a rural landowner or occupier, and that I am eligible to seek the office for which I am a candidate. If nominated and elected, I will qualify and serve as Conservation District Supervisor.~~

~~_____ (Signed) _____~~

~~Sworn to before me this _____ day of _____, _____.~~

~~(Seal) _____
Signature of Officer Administering Oath~~

~~_____ Title of Officer Administering Oath~~

~~My commission expires _____.~~

~~The balance of this petition form is prescribed in § 5:02:08:00.03. Repealed.~~

Source: 20 SDR 4, effective July 19, 1993; 27 SDR 146, effective July 9, 2001.

General Authority: SDCL 12-1-9(7).
Law Implemented: SDCL 38-8-39.

CHAPTER 5:02:10

ABSENTEE VOTING

(19) 5:02:10:01. Application for absentee ballot. The application for an absentee ballot must be in the following form:



South Dakota Absentee Ballot Application Form
 _____ County

| | | | |
|--|---|---|--|
| Please print and return to your county auditor. A new application must be completed each calendar year. | | | |
| You may apply for an absentee ballot before 5:00 p.m. the day before the election for any or all general, primary, municipal, school, or any other elections conducted in this calendar year with one request. Additional information on absentee voting is available at sdsos.gov. | | | |
| 1 | Last Name | First Name | Middle Name(s)/Initial Suffix |
| 2 | Voter Registration Address | Apt. or Lot # | City, State Zip Code |
| 3 | Absentee ballot mailing address (if different from Section #2) | | City, State Zip Code |
| SELECT THE ELECTION(S) YOU ARE REQUESTING AN ABSENTEE BALLOT FOR: <u>if your address changes after this is submitted, you must submit a new form</u> | | | |
| 4 | <input type="checkbox"/> All <input type="checkbox"/> General <input type="checkbox"/> Primary <input type="checkbox"/> Municipal <input type="checkbox"/> School <input type="checkbox"/> Any Other If you are registered as an independent and are requesting a Primary Election ballot, you may have a choice of the following: <input type="checkbox"/> Democratic <input type="checkbox"/> Non-Political | | |
| 5 | Daytime telephone number | <u>If request is for a municipal or school election:</u> I have lived in that jurisdiction at least 30 days in the last year. <input type="checkbox"/> YES <input type="checkbox"/> NO I am a full-time student who resided in that jurisdiction prior to leaving. <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| MILITARY AND OVERSEAS CITIZENS ONLY: | | | |
| 6 | Are you in the Military or Uniformed Services, a spouse or dependent of the same or an Overseas Citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO If you checked yes, complete this section. <u>If you checked no, proceed to section #7.</u> If you want your ballot sent electronically instead of first class mail, provide your e-mail address below: <input type="checkbox"/> YES <input type="checkbox"/> NO - I am a member of the Uniformed Services or Merchant Marine on active duty <input type="checkbox"/> YES <input type="checkbox"/> NO - I am an eligible spouse or dependent of a member of the Uniformed Services or Merchant Marine on active duty <input type="checkbox"/> YES <input type="checkbox"/> NO - I am a U.S. citizen residing outside the United States If you checked yes to any of the above questions, complete this section (#6). <u>If you checked no for all questions, proceed to section #7.</u> If you would like your ballot sent electronically (for Primary and General Elections ONLY) instead of first class mail, provide your e-mail address: <u>E-mail address:</u> *A Stateside military voter is required to submit a photocopy of their ID or have this application notarized. *The notarization of this application may be administered by any commissioned officer in the United States military. *An overseas military and overseas citizen voter is not required to submit a photocopy of the voter's ID. *Any military and overseas voter may submit a signed application for absentee ballot by fax or e-mail. | | |
| 7 | An acceptable ID is: A South Dakota driver's license or non-driver ID card, a passport or other picture ID issued by the United States government, a tribal photo ID, or a current student photo ID issued by a South Dakota high school or postsecondary education institution. <input type="checkbox"/> Copy of photo identification is attached OR <input type="checkbox"/> I hereby verify that I am the person named above and these statements made by me on this application are true and correct. Sworn to me before this _____ day of _____, 20____. | | <div style="border: 1px solid black; width: 100%; height: 40px; margin-bottom: 5px;"></div> Voter's Signature (required) |

| | | | |
|--|--|---------------|---|
| | (Seal) | | |
| | Notary Signature _____ My commission expires _____ | | Voter's Date of Signing (required): ____/____/____ Month / Day / Year |
| AUTHORIZED MESSENGER REQUEST DUE TO SICKNESS OR DISABILITY ONLY: The deadline to request is 3:00 p.m. on Election Day | | | |
| | As a registered voter, I authorize... | | |
| | Last Name | First Name | Daytime telephone |
| | Address | Apt. or Lot # | City, State Zip Code |
| 8 | ...to serve as my authorized messenger to pick up my absentee ballot. I further certify under penalty of law that I am confined because of sickness or disability and for this reason alone am unable to vote at my polling place on Election Day. <div style="border: 1px solid black; width: 100%; height: 30px; margin-top: 10px;"></div> <p style="text-align: center;">Voter's Signature</p> | | As the authorized messenger, I acknowledge receipt of the ballot for the above named voter on...Date: _____ Time: _____ Are you serving as an authorized messenger for any other voter? <input type="checkbox"/> YES <input type="checkbox"/> NO <div style="border: 1px solid black; width: 100%; height: 30px; margin-top: 10px;"></div> <p style="text-align: center;">Authorized Messenger's Signature</p> |

Source: 2 SDR 46, effective December 30, 1975; 6 SDR 25, effective September 24, 1979; 8 SDR 24, effective September 16, 1981; 10 SDR 27, effective September 26, 1983; 16 SDR 20, effective August 10, 1989; 16 SDR 203, effective May 28, 1990; 19 SDR 12, effective August 5, 1992; 21 SDR 77, effective October 24, 1994; 23 SDR 115, effective January 22, 1997; 23 SDR 236, effective July 17, 1997; 25 SDR 8, effective August 3, 1998; 25 SDR 167, effective July 6, 1999; 29 SDR 177, effective July 2, 2003; 32 SDR 109, effective December 26, 2005; 32 SDR 225, effective July 3, 2006; 36 SDR 112, effective January 11, 2010; 36 SDR 209, effective June 30, 2010; 40 SDR 40, effective September 9, 2013.

General Authority: SDCL 12-1-9(4), 12-19-2.

Law Implemented: SDCL 9-13-4.1, 12-18-6.1, 12-19-2, 12-19-2.1, 12-19-2.2, 13-7-4.2.

~~(20) 5:02:10:08. Envelopes for use with voting service and overseas ballots. Prior to January 1, 2011, the envelope for sending ballots to voter may follow the specifications provided in this section that were in effect on May 7, 2009.~~

The envelopes used in connection with voting service and overseas ballots must be printed in black ink and must meet the following federal guidelines:

BALLOT TRANSMISSION ENVELOPE

- Max
- Height 6 1/8 inches
- Length 11 1/2 inches
- Min
- Height 3 1/2 inches
- Length 5 1/2 inches
- Use Black Ink

NAME AND COMPLETE ADDRESS _____

OFFICIAL ELECTION MAIL
Authorized by the U.S. Postal Service

US POSTAGE PAID
 39 USC 3406
PAR AVION

OFFICIAL ABSENTEE BALLOTING MATERIAL - FIRST-CLASS MAIL

NO POSTAGE NECESSARY IN THE U.S. MAIL - DMM 703.8.0

TO: _____

BALLOT RETURN ENVELOPE

If mailed in non U.S. Postal System -- Voter must pay postage

- Max
- Height 6 1/8 inches
- Length 11 1/2 inches
- Min
- Height 3 1/2 inches
- Length 5 1/2 inches
- Use Black Ink

NAME AND COMPLETE ADDRESS _____

OFFICIAL ELECTION MAIL
Authorized by the U.S. Postal Service

US POSTAGE PAID
 39 USC 3406
PAR AVION

OFFICIAL ABSENTEE BALLOTING MATERIAL - FIRST-CLASS MAIL

NO POSTAGE NECESSARY IN THE U.S. MAIL - DMM 703.8.0

TO: _____

The ballot return envelope must be a white security envelope or heavy manila envelope. The following must be printed on the reverse of the return envelope to the county auditor:

I, _____, under penalty of impersonating a registered voter (five years imprisonment and \$10,000 fine), state that I am a registered voter; ~~that my voting residence is~~ _____, and that I have voted the enclosed ballot.

Signature of Voter

Source: 5 SDR 31, effective November 1, 1978; 6 SDR 25, effective September 24, 1979; transferred from § 5:02:05:18, 12 SDR 43, effective September 23, 1985; 14 SDR 19, effective August 9, 1987; 16 SDR 20, effective August 10, 1989; 20 SDR 4, effective July 19, 1993; 21 SDR 77, effective October 24, 1994; 25 SDR 8, effective August 3, 1998; 28 SDR 99, effective January 17, 2002; 29 SDR 177, effective July 2, 2003; 33 SDR 230, effective July 1, 2007; 35 SDR 306, effective July 1, 2009.

General Authority: SDCL 12-1-9(8).

Law Implemented: SDCL 12-19-3, 12-19-4, 12-19-5, 12-26-7, and 22-6-1.