State Board of Finance  
Meeting Agenda

Tuesday, August 18, 2020
2:00 p.m.

A) Call to order
B) Approve monthly meeting agenda
C) Approve minutes from the meeting on July 21, 2020
D) State Transfers
   • Department of Public Safety
     o Jordan Melius
E) Professional Recruitment
   • Department of Corrections
     o Mike L. Richling
     o Helen Peralta
   • Department of Game, Fish, and Parks
     o Katie Schlafke
   • Bureau of Information and Telecommunications
     o Megan Feighery
   • South Dakota School of Mines & Technology
     o Gillian K. Urycki
   • South Dakota State University
     o Kelly Froehlich
     o Christina M. Larson
     o Chun-Ming (Jimmy) Lin
   • University of South Dakota
     o Haroon Rashid Lone
     o Isaiah Fink Avraham Cohen
     o Jennifer Phelan
     o Joseph Kantenbacher
     o Anthony Harris
F) State Hosting Reimbursement Request – SDCL 3-9-2.1
   • Department of Tourism
     o Hosted Master of Ceremonies for the Mount Rushmore fireworks celebration held on July 3, 2020.
     o Hosted journalists for road trip vacation story on July 29, 2020.
   • Governor’s Office of Economic Development
     o Hosted regional roundtable for economic developers and partners on July 14, 2020 in Pierre.
G) Home Station Per Diem Reimbursement Request – SDCL 3-9-2.2
   • Animal Industry Board
     o Annual Board meeting held on July 14, 2020 in Fort Pierre.
   • South Dakota School of Mines and Technology

NOTE: This meeting is being held in a physically accessible place. Individuals needing assistance, Pursuant to the Americans with Disabilities Act, should contact the Secretary of State’s Office at (605) 773.3537 in advance of the meeting to make any necessary arrangements.
o 410 Field Geology Course held July 14-28, 2020 in Rapid City, SD.

H) Public Comment

I) Adjournment
Household Moving Allowance
State of South Dakota

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
500 E Capitol Ave
Pierre SD 57501 Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 4:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application

Jordan Melius
Name of Applicant
$51,511
Yearly Salary
Pierre, SD
City, State Moving From
6666
Bureau of Human Resources Class Code
Trooper
New Position Title
Watertown, SD
New Post of Duty (City)
11/2016
Employment Date with the State

DPS
Agency Employed By
08/2020
Expected Month/Year of Move

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses.

Signature of Applicant
Date

Authorization

☑️ The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent’s knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct.

Director of Admin. Services
Position/Title of Authorized Agent

Dept. of Public Safety
Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State Board of Finance on

Date
Signature of Secretary, State Board of Finance

Note: When completed, retain one copy in employee personnel file and attach original to voucher to be sent to Auditor’s Office.
August 28, 2019

Jordan Melius
1640 Abbey Rd
Pierre SD 57501

Dear Jordan,

This letter is official notification that your transfer from governor security detail has been approved. Along with this reassignment is the adjustment in your classification and wage. You will no longer be in the Headquarters Specialist position which is an L04 classification and returning to the trooper classification which is a L03. This change will adjust your hourly rate from $25.17 to $24.67 per hour effective July 23rd, 2020.

Your transfer to Watertown is approved as of July 23rd, 2020. Please coordinate your move and official duty assignment with Captain Erickson.

Jordan, your dedication and hard work have been as asset to this agency. I look forward to your future with the SD Highway Patrol!

Sincerely,

Z.M.
Colonel Rick Miller
SD Highway Patrol
SD Department of Public Safety

RM:cl

CC: Alex Wester, BHR
    Captain Randi Erickson
    Personnel File

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JORDAN -
THANK YOU
FOR BEING
AWESOME!!

RICK MILLER
Household Moving Allowance
State of South Dakota

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500 E Capitol Ave
Pierre SD 57501 Phone: 605-773-3537

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Application

Mike L. Richling
Name of Applicant

$36,497.36 Billings, Mt.
Yearly Salary

060336 Bureau of Human Resources Class Code

 Correctional Officer
New Position Title
Springfield
City, State Moving From
New Post of Duty (City)

DOC/MDSP
Agency Employed By
July 2020 Expected Month/Year of Move

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses.

I understand that household moving allowance is considered taxable income according to IRS regulations, and I am responsible for all applicable payroll taxes. I know I may contact my agency's finance officer for options.

Signature of Applicant

07/23/2020 Date

Authorization

☐ The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent's knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct.

Mike Leidholt
Name of Authorized Agent

Signature of Authorized Agent

8-6-20 Date

Secretary of Corrections
Position/Title of Authorized Agent

SD DEPT OF CORRECTIONS
Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State
Board of Finance on

Date

Signature of Secretary, State Board of Finance
July 17, 2020

Michael Richling
4944 Hazelnut Ave
Billings MT 59106

Dear Michael:

This letter will serve as a written follow up to our verbal offer of employment as a Correctional Officer position with the Mike Durfee State Prison at an hourly rate of $17.47. The Department of Corrections will allow you reimbursement of moving expenses you accrue up to one month of your salary. In order for the expenses to be reimbursed you must submit the Household Moving Allowance Application, this offer letter and any receipts of payment for moving. The effective date of this offer will be Monday July 27, 2020. Please report to the Mike Durfee State Prison at 8:00am on Monday July 27, 2020.

Casual dress attire is preferred.

This offer is contingent upon negative drug screening results. Please make an appointment with my office (605-369-4427) to schedule a date and time prior to starting to have the drug screening completed.

Also, please be aware that you will be serving a six-month probationary period. During this time period your performance will be reviewed periodically to determine if you will be recommended for status in the South Dakota Career Service system. Also, please note that your health insurance coverage will not begin until one month and one day after your start date (indicated above).

We look forward to having you on our staff. We hope your employment with the Mike Durfee State Prison will be rewarding experience. If there are any questions, please contact the Human Resource Office at 605-369-4427.

Sincerely,

Mary Ann Kloucek
Human Resource Specialist
Mike Durfee State Prison
Household Moving Allowance
State of South Dakota

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
500 E Capitol Ave
Pierre SD 57501 Phone: 605-773-3537

Please check one:
☐ State Transfer (SDCL 3-9-9)
   Full-time continuous employment for 6 months.
☒ Professional Recruitment (SDCL 3-9-12)
   Attach a written copy of the offer of employment and of payment of moving expenses.

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application

Helen Peralta
Name of Applicant

36,372.96 Phoenix, Arizona
Yearly Salary City, State Moving From

060336
Bureau of Human Resources Class Code

Correctional Officer Department of Corrections
New Position Title Agency Employed By

06/2020
New Post of Duty (City) Expected Month/Year of Move

06/24/2020
Employment Date with the State

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses.

I understand that household moving allowance is considered taxable income according to IRS regulations, and I am responsible for all applicable payroll taxes. I know I may contact my agency’s finance officer for options.

Signature of Applicant 07/29/2020

Date

Authorization

☐ The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent’s knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct.

Mike Leidholt
Name of Authorized Agent

7/29/2020
Signature of Authorized Agent Date

Secretary of Corrections
Position/Title of Authorized Agent

SD DEPT OF CORRECTIONS
Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State Board of Finance on

Signature of Secretary, State Board of Finance

Household Moving Allowance 201901015
June 15, 2020

Helen Peralta
5322 W Edgemont Ave
Phoenix AZ 85035

Dear Helen:

Welcome to the Department of Corrections!!! This letter will serve as a written follow up to our verbal offer of employment as a Correctional Officer position with the South Dakota Women's Prison at an hourly rate of $17.48. The effective date will be Wednesday June 24, 2020. Please report to the South Dakota Women's Prison at 8:00am.

The Department of Corrections will allow you reimbursement of moving expenses you accrue up to one month of your salary. In order for the expenses to be reimbursed you must submit the Household Moving Allowance Application, this offer letter and any receipts of payment for moving.

Casual dress attire is preferred.

This offer is contingent upon negative drug screening results.

Also, please be aware that you will be serving a six-month probationary period. During this time period your performance will be reviewed periodically to determine if you will be recommended for status in the South Dakota Career Service system. You will not be eligible to use your accrued vacation leave during this six-month period. Also, please note that your health insurance coverage will not begin until one month and one day after your start date (indicated above).

We look forward to having you on our staff. We hope your employment with South Dakota Women's Prison will be rewarding experience. If there are any questions, please contact the Human Resource Office at 605-369-4427.

Sincerely,

Mary Ann Kloucek
Human Resource Specialist
SD Women’s Prison
Mike Durfee State Prison
Department of Corrections

An Equal Opportunity Employer
Household Moving Allowance
State of South Dakota

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
500 E Capitol Ave
Pierre SD 57501 Phone: 605-773-3537

Please check one:
☐ State Transfer (SDCL 3-9-9)
   Full-time continuous employment for 6 months.
☐ Professional Recruitment (SDCL 3-9-12)
   Attach a written copy of the offer of employment and of payment of moving expenses.

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application

Katie Schafke
Name of Applicant
$37,563
Yearly Salary
Bismarck, ND
City, State Moving From
070240
Bureau of Human Resources Class Code

Volunteer Coordinator-Naturalist
New Position Title
Rapid City, SD
City, State Moving To
04/24/2020
New Post of Duty (City)

South Dakota Game, Fish and Parks
Agency Employed By
04/2020
Expected Month/Year of Move

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses.

I understand that household moving allowance is considered taxable income according to IRS regulations, and I am responsible for all applicable payroll taxes. I know I may contact my agency’s finance officer for options.

Katie Schafke
Signature of Applicant
06/17/2020
Date

Authorization

☐ The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent’s knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct.

Kelly R. Hepler
Name of Authorized Agent
05/10/2020
Signature of Authorized Agent

Cabinet Secretary
Position/Title of Authorized Agent
GFP
Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State Board of Finance on

Date

Signature of Secretary, State Board of Finance

Household Moving Allowance 20191015
March 11, 2020

Katie Schlaeke
2120 Xavier Street Apt. 304,
Bismark, ND 58501

Dear Katie,

While I have received your verbal acceptance of the Volunteer Coordinator/Naturalist, Outdoor Campus position serving in Rapid City, SD, this letter will serve as your official confirmation of your appointment to the position. The effective date of your appointment to this position will be April 24th, 2020.

I will serve as your direct supervisor. This position is classified on the general pay structure as "H". This is an hourly position and your starting wage will be 5% higher than the minimum at $17.99/hr.

Because you have been recruited as professional staff, I also want to advise you that the Department will request payment of actual expenses associated with your move from North Dakota to Rapid City, SD up to a maximum of one month's salary. I have pasted a link below to the Household Moving Allowance Form that I would ask you to complete and return to me as soon as possible. This will allow us to have the paperwork in place and get you reimbursed in a timely manner.

https://intrane@gp.sd.gov/finance/docs/household-moving-allowance.pdf

If you have any questions, please don't hesitate to contact me at the information below. I look forward to working with you and I am confident that your knowledge, skills and abilities will be a great asset to the SD Game, Fish and Parks.

Sincerely,

Lacy Elrod
Outdoor Campus-Rapid City Director
(605) 394.6072
lacy.elrod@state.sd.us
personal cell (830) 391.2456

Cc: John Kanta, Regional Supervisor-Region 1
    Jeff Wilson, Human Resources Manager—BHR
    Amanda Servis-Human Resources—BHR
    Rachel Comes, Executive Secretary

Katieschlaeke
Household Moving Allowance  
State of South Dakota

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
500 E Capitol Ave
Pierre SD 57501
Phone: 605-773-3537

Please check one:
☐ State Transfer (SDCL 3-9-9)
☒ Full-time continuous employment for 6 months.
☒ Professional Recruitment (SDCL 3-9-12)
☐ Attach a written copy of the offer of employment and of payment of moving expenses.

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State by the first day of the month following the date of the request. Requests received after the first day of the month will be effective next month. All documentation must be submitted together with the request. If the request is denied, the employee must return all documentation. The employee is subject to the State’s policy of recording non-conviction, irrevocable information.

Application

Megan Feighery  
Name of Applicant

$37,062.00  
Yearly Salary

Laramie, WY  
City, State Moving From

Bureau of Human Resources Class Code

Name of New Agency

BIT/PBS  
New Position Title

Vermillion, SD  
New Post of Duty (City)

Agency Employed By

8/20  
Expected Month/Year of Move

8/17/20  
Employment Date with the State

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses.

Megan Feighery  
Signature of Applicant

07/30/2020  
Date

Authorization

☒ The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent’s knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct.

Jeffrey Clines  
Name of Authorized Agent

Commissioner  
Position/Title of Authorized Agent

Bureau of Info & Telecom  
Agency of Authorized Agent

08/03/2020  
Signature of Authorized Agent Date

Approval by State Board of Finance

Approved by the State Board of Finance on 

Date  
Signature of Secretary, State Board of Finance

Note: When completed, retain one copy in employee personnel file and attach original to voucher to be sent to Auditor's Office.
July 8, 2020

Megan Feighery
1854 Truman St
Laramie WY 82070
Email: meganfeighery@gmail.com

Dear Megan,

This letter is to confirm your appointment to the Public Broadcast Media Specialist I position with the Bureau of Information and Telecommunications, South Dakota Public Broadcasting, in Vermillion, SD. Your employment will begin on August 17, 2020, at an hourly salary of $17.75. Your immediate supervisor, Cara Hetland, will contact you regarding your schedule on your first day of employment.

As discussed, the Bureau of Information & Telecommunications will pay up to one month’s salary, approximately $3,088.50, for actual moving expenses based on the rules established by the Board of Finance. Receipts are required and expenses must be eligible expenses. Attached, please find the guidelines for household moving allowances and the moving expense form. Please sign the Household Moving Allowance form and return it to me as soon as possible.

Prior to your first day of work, we invite you to take the time to complete the on-line orientation process. If you decide to forego the on-line process prior to beginning work, you will be asked to complete the same process on your first day of work.

Please go to the following link to complete the new employee forms:
https://onlinenorientation.sd.gov/new.aspx

You can log into the system using the below ID and password:

Password
This is a secure system that is user name & password protected. You can save the information that you enter as you go through the process. If you need to come back to complete the process at a later date or time, you may do so. You will need to disable the pop-up blocker on your computer in order to access the material.

On your first day of work, you will be required to provide two forms of identification to establish both identity and authorization to work in the United States. Bring your social security card and driver’s license. Direct deposit is mandatory and you are asked to provide a voided check blank or your bank routing and account numbers.

Welcome to South Dakota Public Broadcasting. Please contact Cara or myself if you need assistance.

Sincerely,

Eric Hildebrandt
Human Resource Manager
Household Moving Allowance
State of South Dakota

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State Board of Finance
Office of Secretary of State
500 E Capitol Ave
Pierre SD 57501  Phone: 605-773-3537

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Application

Gillian K. Urycki
Name of Applicant

$31,000.00  Metamora, IL
Yearly Salary  City, State Moving From
00511
Bureau of Human Resources Class Code

New Position Title
Rapid City
New Post of Duty (City)
August 17, 2020
Employment Date with the State

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses.

I understand that household moving allowance is considered taxable income according to IRS regulations, and I am responsible for all applicable payroll taxes. I know I may contact my agency’s finance officer for options.


7/30/2020  12:49:18 PM MDT
Signature of Applicant

Authorization

The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent’s knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct.

James M. Rankin
Name of Authorized Agent

Signature of Authorized Agent

President
Position/Title of Authorized Agent
SD School of Mines & Technology
Agency of Authorized Agent

Approved by State Board of Finance on

Date
Signature of Secretary, State Board of Finance
DATE: July 30, 2020

TO: Gillian K. Urycki

FROM: James M. Rankin, President
South Dakota School of Mines and Technology

RE: Appointment with Intercollegiate Athletics
South Dakota School of Mines & Technology

I am pleased to offer you an appointment as Assistant Cross Country and Track & Field Coach/Intramural Coordinator in Intercollegiate Athletics, position ME9749. The effective date of this appointment is August 17, 2020. Annual appointment dates are June 22 through June 21. Your yearly salary is $31,000. This is a 12-month position working at a 100% level of effort for the pay periods July 22 to May 21. This position will be at 50% effort for the pay periods May 22 to July 21. Steven Johnson, Director of Cross Country/Track and Field, is your direct supervisor. As with all employees, you will be evaluated annually.

In addition to your base rate, the approximate value of the benefit package you receive is an additional $15,342 or 49%. The benefit package includes employer contributions for health, life, worker’s compensation, unemployment and PEPL insurance, and matching contributions for social security and retirement. Full-time employees earn 120 hours of vacation time each year (15 days). This vacation allowance is accrued at the rate of 10 hours per month based on a full month of service. According to policy, no vacation leave may be used until you have completed six months of employment. You may accumulate up to a total of 240 hours of vacation time. Once this maximum accumulation is reached, accrual of vacation leave ceases until such time as you make use of part or all of the accumulated time. Full-time employees accrue sick leave at the rate of 9.34 hours per month based on a full month of service. There is no maximum accumulation of sick leave.

The administrative employment offered herein shall be at the pleasure of the Board and may be terminated without notice or cause. The administrative appointment shall commence on August 17, 2020, and shall not extend beyond June 21, 2021. The administrative employment may be renewed at the sole pleasure of the Board. If the Board elects to renew an administrative appointment, it may do so under whatever changed or additional terms and conditions it chooses.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

This notice acknowledges the employee has reviewed the conduct requirements for athletic personnel in NCAA Bylaw 10 and 11 and agrees to comply with NCAA bylaws. An athletic staff member who is found in violation of NCAA regulations shall be subject to disciplinary or corrective action as set forth in the provisions of the NCAA enforcement procedures in NCAA Bylaw 19 including suspension without pay or termination of employment for significant or repetitive violations. All BOR policies/contracts will be adhered in the event this action is taken.

Your supervisor will review your position description with you when you begin your employment. A written performance and planning review document will be completed by you and your supervisor annually by June 15th.
Gillian Urycki
July 30, 2020
Page Two

The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of South Dakota School of Mines & Technology. Withholding statement (W-4) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees. Please see the enclosed memo regarding the date and time we will meet to complete the necessary new employee paperwork. The memo also includes additional information regarding items you will need to bring to this meeting. You will also find a General Information form to complete and return with this offer memo.

According to current state regulations (SDCL 3-9-12) concerning moving expenses, we are authorized to reimburse you for the cost of moving your household goods up to one month’s salary. However, due to budgetary constraints, we are authorized to reimburse you up to $1,000 for your moving costs. We are bound by current state regulations concerning moving expenses. No specific allowance is provided for crating and packing, per se. If you should elect to perform the move using U-Haul or similar rental facilities, you can be reimbursed for expenses up to a maximum of one month’s salary (original receipts and gas receipts required). Information on moving expense reimbursement and allowable household moving expenses is included for your information. Per Diem expenses (meals, lodging (original receipts required), mileage, airfare (boarding pass and itinerary required) are reimbursable. Please sign where indicated and return with this offer memo.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below. Please return this letter, the Agreement to Assign Intellectual Property, the Household Moving Allowance form, and the completed General Information form, retaining a copy for your records.

I accept the job offer outlined above.

Signed by: [Signature]
Gillian Urycki
7/30/2020 | 12:49:18 PM MDT

signature of Appointee & Date Signed

JR:nlf

Encl: Intellectual Property Agreement
General Information Form
Household Moving Allowance form and information
Information needed to complete payroll paperwork

cc: C Cox
S Johnson
J Luken
Household Moving Allowance  
State of South Dakota

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance  
Office of Secretary of State  
500 E Capitol Ave  
Pierre SD 57501  
Phone: 605-773-3537

Please check one:  
[ ] State Transfer (SDCL 3-9-9)  
Full-time continuous employment for 6 months.  
[ ] Professional Recruitment (SDCL 3-9-12)  
Attach a written copy of the offer of employment and of payment of moving expenses.

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application

Kelly Froehlich  
Name of Applicant

$76,000  
Yearly Salary

Grassston, MN  
City, State Moving From

08080  
Bureau of Human Resources Class Code

Assistant Professor  
New Position Title

SDSU  
Agency Employed By

Brookings  
New Post of Duty (City)

August 2020  
Expected Month/Year of Move

August 2020  
Employment Date with the State

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I understand that household moving allowance is considered taxable income according to IRS regulations, and I am responsible for all applicable payroll taxes. I know I may contact my agency’s finance officer for options.

Signature of Applicant  
Date

Authorization

[ ] The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent’s knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct.

Joseph P. Cassady  
Name of Authorized Agent

Signature of Authorized Agent  
Date

Head, Animal Science Department  
Position/Title of Authorized Agent

SDSU  
Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State Board of Finance on  
Date  
Signature of Secretary, State Board of Finance
MEMORANDUM

DATE: June 15, 2020

TO: Kelly Froehlich

FROM: Joseph P. Cassady, Ph.D., Professor and Head, Animal Science Department
South Dakota State University

RE: Appointment with the Animal Science Department

Dear Ms. Froehlich:

On behalf of the South Dakota State University, I am very pleased to offer you, subject to approval by the President, an appointment as Assistant Professor/Extension Specialist Small Ruminant Production of the Animal Science Department in the College of Agriculture, Food and Environmental Sciences. This is a nine-month, 100% time tenure-track position. This appointment and rank is also contingent on support and approval of the College Tenure and Promotion Committee, University Tenure and Promotion Committee, the South Dakota Board of Regents’ Chief Academic Officer, and the South Dakota Board of Regents. The effective date of this appointment will be August 24, 2020. Annual appointment dates are June 22 to June 21. I am your direct supervisor. As with all employees, you will be evaluated annually. This offer is contingent upon completion of the terminal degree. If you have completed and documented completion of the PhD by August 1 you will be appointed to a tenure-track position as Assistant Professor of Animal Science at a salary of $76,000. If you have not completed the PhD degree as of August 15, you will be appointed as a term faculty position at the rank of Lecturer at a salary of $65,683.

This position has been identified as exempt from the Fair Labor Standards Act (FLSA) and is therefore not subject to overtime.

This offer is contingent on verifying credentials and other information required by law and/or university policies, including but not limited to a criminal background check, as well as your delivery to Human Resources of an official transcript for your highest degree within 30 days of accepting this position. Withholding statements (W-4’s) and United States employment eligibility verification documents (I-9) are available from the Payroll Office. Your portion of these forms must be completed on or before your first day of employment. The Board of Regents requires direct deposit of payroll checks for all employees.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of South Dakota State University. The terms of appointment include a continuing nondisclosure obligation relating to personally identifiable information, access codes, and proprietary information made accessible to you in the course of your employment with the university that survives this appointment.

In accordance with Board of Regents Policy 4:34, the Board manages employee-created intellectual property. The provisions of this policy are enclosed. Also enclosed is a Conflict of Interest Form that must be completed pursuant to Board of Regents Policy 4:35. Please review the policies and forms, sign the forms where provided, and return the forms fully executed with this offer memo.
As Assistant Professor, your position is eligible for state benefits to include household moving allowance of up to one month salary as outlined in SDCL 3-9-12. A Household Moving Allowance form and instructions have been enclosed.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing and dating below and returning this memo, Expectations of Employment Document, a signed copy of the enclosed Agreement to Assign Intellectual Property, and a signed copy of the Conflict of Interest Form to my attention no later than June 19, retaining a copy of these documents for your records.

Cc: Human Resources
    Provost and Vice President of Academic Affairs

I accept the job offer outlined above.

[Signature of Appointee]  [6/19/20]

Encl: Expectations of employment document
      Intellectual property policy and intellectual property form
      Conflict of interest policy and form
      Household moving allowance form
Household Moving Allowance
State of South Dakota

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
500 E Capitol Ave
Pierre SD 57501  Phone: 605-773-3537

PLEASE NOTE: The Request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT on the Thursday prior to the Board of Finance meeting. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application

CHRISTINA M LARSON
Name of Applicant
76000
Minneapolis MN
Yearly Salary
City State Moving From

Bureau of Human Resources Class Code

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses.

The IRS regulation for reporting moving expenses for employee states, "Employer reimbursement of an employee's moving expenses constitutes fringe benefits excludable from the employee's gross income if (1) the amounts would be deductible by the employee if they had directly paid or incurred these expenses, (2) the employee did not deduct the expenses in a prior year, and (3) if the move is 50 miles or more from the employee's former residence.

I certify that I have met the above listed criteria. I understand the reimbursement by the State of South Dakota for payment of the eligible moving expense will not be reported as taxable income to the IRS. While this reimbursement will not be reported as taxable income, I am responsible for the proper reporting of any tax liability of this reimbursement.

CHRISTINA M LARSON
signature of applicant

7/24/2020 | 12:38 CDT
Date

Authorization

[ ] The undersigned agent hereby certifies that the above agency ordered the applicant to move as indicated and that the move will be for the benefit of the State of South Dakota. The Agent further declares that to the best of my knowledge and belief the request and authorization for reimbursement of actual household moving expenses are true and correct.

Jane Hennings

DEPARTMENT HEAD
Position Title of Authorized Agent

7/24/2020 | 14:42 CDT
2d Agent Date

Approval by State Board of Finance

Approved by the State Board of Finance on

Date

Signature of Secretary, State Board of Finance

Note: When completed, retain one copy in employee personnel file and attach original to voucher to be sent to Auditor's Office.
DATE: July 23, 2020
TO: Dr. Christina Larson
FROM: Jane Christopher-Hennings, DVM, MS
Head, Department of Veterinary & Biomedical Science /Director, ADRDL
South Dakota State University
RE: Appointment with the Department of Veterinary & Biomedical Science
South Dakota State University

On behalf of the South Dakota State University, I am very pleased to offer you, subject to approval by the President, an appointment as Temporary Assistant Professor of the Department of Veterinary & Biomedical Science in the College of Agriculture, Food, & Environmental Sciences. This is a 9-month, 100%-time tenure-track position. This appointment and rank are contingent on support and approval of the College Tenure & Promotion Committee, University Tenure & Promotion Committee, the South Dakota Board of Regents' Chief Academic Officer, and the South Dakota Board of Regents. The effective date of this appointment is 08/03/2020. Annual appointment dates are August 22nd to May 21st. Dr. Jane Christopher-Hennings will be your direct supervisor. As with all employees, you will be evaluated annually.

You total annual salary is $76,000 based on 9-months of work at 100% time.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

This offer is contingent on verifying credentials and other information required by law and/or university policies, including but not limited to a criminal background check, as well as your delivery to Human Resources of an official transcript for your highest degree within 30 days of accepting this position. Withholding statements (W-4’s) and United States employment eligibility verification documents (I-9) are available from the Payroll Office.

Your portion of these forms must be completed on or before your first day of employment. The Board of Regents requires direct deposit of payroll checks for all employees.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of South Dakota State University. The terms of appointment include a continuing nondisclosure obligation relating to personally identifiable information, access codes, and proprietary information made accessible to you in the course of your employment with the university that survives this appointment.

Rev. 04/13/2020
In accordance with Board of Regents Policy 4:34, the Board manages employee-created intellectual property. The provisions of this policy are enclosed. Also enclosed is a Conflict of Interest form that must be completed pursuant to Board of Regents Policy 4:35. Please review the policies and forms, sign the forms where provided and return the forms fully executed with this offer memo.

As an Assistant Professor, your position is eligible for state benefits to include household moving allowance of up to 1-month salary as outlined in SDCL 3-9-12. A Household Moving Allowance form and instructions have been enclosed.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing and dating below and returning this memo. Expectations of Employment Document, a signed copy of the enclosed Agreement to Assign Intellectual Property, and a signed copy of the Conflict of Interest Form to my attention no later than 07/29/2020, retaining a copy for your records.

Sincerely,

Jane Christopher-Hennings

7/24/2020 | 16:06 CDT

Date

I accept the job offer outlined above.

CHRISTINA M LARSON

7/25/2020 | 10:57 CDT

Signature of Appointee

Date

cc: Supervisor, Dr. Jane Christopher-Hennings
    Human Resources
    Provost and Vice President of Academic Affairs, Dr. Dennis Hedge

Encl: Expectations of Employment Document
    Intellectual Property Policy & Intellectual Property Form
    Conflict of Interest Policy and Form
    Household Moving Allowance Form & Instructions
DATE:        July 23, 2020  
TO:          Dr. Christina Larson  
FROM:        Jane Christopher-Hennings, DVM, MS  
             Head, Department of Veterinary & Biomedical Science /Director, ADRDL  
             South Dakota State University  
RE:          Appointment with the Department of Veterinary & Biomedical Science  
             South Dakota State University

On behalf of the South Dakota State University, I am very pleased to offer you, subject to approval by the President, an appointment as Assistant Professor of the Department of Veterinary & Biomedical Science in the College of Agriculture, Food, & Environmental Sciences. This is a 9-month, 100%-time tenure-track position. This appointment and rank are contingent on support and approval of the College Tenure & Promotion Committee, University Tenure & Promotion Committee, the South Dakota Board of Regents' Chief Academic Officer, and the South Dakota Board of Regents. The effective date of this appointment is 08/22/2020. Annual appointment dates are August 22nd to May 21st. Dr. Jane Christopher-Hennings will be your direct supervisor. As with all employees, you will be evaluated annually.

You total annual salary is $76,000 based on 9-months of work at 100% time.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

This offer is contingent on verifying credentials and other information required by law and/or university policies, including but not limited to a criminal background check, as well as your delivery to Human Resources of an official transcript for your highest degree within 30 days of accepting this position. Withholding statements (W-4's) and United States employment eligibility verification documents (I-9) are available from the Payroll Office.

Your portion of these forms must be completed on or before your first day of employment. The Board of Regents requires direct deposit of payroll checks for all employees.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of South Dakota State University. The terms of appointment include a continuing nondisclosure obligation relating to personally identifiable information, access codes, and proprietary information made accessible to you in the course of your employment with the university that survives this appointment.

Rev. 04/13/2020
In accordance with Board of Regents Policy 4:34, the Board manages employee-created intellectual property. The provisions of this policy are enclosed. Also enclosed is a Conflict of Interest form that must be completed pursuant to Board of Regents Policy 4:35. Please review the policies and forms, sign the forms where provided and return the forms fully executed with this offer memo.

As an Assistant Professor, your position is eligible for state benefits to include household moving allowance of up to 1-month salary as outlined in SDCL 3-9-12. A Household Moving Allowance form and instructions have been enclosed.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing and dating below and returning this memo. Expectations of Employment Document, a signed copy of the enclosed Agreement to Assign Intellectual Property, and a signed copy of the Conflict of Interest Form to my attention no later than 07/29/2020, retaining a copy for your records.

Sincerely,

[Signature]
Jane Christopher-Hennings

I accept the job offer outlined above.

[Signature]
CHRISTINA M LARSON

cc: Supervisor, Dr. Jane Christopher-Hennings
Human Resources
Provost and Vice President of Academic Affairs, Dr. Dennis Hedge

Encl: Expectations of Employment Document
Intellectual Property Policy & Intellectual Property Form
Conflict of Interest Policy and Form
Household Moving Allowance Form & Instructions
Household Moving Allowance
State of South Dakota

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
500 E Capitol Ave
Pierre SD 57501
Phone: 605-773-3537

PLEASE NOTE: The Request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT on the Thursday prior to the Board of Finance meeting. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application

CHUN-MING (JIMMY) LIN
Name of Applicant

S103,863
Yearly Salary

GRAFTON, MA
City, State Moving From

BROOKINGS, SD
New Post of Duty (City)

07/22/2020
Expected Month Year of Move

PATHOLOGIST
New Position Title

VET SCIENCE
Agency Employed By

Bureau of Human Resources Class Code

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses.

The IRS regulation for reporting moving expenses for employee states, "Employer reimbursement of an employee's moving expenses constitutes fringe benefits excludable from the employee's gross income if (1) the amounts would be deductible by the employee if they had directly paid or incurred these expenses, (2) the employee did not deduct the expenses in a prior year, and (3) if the move is 50 miles or more from the employee's former residence.

I certify that I have met the above listed criteria. I understand the reimbursement by the State of South Dakota for payment of the eligible moving expense will not be reported as taxable income to the IRS. While this reimbursement will not be reported as taxable income, I acknowledge that ultimately I am responsible for the proper reporting of any tax liability of this reimbursement.

5/13/2020 | 15:59 PDT

Date

Authorization

☐ The undersigned agent hereby certifies that the above agency ordered the applicant to move as indicated and that the move will be for the benefit of the State of South Dakota. The Agent further declares that to the best of my knowledge and belief the request and authorization for reimbursement of actual household moving expenses are true and correct.

Jane Hennings
Authorized Agent

5/14/2020 | 09:08 CDT

Date

DEPARTMENT HEAD

DEPARTMENT OF VETERINARY & BIOMEDICAL SCIENCE

Agency of Authorized Agent

Approval by State Board of Finance

Approved by the
State Board of
Finance on

Date

Signature of Secretary, State Board of Finance

Note: When completed, retain one copy in employee personnel file and attach original to voucher to be sent to Auditor's Office.
DATE: May 12, 2020
TO: Dr. Chun-Ming Lin
FROM: Jane Christopher-Hennings, DVM, MS
Head, Department of Veterinary & Biomedical Science / Director, ADRDL
South Dakota State University
RE: Appointment with the Department of Veterinary & Biomedical Science
South Dakota State University

On behalf of the South Dakota State University, I am very pleased to offer you, subject to approval by the President, an appointment as Assistant Professor of the Department of Veterinary & Biomedical Science in the College of Agriculture, Food, & Environmental Sciences. This is a 12-month, 100%-time tenure-track position. This appointment and rank is also contingent on support and approval of the College Tenure & Promotion Committee, University Tenure & Promotion Committee, the South Dakota Board of Regents' Chief Academic Officer, and the South Dakota Board of Regents. The effective date of this appointment is 07/22/2020. Annual appointment dates are June 22nd to June 21st. Dr. Jane Christopher-Hennings will be your direct supervisor. As with all employees, you will be evaluated annually.

You total annual salary is $103,863 based on 12-months of work at 100% time. This salary is comprised of a faculty salary of $103,863 based on the 12-month faculty rate.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

This offer is contingent on verifying credentials and other information required by law and/or university policies, including but not limited to a criminal background check, as well as your delivery to Human Resources of an official transcript for your highest degree within 30 days of accepting this position. Withholding statements (W-4's) and United States employment eligibility verification documents (I-9) are available from the Payroll Office.

Your portion of these forms must be completed on or before your first day of employment. The Board of Regents requires direct deposit of payroll checks for all employees.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of South Dakota State University. The terms of appointment include a continuing nondisclosure obligation relating to personally identifiable information, access codes, and proprietary information made accessible to you in the course of your employment with the university that survives this appointment.

Rev. 04/13/2020
In accordance with Board of Regents Policy 4.34, the Board manages employee-created intellectual property. The provisions of this policy are enclosed. Also enclosed is a Conflict of Interest form that must be completed pursuant to Board of Regents Policy 4.35. Please review the policies and forms, sign the forms where provided and return the forms fully executed with this offer memo.

As an Assistant Professor, your position is eligible for state benefits to include household moving allowance of up to 1-month salary as outlined in SDCL 3-9-12. A Household Moving Allowance form and instructions have been enclosed.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing and dating below and returning this memo. Expectations of Employment Document, a signed copy of the enclosed Agreement to Assign Intellectual Property, and a signed copy of the Conflict of Interest Form to my attention no later than June 22, 2020, retaining a copy for your records.

Sincerely,

Jane Christopher-Hennings

I accept the job offer outlined above.

Chun-Ming Lin

cc: Supervisor, Dr. Jane Christopher-Hennings  
Human Resources  
Provost and Vice President of Academic Affairs, Dr. Dennis Hedge

Encl: Expectations of Employment Document  
Intellectual Property Policy & Intellectual Property Form  
Conflict of Interest Policy and Form  
Household Moving Allowance Form & Instructions
Household Moving Allowance
State of South Dakota

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
500 S Capitol Ave
Pierre, SD 57501
Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received at the Office of the Secretary of State no later than 5:00 p.m., CT, eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application

HAROON RASHID LONE
Name of Applicant

$15,000
Yearly Salary

Charlottesville, VA
City, State Moving From

New Post of Duty (City)

July 1, 2020
Expected Month/Year of Move

00,000
Bureau of Human Resources Class Code

New Position Title

Agency Employed By

May 1, 2020
Employment Date with the State

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses.

I understand that household moving allowance is considered taxable income according to IRS regulations, and I am responsible for all applicable payroll taxes. I know I may contact my agency's finance officer for options.

Signature of Applicant

[Signature]

[Date]

Authorization

[Signature of Authorized Individual]

[Title]

University of South Dakota

[Department/Division]

[Date]
MEMORANDUM

DATE: July 17, 2020

TO: Haroon R. Lone

FROM: Michael Kruger, Dean, College of Arts & Sciences

RE: Appointment with the Department of Computer Science

I am pleased to offer you, subject to approval by the Board of Regents, an appointment as Visiting Assistant Professor in the Department of Computer Science. The effective date of this appointment is August 22nd, 2020. Annual appointment dates are August 22nd through May 21st. Your salary is $75,000, based on nine months at 100% time. Dr. KC Santosh is your direct supervisor. As with all employees, you will be evaluated annually. This offer is contingent on the favorable results of a background check.

Your work reporting date is August 17, 2020. Your work release date is May 14, 2021. In the event the University has to modify the method of course delivery and/or adjust the academic calendar for fall semester due to the COVID-19 pandemic, the University reserves the right to modify the reporting dates of this appointment. If such modification is necessary, the University will provide notice at least 30 days prior to the current report date or new report date, whichever is earlier, and additional compensation and/or contract working days will be added to total compensation at the same salary rate as set forth in the current appointment. Reporting dates for international employees are dependent on work authorization.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties, also enclosed is a conflict of interest form, please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of University of South Dakota. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees.

In addition, with the final provision of the Immigration Act of 1990, Public Law No. 101-649, effective October 1, 1991, Section 214.2 (h) (6) (vi) (E), the Department of Computer Science will comply with the directives of the law until the end of your authorized employment under the J1 status.
This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime. As Visiting Assistant Professor, your position is eligible for state benefits. The University of South Dakota will provide up to $2500 in moving expenses. Reimbursed moving expenses are considered taxable income. Guidelines on allowable expenses may be found http://legis.state.sd.us/rules/DisplayRule.aspx?Rule=05:01:07&Type=Rule.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below and returning this letter, the attached personal data sheet, and a signed copy of the enclosed agreement to assign Intellectual Property and Conflict of Interest Form no later than July 20, 2020, retaining a copy for your records. Send the signed documents to:

Katherine Price  
Office of the Dean/College of Arts & Sciences  
The University of South Dakota  
414 E. Clark St.  
Vermillion, SD 57069  
Katherine.Price@usd.edu

cc:  
KC Santosh, Chair, Department of Computer Science  
Nathan Gottio, HR Generalist, Office of Human Resources

I accept the job offer outlined above.

Haroon R. Lone  July 20, 2020  
Signature of Appointee & Date Signed

Encl:  
Intellectual Property Policy  
Intellectual Property Form  
Conflict of Interest Form  
Employee Personal Data Sheet
Household Moving Allowance
State of South Dakota

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
500 E Capitol Ave
Pierre, SD 57501
Phone: 605-773-3537

Please check one:
☐ State Transfer (SDCL 3-9-9)
☐ Professional Recruitment (SDCL 3-9-12)
☐ Full-time continuous employment for 6 months.
Attach a written copy of the offer of employment and payment of moving expenses.

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application

Isaiah Fink Avraham Cohen
Name of Applicant
$51,000 Bath Rouge, LA
Yearly Salary City, State Moving From
8000
Bureau of Human Resources Class Code

Visiting Assistant Professor
New Position Title
Vermillion, SD
City, State Moving From
8/22/2020
Employment Date with the State

University of South Dakota
Agency Employed By
July/August 2020
Expected Month/Year of Move

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses.

I understand that household moving allowance is considered taxable income according to IRS regulations, and I am responsible for all applicable payroll taxes. I know I may contact my agency’s finance officer for options.

Signature of Applicant
8/10/2020
Date

Authorization

☐ The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency required the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The agent further states that, to the best of the agent’s knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct.

Emery Wasley
Name of Authorized Agent
8/10/20
Signature of Authorized Agent
Date

Assistant Vice President, HR
Position/Title of Authorized Agent
University of South Dakota
Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State Board of Finance on
Date
Signature of Secretary, State Board of Finance

Household Moving Allowance 20191015
DATE: July 17, 2020

TO: Isaiah Cohen

FROM: Michael Kruger, Dean, College of Arts & Sciences

RE: Appointment with the Department of Anthropology & Sociology

I am pleased to offer you, subject to approval by the Board of Regents, an appointment as Visiting Assistant Professor in the Department of Anthropology & Sociology. The effective date of this appointment is August 22nd, 2020. Annual appointment dates are August 22nd through May 21st. Your salary is $51,000, based on nine months at 100% time. Dr. Karen Koster is your direct supervisor. As with all employees, you will be evaluated annually. This offer is contingent on the favorable results of a background check.

Your work reporting date is August 17, 2020. Your work release date is May 14, 2021. In the event the University has to modify the method of course delivery and/or adjust the academic calendar for fall semester due to the COVID-19 pandemic, the University reserves the right to modify the reporting dates of this appointment. If such modification is necessary, the University will provide notice at least 30 days prior to the current report date or new report date, whichever is earlier, and additional compensation and/or contract working days will be added to total compensation at the same salary rate as set forth in the current appointment. Reporting dates for international employees are dependent on work authorization.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties, also enclosed is a conflict of interest form, please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of University of South Dakota. Withholding statements (W-4’s) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime. As Visiting Assistant Professor, your position is eligible for state benefits. The University of South Dakota will provide up to $2500 in moving expenses. Reimbursed moving expenses are considered taxable income. Guidelines on allowable expenses may be found at:
If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below and returning this letter, the attached personal data sheet, and a signed copy of the enclosed agreement to assign Intellectual Property and Conflict of Interest Form no later than July 20, 2020, retaining a copy for your records. Send the signed documents to:

Katherine Price  
Office of the Dean/College of Arts & Sciences  
The University of South Dakota  
414 E. Clark. St.  
Vermillion, SD 57069  
Katherine.Price@usd.edu

cc: Karen Koster, Chair, Department of Anthropology & Sociology  
Nathan GOTTO, HR Generalist, Office of Human Resources

I accept the job offer outlined above.

[Signature of Appointee & Date Signed]  
7/17/2020

Encl: Intellectual Property Policy  
Intellectual Property Form  
Conflict of Interest Form  
Employee Personal Data Sheet
Household Moving Allowance
State of South Dakota

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
500 E Capitol Ave
Pierre SD 57501 Phone: 605-773-3537

Please check one:
☐ State Transfer (SDCL 3-9-9)
Full-time continuous employment for 6 months.
☒ Professional Recruitment (SDCL 3-9-12)
Attach a written copy of the offer of employment and of payment of moving expenses.

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application

JENNIFER PHelan
Name of Applicant

77,770.80
Yearly Salary

MORRIS, IL
City, State Moving From

040803
Bureau of Human Resources Class Code

Assistant Clinical Professor
New Position Title

VERMILLION, SD
City, State Moving to

June 2020
New Post of Duty (City)

June 22, 2020
Expected Month/Year of Move

Employment Date with the State

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses.

I understand that household moving allowance is considered taxable income according to IRS regulations, and I am responsible for all applicable payroll taxes. I know I may contact my agency's finance officer for options.

Signature of Applicant

7/15/2020
Date

Authorization

☒ The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent's knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct.

Emery Wasley
Name of Authorized Agent

2/10/20
Date

Assistant Vice President, HR
Position/Title of Authorized Agent

University of South Dakota
Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State Board of Finance on

Date

Signature of Secretary, State Board of Finance
MEMORANDUM

DATE: February 26, 2020

TO: Jen Phelan

FROM: Michael Kruger, Dean, College of Arts & Sciences

RE: Appointment with the Department of Communication Sciences & Disorders

I am pleased to offer you, subject to approval by the Board of Regents, an appointment as Assistant Clinical Professor in the Department of Communication Sciences & Disorders. The effective date of this appointment is June 22, 2020. Annual appointment dates are June 22nd through June 21st. Your salary is $77,770.80 based on 12 months at 100% time. Jessica Messersmith is your direct supervisor. As with all employees, you will be evaluated annually. This offer is contingent on the favorable results of a background check.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties form, also enclosed is a conflict of interest form. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of the University of South Dakota. Withholding statements (W-4’s) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. The Board of Regents requires direct deposit of payroll checks for all employees.

As an Assistant Clinical Professor, your position is eligible for state benefits. Your position is eligible for state benefits to include household moving allowance of up to one-month salary as outlined in SDCL 3-9-12. The University of South Dakota will provide up to $2,500 in moving expenses. Reimbursed moving expenses are considered taxable income. Once paid, Payroll will be contacting you regarding any options available to you with regards to the deduction.
If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below and returning this letter and a signed copy of the enclosed agreement to assign Intellectual Property and Conflict of Interest Form no later than March 4, 2020, retaining a copy for your records. Please email the signed scanned documents, followed by paper copies, to:

Katherine Price, Program Assistant  
Office of the Dean  
University of South Dakota  
414 E. Clark Street  
Vermillion, SD 57069  
Katherine.Price@usd.edu

Encs:  Intellectual Property Policy  
Intellectual Property Form  
Conflict of Interest Form  
Employee Personal Data Sheet

cc:  Jessica Messersmith, Chair, Department of Communication Sciences & Disorders  
Nathan Gotto, Human Resources Representative

I accept the job offer outlined above.

[Signature]

Jennifer Phelan  
2/26/2020  
Signature of Appointee  
Date
Household Moving Allowance
State of South Dakota

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
500 E Capitol Ave
Pierre SD 57501
Phone: 605-773-3537

Please check one:
☐ State Transfer (SDCL 3-9-9)
Full-time continuous employment for 6 months.
☒ Professional Recruitment (SDCL 3-9-12)
Attach a written copy of the offer of employment and of payment of moving expenses.

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT, eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application

Joseph Kantbenbacher
Name of Applicant

$68,500
Yearly Salary

Bloomington, Indiana
City, State Moving From

00800
Bureau of Human Resources Class Code

Assistant Professor
New Position Title

Vermillion, SD
New Post of Duty (City)

July 22, 2020
Employment Date with the State

USD
Agency Employed By

07/2020
Expected Month/Year of Move

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses.

I understand that household moving allowance is considered taxable income according to IRS regulations, and I am responsible for all applicable payroll taxes. I know I may contact my agency’s finance officer for options.

Signature of Applicant

Date

July 22, 2020

Authorization

☐ The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent's knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct.

Emery Wasley
Name of Authorized Agent

8/10/20
Signature of Authorized Agent Date

Assistant Vice President, HR
Position/Title of Authorized Agent

University of South Dakota
Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State Board of Finance on

Date

Signature of Secretary, State Board of Finance
MEMORANDUM

DATE: January 24, 2020

TO: Joe Kantenbacher

FROM: Michael Kruger, Dean, College of Arts & Sciences

RE: Appointment with the Department of Sustainability & Environment

I am pleased to offer you, subject to approval by the Board of Regents, an appointment as Assistant Professor in the Department of Sustainability & Environment. The effective date of this appointment is July 22, 2020. Annual appointment dates for this contract year are July 22nd through May 21st. The annual appointment dates for any subsequent years will be August 22 through May 21st. Your salary is $68,500 based on nine months at 100% time. You will be paid from July 22nd, 2020 through August 21st, 2020 at the same annualized rate as your nine-month salary. Meghann Jarchow is your direct supervisor. As with all employees, you will be evaluated annually. This offer is contingent on the favorable results of a background check.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties form, also enclosed is a conflict of interest form. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of the University of South Dakota. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. The Board of Regents requires direct deposit of payroll checks for all employees.
As an Assistant Professor, your position is eligible for state benefits. Your position is eligible for state benefits to include household moving allowance of up to one-month salary as outlined in SDCL 3-9-12. The University of South Dakota will provide up to $3,000 in moving expenses. Reimbursed moving expenses are considered taxable income. Once paid, Payroll will be contacting you regarding any options available to you with regards to the deduction.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below and returning this letter and a signed copy of the enclosed agreement to assign Intellectual Property and Conflict of Interest Form no later than January 31, 2020, retaining a copy for your records. Please email the signed scanned documents, followed by paper copies, to:

Katherine Price, Program Assistant  
Office of the Dean  
University of South Dakota  
414 E. Clark Street  
Vermillion, SD 57069  
Katherine.Price@usd.edu

Encs: Intellectual Property Policy  
Intellectual Property Form  
Conflict of Interest Form  
Employee Personal Data Sheet

cc: Meghann Jarchow, Chair, Department of Sustainability & Environment  
Nathan Gotto, Human Resources Representative

I accept the job offer outlined above.

Signature of Appointee

1/29/2020  
Date
# Household Moving Allowance
## State of South Dakota

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance  
Office of Secretary of State  
500 E Capitol Ave  
Pierre SD 57501  
Phone: 605-773-3537

Please check one:
- [ ] State Transfer (SDCL 3-9-9)  
  Full-time continuous employment for 6 months.
- [ ] Professional Recruitment (SDCL 3-9-12)  
  Attach a written copy of the offer of employment and of payment of moving expenses.

**PLEASE NOTE:** The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. GT eight days prior to the Board of Finance meeting on the third Thursday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

### Application

<table>
<thead>
<tr>
<th>Name of Applicant</th>
<th>42,500</th>
<th>Yearly Salary</th>
<th>Bureau of Human Resources Class Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anthony Harris</td>
<td>Fayetteville, AR</td>
<td>20511</td>
<td>00511</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Applicant</th>
<th>New Position Title</th>
<th>New Post of Duty (City)</th>
<th>Employment Date with the State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assoc Head Coach</td>
<td>Vermillion, SD</td>
<td>08/03/2020</td>
<td>USD Athletics</td>
</tr>
<tr>
<td></td>
<td>Aug 2020</td>
<td></td>
<td>Agency Employed By</td>
</tr>
</tbody>
</table>

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses.

I understand that household moving allowance is considered taxable income according to IRS regulations, and I am responsible for all applicable payroll taxes. I know I may contact my agency's finance officer for options.

Signature of Applicant:  
8/3/2020  

### Authorization

- The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent's knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct.

<table>
<thead>
<tr>
<th>Name of Authorized Agent</th>
<th>8/10/20</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emery Wasley</td>
<td></td>
</tr>
</tbody>
</table>

Signature of Authorized Agent:  
8/10/20  

### Approval by State Board of Finance

Approved by the State Board of Finance on  
Signature of Secretary, State Board of Finance:  

---

Household Moving Allowance 2019/015
MEMORANDUM

DATE: July 21, 2020

TO: Anthony Harris

FROM: David Herbster, Athletic Director, University of South Dakota

RE: Appointment with Intercollegiate Athletics, University of South Dakota

I am pleased to offer you, subject to approval by the Board of Regents, a non-faculty exempt appointment as the Associate Head Coach, Swimming & Diving. The effective date of this appointment is August 3, 2020. Your annual salary is $42,500.00 based on 12 months at 100% time. As with all employees, you will be evaluated annually. This offer is contingent on the favorable results of a background check.

The administrative appointment shall commence on August 3, 2020 and shall not extend beyond June 21, 2020. Annual fiscal year appointment dates are June 22 through June 21. The administrative employment may be renewed at the sole pleasure of the Board. If the Board elects to renew an administrative appointment, it may do so under whatever changed or additional terms and conditions it chooses. The administrative employment offered herein shall be at the pleasure of the Board and may be terminated without notice or cause.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

The University, in accordance with annual salary policy approved by the state legislature, the Board of Regents compensation policies, your performance, and institutional priorities, will determine any future annual pay increases. Payroll dates begin on the 22nd of the month through the 21st with payroll on the last day of the month. Eligible leave will be accrued in accordance with your appointment and all employees are required to request leave through the payroll system to ensure leave is recorded accurately. Benefits are administered through the State of South Dakota and are provided to any employee that is in a regular position that is employed at 50% or greater time.

Your position is eligible for state benefits to include household moving allowance as outlined in SDCL 3-9-12. The University of South Dakota will provide up to $3,500.00 in moving expenses. Reimbursed moving expenses are considered taxable income.

The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. Please review the attached policy, sign where indicated and return with this offer memo, retaining a copy for your records. A conflict of interest form will also be required to be signed and will be sent separately.
The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of University of South Dakota. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (1-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees.

Currently all orientation sessions for new employees are being held on-line. You will be notified by email the session you are to attend.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by electronically signing this offer, and the accompanying documents, by July 30, 2020.

Sincerely,

David Herbst
Athletic Director

cc: Human Resources

I accept the job offer outlined above.

Signature of Appointee

Date Signed

7/21/2020
State Hosting Reimbursement Request – SDCL 3-9-2.1

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance - Office of Secretary of State
Capitol Building - 500 E Capitol Ave - Pierre, SD 57501
Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. on Monday, December 23, 2020. Documentation received after this date will be returned. Documentation MUST comply with Bureau of Human Resources policies regarding protection of personal identifiable information.

Application

Date: 7/24/20
Agency Address: 711 East Wells Ave, Pierre, SD 57501
Agency Phone Number: 605-773-3301
Employee Requesting Reimbursement: James Hagen
Total Amount of Reimbursement: $68.76
Date(s) of Hosting Expense: 7/1/20
Receipts Attached: Y

Explanation of official business performed: Hosting Mary Hart and family. Mary was Master of Ceremonies for Mount Rushmore Fireworks celebration 7/3/20

I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were incurred while hosting a prospect for business development, trade, or a tourism promotional activity. I certify that the expenses were incurred through necessary duties of my employment with the State of South Dakota and in the furtherance of state’s interests, concerns, and activities and are supported by the attached receipts. I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Signature of Employee: James Hagen
Date: 7/27/20

Authorization

I hereby certify that the above employee was authorized to incur the claimed expenses while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee’s claims were in the furtherance of state interests relating to hosting a prospect for business development, trade, or a tourism promotional activity.

Name of Department/Office Head: Tony Veerkamp
Position/Title of Agency Official: Chief of Staff
Date: 7/28/20

State Board of Finance Approval

Approval Date: ____________________________
Signature of Secretary, State Board of Finance

Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor’s Office.
Mount Rushmore Concessions  
13000 Hwy 244, Bldg 81  
Keystone, SD 57751  

25184 Deborah  

-----------------------------  
CHK 2866  
7/2/2020 4:44 PM  

<table>
<thead>
<tr>
<th>Item</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Smart Water</td>
<td>3.00</td>
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<tr>
<td>1 Smart Water</td>
<td>3.00</td>
</tr>
<tr>
<td>1 Smart Water</td>
<td>3.00</td>
</tr>
<tr>
<td>Cash</td>
<td>$20.00</td>
</tr>
<tr>
<td>Cash</td>
<td>-$11.00</td>
</tr>
<tr>
<td>NA Beverage</td>
<td>$9.00</td>
</tr>
<tr>
<td>Payment</td>
<td>$9.00</td>
</tr>
</tbody>
</table>

Change Due $11.00  

----------------- Check Closed ----------------  
7/2/2020 4:44 PM  

Thank you for visiting Mt Rushmore! Please take a few minutes to tell us about your experience by visiting: www.mtrushmoresurvey.com to take a short survey.
Holiday Stationstores
Shop the difference!

Store # 449
1846 Eglit Str
Rapid City, SD 57701
605-342-8005

7/2/2020 9:48:53 AM

***** REPRINT *****

Register: 2
Trans Seq #: 343610
Store: # 449 Brenda
ARCTIC GLACIER SBT 6LB $2.19
WORKS WASH $11.00

Car Wash Code: 50863
Code good for 30 days after purchase
If code has expired,
see cashier for a new code

Code must be used at store of purchase

2 PERRIER SPRK/WATER 16.9 $2.98
3 COKE 200Z $6.27
Car Wash w/Gas DIS $1.00
ALL 200Z SODA 3 FOR $1.77

Sub. Total: $19.67
Tax: $1.28
Total: $20.95
Discount Total: -$2.77

American Express: $20.95
Change $0.00

Sale

American Express
Card Num: XXXXXXXXXXXXX1004
Chip Read 02 02 05
Terminal: J046449615001
Approval: 876171
Sequence: 048668

USD$ 20.95

AMERICAN EXPRESS
Mode: Issuer
AID: A000000025010801
TVR: 0000008000
IAD: 068010360A006
TSI: F800
ARC: 00
TC: 5E07C2B54CF5E28

Thank You
Please Come Again Soon
Visit us at
www.holidaystationstores.com

RASSID CITY - 605-341-6520
07/01/2020 10:34 AM  EXPIRES 09/29/20

ENTERTAINMENT-ELECTRONICS
276030558 $15 SB #1935739333
#1935739333
ACTIVATION SUCCESSFUL
275030558 $15 SB N #1982723608
#1982723608
ACTIVATION SUCCESSFUL

GROCERY
071081799 PLANTERS FT $6.29
071201954 CLIF FILL FT $5.19
094083900 ORGAN FT $8.99
211080447 GT'S FT $3.19
211110140 CALBEE FT $1.99
266084240 BULK PRODUCE FT $3.99
267500005 2LB ORGANIC FT $1.39
271400710 FIJI FT $5.00 2 @ $2.50 ea

SUBTOTAL $66.03
T = SD TAX 6.5000% on $36.03 $2.34
TOTAL $68.37
*1004 AMEX CHARGE $68.37
AID: A000000025010801
AMERICAN EXPRESS

INDICATES SAVINGS

REC#2-0183-2457-0076-4685-8 VCD#757-253-349

Help make your Target Run better.
Take a 2 minute survey about today's trip:

informedtarget.com
User ID: 7981 6754 3992
Password: 353 142

CUENTENOS EN ESPANOL
Please take this survey within 7 days.

9.25
30.00
39.25
Chubby-Chipmunk
Hotel Alex Johnson

Merchant ID :
Terminal ID : 17
Check No : 0013
Table No : C
Server : C013 DIANE
AGEN/JAMES D
Acct Num : XXXXXXXXXXXX1004
Expiry Date : **/**
Card Type : AMEX
Trans Type : Purchase
Trans Date : 7/1/2020
Trans Time : 11:00 AM
Entry Mode : Chip
Auth Code : E25742
Response Code : 00
Node: Issuer
AID : 600000025010801
ACI : 00
TV : 000008000
TSI : F800
IAQ : CEB80103604006
TOTAL : LSC: $ 20.51
OO : Approved - Thank You 000

Signature
I agree to pay total amount as per the Card Issuer Agreement.
Duplicate Copy

Chubby Chipmunk
4013 D HUBER
Chk 9013 Jul01'20 10:59A Gst 0

Chubby Chip
FR:07/01/20 10:59:58
1 Truffle (5 Pack) 15.99
1 Truffle 3.09
ATG25742 XXX1004
AMEX 20.51

Food Total 12.08
Tax Total 1.43
Payment Made 23.51
Final Amt Due 1.43

Wine & Spirits
PB RED ASS RHUBARB 17.99 x

Tax Rate Taxable Amount Tax Amount
Tax3 7.5% 17.99 1.35 $1.35

Total Tax: 19.34

Cash CHANGE
$20.60
$0.66

WIN A $500 HY-VEE GIFT CARD!
Please visit www.Hy-VeeSurvey.com
and key in the 16-digit code below
to take a brief survey and enter for
your chance to win a $500 Hy-Vee
gift card.

# 0630163120320013

No purchase necessary to enter
sweepstakes. See website for official
sweepstakes rules.

Total number of items sold = 1
Cashier:0415 Name:Kurtis G.
Store:1631 POS:032 Transaction:0013
Jun 30 2020 12:24 PM

Thank You for
Shopping Your
Empire Hy-Vee!
State Hosting Reimbursement Request – SDCL 3-9-2.1

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance - Office of Secretary of State
Capitol Building - 500 E Capitol Ave - Pierre, SD 57501
Phone: 605-773-3537

Application

Date: 7/29/20
Agency: Tourism
Agency Address: 711 E W blaze Ave, Pierre, SD 57501
Agency Phone Number: 605-713-3301
Employee Requesting Reimbursement: Katlin Richter
Total Amount of Reimbursement: $83.19
Date(s) of Hosting Expense: 7/29/20
Receipts Attached: Y
Explanation of official business performed: Heard journalists in Pierre on their way through their road trip vacation story they are working on.

I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were incurred while hosting a prospect for business development, trade, or a tourism promotional activity. I certify that the expenses were incurred through necessary duties of my employment with the State of South Dakota and in the furtherance of state’s interests, concerns, and activities and are supported by the attached receipts. I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Signature of Employee

Date 7/29/20

Authorization

I hereby certify that the above employee was authorized to incur the claimed expenses while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee’s claims were in the furtherance of state interests relating to hosting a prospect for business development, trade, or a tourism promotional activity.

Name of Department/Office Head

Signature of Department/Office Head

Date 7/29/60

Department Secretary

Signature of Secretary, State Board of Finance

Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor's Office.
<table>
<thead>
<tr>
<th>Item</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Water</td>
<td>0.00</td>
</tr>
<tr>
<td>Diet Coke</td>
<td>1.95</td>
</tr>
<tr>
<td>Arnie</td>
<td>1.95</td>
</tr>
<tr>
<td>Chislac</td>
<td>8.95</td>
</tr>
</tbody>
</table>

**As Appetizer**

<table>
<thead>
<tr>
<th>Item</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chislac Ranch</td>
<td>8.95</td>
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</tbody>
</table>

**Main Course**

<table>
<thead>
<tr>
<th>Item</th>
<th>Price</th>
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</thead>
<tbody>
<tr>
<td>Wings FUL Ranch</td>
<td>11.95</td>
</tr>
</tbody>
</table>

**Side Dishes**

<table>
<thead>
<tr>
<th>Item</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
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<td>7.50</td>
</tr>
<tr>
<td>Fresh Fries</td>
<td>1.95</td>
</tr>
<tr>
<td>Buffalo Salad</td>
<td>9.95</td>
</tr>
<tr>
<td>No Choice</td>
<td></td>
</tr>
<tr>
<td>Turkey Wrap</td>
<td>9.50</td>
</tr>
<tr>
<td>Tater Tots</td>
<td>2.25</td>
</tr>
</tbody>
</table>

**Keys:** 1811202562

**Total:**

- **Subtotal:** $55.85
- **Tax:** $4.65
- **Service Charge:** $12.60
- **Payment:** $83.19

**Payment Amount:** $70.50

**Tip:** $12.69

**Payment Total:** $83.19

**Transaction #:** 5

**Card No.:** *Redacted*

**Reference:** 1811202562
Home Station Per Diem Reimbursement Request – SDCL 3-9-2.2

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance - Office of Secretary of State
Capitol Building - 500 E Capitol Ave - Pierre, SD 57501
Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application

Date: 07/14/2020
Agency: Animal Industry Board
Agency Address: 411 S Fort St, Pierre
Agency Phone Number: (605) 773-3321
Employee Requesting Reimbursement: Drifters Event Center
Total Amount of Reimbursement: $257.83 (19 meals at $13.57 each)
Date(s) of Expense: 07/14/2020
Event Leave Time: 8:30 am
Event Return Time: 2:30 pm
Explanation of official business performed: Annual AIB Board Meeting
Meeting location Drifters Event Center, Ft Pierre - State employees home stationed in Pierre are: Oedekoven, Miller, Reenders, Anderson, Tedrow
Johnson, ODaniel, Wenzel

I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were incurred while conducting state business at my headquarters station or place of residence. I certify that the event extended entirely through a meal time without interruption and included a meal provision for which I was billed. I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Signature of Employee 07/30/2020

Authorization

I hereby certify that the above employee was authorized to incur the claimed expenses at their headquarters station or place of residence while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee’s participation in the event was in the furtherance of state interests.

Dustin Oedekoven, DVM
Name of Department/Office Head

State Veterinarian
Position/Title of Agency Official

Signature of Department/Office Head 07/30/2020

State Board of Finance Approval

Approval Date: ____________________________
Signature of Secretary, State Board of Finance

Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor’s Office.
### Drifters Bar and Grille
325 Hustan Ave
Fort Pierre, SD
605.220.5014

### SD Animal Industry Board

<table>
<thead>
<tr>
<th>QUANTITY</th>
<th>DETAILS</th>
<th>UNIT PRICE</th>
<th>LINE TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td>Plated Lunch</td>
<td>13.57</td>
<td>257.83</td>
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<tr>
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<td>Food and Beverage Tax</td>
<td>7.50%</td>
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<tr>
<td></td>
<td>Other Tax</td>
<td>6.50%</td>
<td>exempt</td>
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<td></td>
<td>Total</td>
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<td>257.83</td>
</tr>
</tbody>
</table>

**Final Balance** $257.83

### MEETING DETAILS

### OTHER INFORMATION
- Event Date: 7/14/20
- Event Time: 8:00AM
- Event Room: Hull
- Guest Count: 20
SOUTH DAKOTA ANIMAL INDUSTRY BOARD
ANNUAL MEETING
TUESDAY JULY 14, 2020

Updated Tentative Agenda

8:30 AM Approval of Agenda

Approval of the Minutes of December 16, 2019 Board Meeting

Disease Updates

➢ Covid-19 Related Supply Chain Disruption
➢ Vesicular Stomatitis
➢ Rabbit Hemorrhagic Fever
➢ Bovine Tuberculosis

Animal Health and Other Updates

➢ Avian Health
➢ Livestock Neglect Complaints
➢ ADRDL Expansion Update
➢ Animal Identification and Traceability
➢ Meat Inspection
➢ Livestock Auction Market Updates
➢ Aquatic Animal Health
➢ Secure Food Supply Plans

10:00 AM Hearing: Tri-County Locker License

Annual Report Review / Approval

Board Business

➢ WY Brucellosis Import Test Requirements
➢ Board and Staff Travel Authorization
➢ Reportable Disease List
➢ Joint Powers Agreement with Veterinary Medical Exam Board

Board Election of Officers

Executive Session

Public Comments

Adjourn

Note: Scheduled times are CDT and estimates only. Agenda items may be delayed due to prior scheduled items or may be moved up on the agenda. Breaks and recess will be at the discretion of the president.
<table>
<thead>
<tr>
<th>First and Last Name</th>
<th>Address</th>
<th>Representing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alex Helm</td>
<td>Wood, SD</td>
<td>Heim Land &amp; Bison, DTBA</td>
</tr>
<tr>
<td>Larry Rhoden</td>
<td>Union Center, SD</td>
<td>SDU</td>
</tr>
<tr>
<td>Lorrin Naasz</td>
<td>Pierre, SD</td>
<td>SDDA</td>
</tr>
<tr>
<td>John Vreeland</td>
<td>Piedmont, S.D.</td>
<td>SDVMA</td>
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<tr>
<td>Dani Hambell</td>
<td>Pierre, SD</td>
<td>SD Farm Bureau, V</td>
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<td>Janice Hallstrom</td>
<td>Clark, SD</td>
<td>AIB</td>
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<tr>
<td>Shale Kramer</td>
<td>Fort Pierre, SD</td>
<td>Attorney General's Office</td>
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<tr>
<td>Chelsea Gilbertson</td>
<td>Vermillion, SD</td>
<td>ATG's Office - Intern</td>
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<tr>
<td>Samantha Merrill</td>
<td>Pierre, SD</td>
<td>Gunderson, Palmer, Nelson &amp; Ashmore - Intern</td>
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<td>Randy Boeseem</td>
<td>Newell, SD</td>
<td>Tri County Locker</td>
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<td>Stacy Hesse</td>
<td>Pierre, SD</td>
<td>Gunderson Palmer, Law Firm Tri County Locker</td>
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<tr>
<td>Nick Thompson</td>
<td>Vermillion, SD</td>
<td>AG Office - Intern</td>
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<tr>
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<tr>
<td>Susan Reinders</td>
<td>Pierre</td>
<td>SDAIB</td>
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<tr>
<td>Josh Hitzum</td>
<td>Nisland</td>
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<tr>
<td>Adam Schmidt</td>
<td>Summerset</td>
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<td>Jennifer</td>
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<td>Tommy Anderson</td>
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<td>Alester</td>
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<td>Carolyn Geis</td>
<td>Emery</td>
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<td>Lynn Boadiwine</td>
<td>Baltic, SD.</td>
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<tr>
<td>Eric Larsen</td>
<td>White River</td>
<td>AIB</td>
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<tr>
<td>Just Slaughter</td>
<td>Rapid City, SD</td>
<td>DTBA</td>
</tr>
</tbody>
</table>
State Hosting Reimbursement Request – SDCL 3-9-2.1

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance - Office of Secretary of State
Capitol Building - 500 E Capitol Ave - Pierre, SD 57501
Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting date. All applications cannot be accepted after the meeting date. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personal identity information.

Application

Date: 7/15/2020
Agency: GOED
Agency Address: 711 E Wells Ave, Pierre, SD 57501
Agency Phone Number: 605-773-4633
Employee Requesting Reimbursement: Scott Amundson
Total Amount of Reimbursement: 26.60
Date(s) of Hosting Expense: 7/14/2020
Receipts Attached: Y / N
Explanation of official business performed: Hosted a GOED regional roundtable for economic developers and partners. Provided water and snacks for guests and speakers.

I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were incurred while hosting a prospect for business development, trade, or a tourism promotional activity. I certify that the expenses were incurred through necessary duties of my employment with the State of South Dakota and in the furtherance of state’s interests, concerns, and activities and are supported by the attached receipts. I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Signature of Employee

Date

Authorization

I hereby certify that the above employee was authorized to incur the claimed expenses while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee’s claims were in the furtherance of state interests relating to hosting a prospect for business development, trade, or a tourism promotional activity.

Steve Westra
Name of Department/Office Head

Commissioner
Position/Title of Agency Official
08/12/2020
Date

Signature of Department/Office Head

State Board of Finance Approval

Approval Date: ___________________________ Signature of Secretary, State Board of Finance

Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor’s Office.
MENARDS - PIERRE
2010 N Garfield Ave
Pierre, SD 57501

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in-store credit voucher if the return is done after 10/12/20

If you have questions regarding the charges on your receipt, please email us at:
PIERfrontend@menards.com

Sale Transaction

GLACIERSM SPRING WATER
2739321
OM SALT WATER TAFFY
5738546
OM TOOTSIE FRUIT ROLL
5738588
STRAWBERRY JUMBO DONETTE
5742153
BLUEBERRY JUMBO DONETTES
5742155
HERSHEY MINIATURES
2731490
CHERRY CHEESE DANISH
5742150
ICED CINNAMON ROLLS
5742152
MENARD REBATE NO: 6224630915
Remaining Balance: $0.00
MENARD REBATE NO: 6224401724
Remaining Balance: $0.00
MENARD REBATE NO: 6228630536
Remaining Balance: $0.00
MENARD REBATE NO: 6224542165
Remaining Balance: $12.83

TOTAL SALE
$26.60

TOTAL NUMBER OF ITEMS = 12

THE FOLLOWING REBATE RECEIPTS WERE PRINTED FOR THIS TRANSACTION:
568

THANK YOU. Emily
37916 06
State Board of Finance,

Hi, I have some home station per diem reimbursement requests for a Geology field camp course at the South Dakota School of Mines and Technology. We need these forms approved for the direct billing of these expenses. All of the employees teaching the course ate on campus with students and some also stayed at the dorms with students. The meals were $27 a day and the dorm rooms were $30 a night. Attached is the flyer for the field camp and the signed request forms.

Thank you.

David Mettler
Accounting Assistant
SDSM&T Administrative Services
605-394-5153| david.mettler@sdsmt.edu
Home Station Per Diem Reimbursement Request – SDCL 3-9-2.2

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
Capitol Building - 500 E Capitol Ave
Pierre, SD 57501 Phone: 605-773-3537

Application

Date: 7/13/20 Agency: SD School of Mines

Agency Address: 501 East St. Joseph Street, Rapid City, SD
Agency Phone Number: 605-394-2494

Employee Requesting Reimbursement: J. Foster Sawyer

Total Amount of Reimbursement: $395.35

Date(s) of Expense: 7/14 - 7/16

Event Leave Time: 5 am Event Return Time: 8 pm

Explanation of official business performed: Teaching 410 Field Geology Course


I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were incurred while conducting state business at my headquarters station or place of residence. I certify that the event extended entirely through a meal time without interruption and included a meal provision for which I was billed. I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Signature of Employee 7-14-20

Authorization

I hereby certify that the above employee was authorized to incur the claimed expenses at their headquarters station or place of residence while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee's participation in the event was in the furtherance of state interests.

Name of Department/Office Head 7/27/2020
Nuri Uzunlar

Signature of Department/Office Head

State Board of Finance Approval

Approval Date: Signature of Secretary, State Board of Finance

Note: When completed, attach the original form to voucher to be sent to the State Auditor's Office.
Home Station Per Diem Reimbursement Request – SDCL 3-9-2.2

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
Capital Building - 500 E Capitol Ave
Pierre, SD 57501 Phone: 605-773-3537

Application

Date: 7/11/20
Agency: SD School of Mines

Agency Address: 501 East St. Joseph Street, Rapid City, SD
Agency Phone Number: 605-394-2494

Employee Requesting Reimbursement: Unit Yiddz

Total Amount of Reimbursement: $385.35

Date(s) of Expense: 7/14 - 7/18

Event Leave Time: 5 am Event Return Time: 8 pm

Explanation of official business performed: Teaching 410 Field Geology Course

I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were incurred while conducting state business at my headquarters station or place of residence. I certify that the event extended entirely through a meal time without interruption and included a meal provision for which I was billed. I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Signature of Employee    Date 7/14/20

Authorization

I hereby certify that the above employee was authorized to incur the claimed expenses at their headquarters station or place of residence while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee’s participation in the event was in the furtherance of state interests.

Name of Department/Office Head
Nurt Uzunlar

Position/Title of Agency Official
7/27/2020

Signature of Department/Office Head    Date

State Board of Finance Approval

Approval Date:    Signature of Secretary, State Board of Finance

Note: When completed, attach the original form to voucher to be sent to the State Auditor’s Office.
**Home Station Per Diem Reimbursement Request – SDCL 3-9-2.2**

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
Capitol Building - 500 E Capitol Ave
Pierre, SD 57501    Phone: 605-773-3537

<table>
<thead>
<tr>
<th>Application</th>
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<tbody>
<tr>
<td>Date:</td>
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<tr>
<td>Agency Address:</td>
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<tr>
<td>Agency Phone Number:</td>
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<tr>
<td>Employee Requesting Reimbursement:</td>
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<tr>
<td>Total Amount of Reimbursement:</td>
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<td>Date(s) of Expense:</td>
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<tr>
<td>Event Leave Time:</td>
</tr>
<tr>
<td>Event Return Time:</td>
</tr>
<tr>
<td>Explanation of Official Business performed:</td>
</tr>
</tbody>
</table>

I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were incurred while conducting state business at my headquarters station or place of residence. I certify that the event extended entirely through a meal time without interruption and included a meal provision for which I was billed. I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

[Signature of Employee]  
[Date] 9/13/2026

**Authorization**

I hereby certify that the above employee was authorized to incur the claimed expenses at their headquarters station or place of residence while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee’s participation in the event was in the furtherance of state interests.

[Name of Department/Office Head]

[Signature of Department/Office Head]

[Position/Title of Agency Official]  
[7/27/2020]

**State Board of Finance Approval**

[Signature of Secretary, State Board of Finance]

Note: When completed, attach the original form to voucher to be sent to the State Auditor’s Office.
**Home Station Per Diem Reimbursement Request – SDCL 3-9-2.2**

When Application and Authorization sections are completed, please submit the original to:

**State Board of Finance**
Office of Secretary of State
Capitol Building - 500 E Capitol Ave
Pierre, SD 57501  Phone: 605-773-3537

---

**Application**

**Date:** 7/13/20  
**Agency:** SD School of Mines

**Agency Address:** 501 East St. Joseph Street, Rapid City, SD

**Agency Phone Number:** 605-394-2494

**Employee Requesting Reimbursement:** Chris Pellowski

**Total Amount of Reimbursement:** $671.14

**Date(s) of Expense:** 7/12 - 7/13

**Event Leave Time:** 5 am  
**Event Return Time:** 8 pm

**Explanation of official business performed:** Teaching 410 Field Geology Course

---

I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were incurred while conducting state business at my headquarters station or place of residence. I certify that the event extended entirely through a meal time without interruption and included a meal provision for which I was billed. I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

**Signature of Employee**  
7/21/2020

---

**Authorization**

I hereby certify that the above employee was authorized to incur the claimed expenses at their headquarters station or place of residence while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee's participation in the event was in the furtherance of state interests.

**Name of Department/Office Head**

Nuri Uzunlar

**Signature of Department/Office Head**

**Position/Title of Agency Official**

Director, BHNSFS  
7/27/2020

---

**State Board of Finance Approval**

**Approval Date:**  
**Signature of Secretary, State Board of Finance**

**Note:** When completed, attach the original form to voucher to be sent to the State Auditor's Office.
Home Station Per Diem Reimbursement Request – SDCL 3-9-2.2

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
Capitol Building - 500 E Capitol Ave
Pierre, SD 57501 Phone: 605-773-3537

Date: 7/10/20  Agency: SD School of Mines

Agency Address: 501 East St. Joseph Street, Rapid City, SD
Agency Phone Number: 605-384-2494

Employee Requesting Reimbursement: Jeremy Sheran
Total Amount of Reimbursement: $671.14
Date(s) of Expense: 7/12 – 7/13

Event Leave Time: 5 am  Event Return Time: 8 pm

Explanation of official business performed: Teaching 410 Field Geology Course

I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were incurred while conducting state business at my headquarters station or place of residence. I certify that the event extended entirely through a meal time without interruption and included a meal provision for which I was billed. I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Signature of Employee  Date 7/11/2020

Authorization

I hereby certify that the above employee was authorized to incur the claimed expenses at their headquarters station or place of residence while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee’s participation in the event was in the furtherance of state interests.

Name of Department/Office Head

Nuri Uzunlar

Signature of Department/Office Head

Director, BHNSFS

Position/Title of Agency Official

Date 7/27/2020

State Board of Finance Approval

Approval Date:  Signature of Secretary, State Board of Finance

Note: When completed, attach the original form to voucher to be sent to the State Auditor’s Office.
Home Station Per Diem Reimbursement Request – SDCL 3-9-2.2

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
Capitol Building - 500 E Capitol Ave
Pierre, SD 57501    Phone: 605-773-3537

Application

Date:  7/13/20    Agency:  SD School of Mines
Agency Address:  501 East St. Joseph Street, Rapid City, SD
Agency Phone Number:  605-394-2494
Employee Requesting Reimbursement:  Jon Rotzien
Total Amount of Reimbursement:  $41.14
Date(s) of Expense:  7/13/20-7/15/20
Event Leave Time:  5 am    Event Return Time:  10 pm
Explanation of official business performed:  Teaching 410 Field Geology Course

I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were incurred while conducting state business at my headquarters station or place of residence. I certify that the event extended entirely through a meal time without interruption and included a meal provision for which I was billed. I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Signature of Employee    Date:  7-20-20

Authorization

I hereby certify that the above employee was authorized to incur the claimed expenses at their headquarters station or place of residence while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee's participation in the event was in the furtherance of state interests.

Name of Department/Office Head
Nuri Uzunlar

Signature of Department/Office Head

Director, BHNSFS
Position/Title of Agency Official
7/27/2020

State Board of Finance Approval

Approval Date:    Signature of Secretary, State Board of Finance

Note: When completed, attach the original form to voucher to be sent to the State Auditor's Office.
Home Station Per Diem Reimbursement Request – SDCL 3-9-2.2

When Application and Authorization sections are completed, please submit the original to:
State Board of Finance
Office of Secretary of State
Capitol Building - 500 E Capitol Ave
Pierre, SD 57501 Phone: 605-773-3537

Application

Date: 7/11/20  Agency: SD School of Mines

Agency Address: 501 East St. Joseph Street, Rapid City, SD

Agency Phone Number: 605-394-2484

Employee Requesting Reimbursement: Harry Filkorn

Total Amount of Reimbursement: $471.14

Date(s) of Expense: 7/12 - 7/30

Event Leave Time: 5 am  Event Return Time: 8 pm

Explanation of official business performed: Teaching 410 Field Geology Course

I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were incurred while conducting state business at my headquarters station or place of residence. I certify that the event extended entirely through a meal time without interruption and included a meal provision for which I was billed. I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

[Signature]

Date 7/22/2020

Authorization

I hereby certify that the above employee was authorized to incur the claimed expenses at their headquarters station or place of residence while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee's participation in the event was in the furtherance of state interests.

[Signature]

Date 7/27/2020

State Board of Finance Approval

Approval Date: __________________ Signature of Secretary, State Board of Finance

Note: When completed, attach the original form to voucher to be sent to the State Auditor's Office.
$385.35 - J. Foster Sawyer – ate, did not stay on campus. Breakfast, lunch and dinner 7/14 – 7/28

$385.35 - J Umit Yildiz – ate, did not stay on campus. Breakfast, lunch and dinner 7/14 – 7/28

$671.14 - J Ryan Sincavage – ate and stay on campus (7/12-7/30). Breakfast, lunch and dinner 7/14 – 7/28, Breakfast and lunch 7/29

$671.14 - Chris Pellowski – ate and stayed on campus (7/12 – 7/30). Breakfast, lunch and dinner 7/14 – 7/28, Breakfast and lunch 7/29

$671.14 - Jeremy Shannon – ate and stayed on campus (7/12 – 7/30). Breakfast, lunch and dinner 7/14 – 7/28, Breakfast and lunch 7/29

$641.14 - Jon Rotzien – ate and stayed on campus (7/13 – 7/29). Breakfast, lunch and dinner 7/14 – 7/28, Breakfast and lunch 7/29

$671.14 - Harry Fikorn – ate and stayed on campus (7/12 – 7/30). Breakfast, lunch and dinner 7/14 – 7/28, Breakfast and lunch 7/29

Breakfast - $6.60
Lunch - $9.19
Dinner - $9.90
Housing - $15.00 per night/per person
GEOL - 410 Field Geology

July 13 – July 29
Black Hills - South Dakota and Wyoming
GEOL 410 Field Geology - Six semester credits (3 credits camp & 3 credits online)

Cost: $4,395.00 for consortium members and $4,795 non-consortium. Deposit of $300 is due at registration. Includes tuition, all fees, food and transportation from Rapid City. Course is limited to 30 students.

- Important dates: Monday, July 13 at 8:00 AM – Meet at SDSM&T. If you are arriving on Sunday, please let us know so we can arrange for lodging. Wednesday, July 29 – end of camp – students leave at 12:00 noon. Each week comprises six days of work with Sundays free for individual activities. Some optional Sunday field trips are planned for students unfamiliar with the Black Hills.

- Location: SDSMT

- Introduction: The scenic Black Hills of South Dakota and Wyoming provide the setting of world-class geology for the course. Students will map Precambrian metamorphic, Phanerozoic sedimentary and Tertiary igneous rocks to better understand the complex geologic evolution of the Black Hills uplift from the Trans-Hudson orogeny to the post-
Laramide deposition sediments that make up the Badlands area east of the Black Hills as well as in the Slim Buttes area of northwestern South Dakota.

- **Projects:** Students will measure, describe and correlate stratigraphic sections to gain familiarity with Paleozoic and Mesozoic formations of the Black Hills region. The weekly mapping projects, involving different rock types and undertaken at various scales, provide interesting geologic insight to the major stages of the Black Hills uplift. The second week project begins with the mapping of a structure with inclined sedimentary rocks. The third week project involves the mapping of igneous rocks and how they may have affected the overlying and surrounding rocks. The fourth week involves the mapping of metamorphic rocks and their complex deformation history. The fifth week involves the mapping of sedimentary rocks with complex structural/tectonic elements. These exercises will emphasize the preparation of stratigraphic columns in addition to geologic maps, structural cross sections and the completion of formal geologic reports.

- **Prerequisites:** Completion of junior year of study, Physical Geology, Mineralogy, Igneous/Metamorphic Petrology, Stratigraphy/Sedimentation and Structural Geology, or consent of the Director.

- **Course objectives:** In addition to standard Brunton compasses, students will utilize GPS for detailed mapping using aerial photographs and topographic base maps. The skills and technical knowledge gained in this course are applicable to environmentally related problems in addition to practical applications in mineral resources and hydrogeology, for example.

- **Physical demands:** Field work will involve working off-trail in semi-rugged to rugged terrain and may include hikes of some length. Students should be both physically and mentally prepared and comfortable with steep terrain.

- **Climate:** Summer weather with mostly sunny days with temperature ranges of highs from the 70s-80s to the 100s with typically low humidity and lows from the 60s to the 70s at night.

- **Facilities:** Lodging for the duration of the course will be at the SDSM&T dormitory in Rapid City, SD. Students will need to supply their own bedding (sheets, pillowcase, blanket for a single bed or sleeping bag as well as towels, wash cloth, etc.).

- **Required textbook:** Latest edition (1985) of Compton’s “Geology in the Field” is required. Available at the SDSM&T bookstore and on Amazon as hard cover or e-book ($19).

  - Field Clothing /Equipment /Drafting ect: [EQUIPMENT LIST](#)

**FACULTY**

Geology professors and staff from: South Dakota School of Mines & Technology and other universities.

*For more information please contact BHNSFS at (605) 394-2494_ or write to nuri.uzunlar@sdsmt.edu*