



# Statement of Organization

[SDCL 12-27-6](#)

**STOP! File online at <https://sdcfr.sdsos.gov/>**

**WHO FILES:** New committees forming, existing committees updating information and any entity making expenditures, equal to or exceeding 50% of the entity's annual gross income, for the adoption or defeat of a ballot measure ([SDCL 12-27-18](#)).

**DEADLINE TO FILE:** The Treasurer for a political committee shall file a statement of organization not later than **15 days after the date upon which the committee made contributions, received contributions, or paid expenses in excess of \$500.00**. However, if such activity falls within 30 days of any statewide election, the statement of organization shall be filed within 48 hours. A candidate shall file a statement of organization for a candidate campaign committee not later than **15 days after becoming a candidate** ([SDCL 12-27-3](#); [12-27-23](#)). The treasurer of a political committee shall **file an updated statement of organization not later than fifteen days after ANY change** in the information contained on this statement.

**ONLY FILE WITH:** Committee types below are required to file with The South Dakota Secretary of State's office.

## Committee Type (you must select one):

- Statewide (PAC)   
 Statewide Political Party   
 County Political Party   
 Auxiliary Political Party  
 **Statewide Ballot Question Committee**   
 Statewide Candidate Committee   
 Legislative Committee

If you are a **Ballot Question Committee** are you forming the committee as the sponsor or on behalf of the sponsor of an initiated constitutional amendment or initiated measure to comply with [SDCL 2-1-1.1](#) and [1.2](#)?  Yes  No

## Committee Information

**(ALL fields required** unless indicated otherwise, please print):

*only ONE candidate campaign committee may be organized for each candidate ([SDCL 12-27-1 \(3\)](#))*  
*(Exception: a candidate can have both a statewide and legislative committee.)*

**FULL NAME OF COMMITTEE** \_\_\_\_\_

**CANDIDATE NAME AND OFFICE SOUGHT** \_\_\_\_\_

Telephone Number \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Street Address (if different than above) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Committee website address (optional) \_\_\_\_\_

### **Chair** (Candidate may serve as Chair of their Committee)

Chair First and Last Name \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Street Address (if different than above) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Check this box if **Chair is also serving as Treasurer**. If the same, you are not required to fill out Treasurer fields below.

*\*The Treasurer is responsible for filing all campaign finance reports and forms. Letters and notices, sent by the Secretary of State's office, will go to the **Treasurer only**.*

**Treasurer** First and Last Name \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Street Address (if different than above) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Political Action or Ballot Question Committees (required):** You **must** include a concise statement of the committee's purpose and goals. You must also list the full name, street address and mailing address of the entity with which the committee is connected or affiliated. If the committee is not connected or affiliated with any one entity, provide the trade, profession, or primary interest of the committee.

Statement of Purpose or Goals (required) \_\_\_\_\_

Name of Affiliated Entity \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Street Address (if different than above) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Trade, Profession, or Primary Interest of Committee \_\_\_\_\_

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If you are a **Ballot Question Committee**, explain, in detail, the measure(s) and/or issue(s) the committee is involved with and whether the committee support(s) or oppose(s) them.

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**Verification below must be SIGNED BEFORE SUBMITTING this Statement**

No person may execute this report knowing it is false in any material respect. Any violation may be subject to a civil and/or criminal penalty. Any person who, with intent to defraud, falsely makes, completes, or alters a written instrument of any kind, or passes any forged instrument of any kind is guilty of forgery. Forgery is a Class 5 felony ([SDCL 22-39-36](#)). I also understand that failure to timely file any statement, amendment, or correction required subjects the Treasurer, who is responsible for filings under [SDCL 12-27](#), to a civil penalty of \$200.00 (county political parties and auxiliary organizations, \$50.00) for each violation ([SDCL 12-27-29.1](#)). Additional penalties not to exceed \$250 could be assessed per [SDCL 12-27-29.4](#). I also understand that failure to timely file reports or pay penalties could result in the candidate not being certified for office ([SDCL 12-27-29.3](#)).

**Treasurer information**

**(Candidate or Chair (if not a candidate committee))**

(Printed Name) \_\_\_\_\_

(Printed Name) \_\_\_\_\_

(Signature) \_\_\_\_\_

(Signature) \_\_\_\_\_

(Date mm/dd/yyyy) \_\_\_\_\_

(Date mm/dd/yyyy) \_\_\_\_\_

12-27-49. Effect of secretary of state's filing or refusing to file document. **The Office of the Secretary of State's duty to file a document under this chapter is ministerial.** If the Office of the Secretary of State files or refuses to file a document, it does not:

- (1) Affect the validity or invalidity of the document in whole or part;
- (2) Relate to the correctness or incorrectness of information contained in the document; or
- (3) Create a presumption that the document is valid or invalid or that information contained in the document is correct or incorrect.

**Mail completed form to:**  
Secretary of State's Office  
Attn: Elections Department  
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