

Statement of Organization RECEIVED Judicial Candidate Committee 05 2022

SDCL 12-27-6

S.D. SEC. OF STATE

<u>DEADLINE TO FILE:</u> The Treasurer for a <u>political committee</u> 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. 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.

FILE WITH: The Secretary of State's Office - 500 East Capitol Avenue, Ste. 204, Pierre, SD 57501

Committee Type

X Judicial Candidate Committee

only ONE candidate campaign committee				
Candidate Name and Office Sought Patricia				
Full Name of Committee Committee for Re	tention of	Justice De	Vanev	
Telephone Numb				
Mailing Address				
Street Address (in				
Committee website address (optional)	office of mode			Than-
Chair (Candidate may serve as Chair of their Comm Chair First and Last Name <u>Cecilia Fron</u> Telephone Number (605) 392 - 2378 Mailing Address 17984 354th Ave Street Address (if different than above)	Email Address	Drient	State SD	_ Zip <u>57467</u>
Check this box if <u>Chair is also serving as Treasure</u> below. *The Treasurer is responsible for filing all ca Treasurer First and Last Name			o fill out Treasu	rer fields
Telephone Number	Email Address	26.70	110 110 1	
Mailing Address	City		State	_ Zip
Street Address (if different than above)	City	State	Zip_	

RECEIVED

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 _____ City ____ State ____ Zip Mailing Address Street Address (if different than above) _____ City ____ State ____ Zip____ Trade, Profession, or Primary Interest of Committee 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. 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 up to \$1,000.00 for each violation (SDCL 12-27-40). Treasurer information (Candidate or Chair (if not a candidate committee)) (Date mm/dd/yyyy) 07/0/ (Date mm/dd/yyyy)

Return completed form to:

Secretary of State's Office

Attn: Elections • 500 E Capitol Ave., Ste. 204 • Pierre, SD 57501

Email: cfr@state.sd.us • Fax: 605-773-6580