

RECEIVED Statement of Organization MAR 04 2022 Judicial Candidate Committee D. SEC. OF STATE

SDCL 12-27-6

<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 <u>candidate</u> 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

Judicial Candidate Committee

only ONE candidate campaign committee may be organized for each candidate (SDCL 12-27-1 (3))
Candidate Name and Office Sought Robin Houwman, Circuit Court Judge
Full Name of Committee Tonwman for Judge" Second Circuit "A"
Telephone Numbe
Mailing Address_
Street Address (if
Committee website address (optional)
Chair (Candidate may serve as Chair of their Committee) Chair First and Last Name Rolein Houwan
Telephone Number
Mailing Address L
Street Address (if o
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. Treasurer First and Last Name Susie Patrick Telephone Number 605. 366.5189 Email Address Susie patrick osio. midco. net
Mailing Address 2711 Carter Place City Stone Falls State SD Zip 57105
Street Address (if different than above) City State Zip

Political Action or Ballot Question Committees (repurpose and goals. You must also list the full name, committee is connected or affiliated. If the committee profession, or primary interest of the committee.	street address and mailing	ng address of the entity	with which the	
Statement of Purpose or Goals (required)		A		
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				
If you are a Ballot Question Committee , explain, in and whether the committee support(s) or oppose(s) the		nd/or issue(s) the comm	nittee is involved with	
Verification below must be SIGN	NED BEFORE SU	BMITTING this	Statement	
No person may execute this report knowing it is false in as penalty. Any person who, with intent to defraud, falsely reforged instrument of any kind is guilty of forgery. Forger timely file any statement, amendment, or correction require to a civil penalty up to \$1,000.00 for each violation (SDC)	makes, completes, or alters y is a Class 5 felony (<u>SDC</u>) red subjects the Treasurer,	a written instrument of an L 22-39-36). I also under	ny kind, or passes any rstand that failure to	
Treasurer information	(Candidate or Cha	ir (if not a candidate o	committee))	
(Printed Name) GASAN PARCUL		(Printed Name) Robin Honwman		
(Printed Name) Susan PARCUL (Signature) Susan MPalneu	(Signature)	or and the second		

Mail completed form to your local election official.