

Please print: Full Name

## **Conflict of Interest CANDIDATE**

## RECEIVED FEB 1 6 2022 SD Secretary of State

## Statement of Financial Interest

<u>Deadline to file:</u> Within 15 days after filing nominating petitions (Supreme Court Justice files within 15 days of notifying Secretary of State of his intention to place his name on the retention ballot) or certification of convention nomination.

<u>File with:</u> The **SECRETARY OF STATE** except local candidates file with the office where they file their nominating petition.

<u>Candidates who file:</u> State and Federal Office candidates (United States Senate, United States House of Representatives, Governor, State Legislator, circuit court judge and Supreme Court Justice <u>SDCL 12-25-28</u>);

**Convention Nominee** candidates (Lieutenant Governor, state treasurer, attorney general, secretary of state, state auditor, public utilities commissioner, commissioner of school and public lands <u>SDCL 12-25-29</u>);

Convention Nominee candidates of a party with alternative political status (US Senate, US House, Governor, Lieutenant Governor, state treasurer, attorney general, secretary of state, state auditor, public utilities commissioner, commissioner of school and public lands or state legislator SDCL 12-25-29.1); and

**Local Office** candidates (county commissioner, school board member in a school district with a total enrollment of more than 2,000 students, or commissioner, council member, or mayor in any 1<sup>st</sup> class municipality <u>SDCL 12-25-30</u>)

COMPLETE Address _				
Office Sought (list District nu	mber if applicable) <u>CIRCUIT</u> JUI	DGE, SECOND CIRCUIT,	Po	
What is your occupation/prof	ession? URCUIT JUDO	( <del>SE</del>	1	
to your family's (includes spon includes any enterprise in which Identify who receives the income	use, minor children living at home) gross incomes you or an immediate family member(s) comes from each enterprise but do not include the	trols more than 10% of the capital or stock. e value. (SDCL 12-25-27)		
*The intent of this form is to collect specific information, not generalities. Do not put N/A or leave the grid blank.				
Name of Candidate or Family Member	Name the Source of Funds (Ex: current employer, SD Legislature, 401K, benefits, etc.)	Relationship to funds (Ex: employee, officer, director, associate, partner, shareholder, owner, member, proprietor, etc.)		
CAMELA	State of South Dakota	Employer Salany		

Name of Candidate or Family Member	Name the Source of Funds (Ex: current employer, SD Legislature, 401K, benefits, etc.)	Relationship to funds (Ex: employee, officer, director, associate, partner, shareholder, owner, member, proprietor, etc.)
CAMELA THEELER	State of South Dakota Unitied Judicial System	Employer Salary
TYSON THEELER	First Premier Bank	
CAMELA THEFLER	Estate of Ronald Graff	beneficiary

I declare and affirm under the penalties of perjury that the information above has been examined by me and to the best of my knowledge and belief is a true, correct and complete representation of myself and my immediate family's financial interests for the preceding calendar year.

(Signature)

(Date)

South Dakota Secretary of State ● Attention Elections ● 500 E. Capitol Ave. ● Pierre, SD 57501

www.SDSOS.gov • phone 605 773 3537 • fax 605 773 6580 • Elections@state.sd.us

Last updated 07/01/2019