

11613

Appendix B

# Campaign Finance Disclosure Statement

RECEIVED

OCT 21 2010

## State of South Dakota

S.D. SEC. OF STATE

County, municipal and school candidates file in the office where you filed your nominating petition. Statewide PACs, political party, ballot question and other committees file statement with the Secretary of State's Office.

Mail to Secretary of State's Office, Election Department, 500 E Capitol Ave., Ste. 204, Pierre, SD 57501-5070 Fax to 605-773-6580 or email to [kea.warne@state.sd.us](mailto:kea.warne@state.sd.us) **Fax and email images must contain the signature and the original must be filed in our office within one week following the date the fax/email was received.**

See pages 43-45 of the Guideline Book for specific instructions on completing this report.

Name of Committee American Cancer Society Cancer Action Network Smoke-free Committee

Complete Street and Postal Address 901 E St. NW, Suite 500, Washington, DC 20004

Name of Person Making Report Carter Steger

Daytime Phone Number 202-661-5727 Evening Phone Number 202-487-0624

Email Address csteger@cancer.org

If you are a candidate, what office are you seeking? \_\_\_\_\_

If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.

In support of Referred Law 12

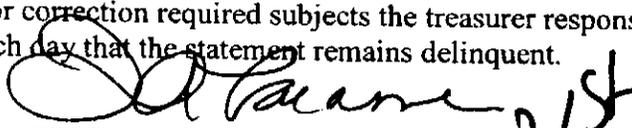
Type of Campaign Statement Pre-general  
Pre-election (pre-primary, pre-general), year-end, mid-year (mid-year for ballot questions committees only), amendment, supplement or termination

*The following verification must be completed before submitting report.*

### VERIFICATION OF PERSON MAKING REPORT

I Lisa A. Lacasse (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. I also understand that failure to timely file any statement, amendment, or correction required subjects the treasurer responsible for filing to a civil penalty of fifty dollars per day for each day that the statement remains delinquent.

Date: 10/19/10



Signature of Treasurer

Filed this 21<sup>st</sup> day of

October 10

  
SECRETARY OF STATE













### Summary Page

This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.

1.	Balance of cash and cash equivalents on hand, if any, at the beginning of the reporting period:	\$ 325,000.00
2.	Receipts	
	Schedule A - Direct Contributions	\$ ___20,000
	Schedule B - In-Kind Contributions	\$ _____
	Schedule C - Other Income	\$ _____
	Schedule D - Establishing/Administration of Committee	\$ _____
	Total of all Receipts	\$ ___20,000
3.	Total Monetary Receipts (A+C)	\$ 20,000.00
4.	Candidate's Personal Contribution to Own Campaign	\$ _____0
5.	Monetary Loans to Candidate or Committee During Reporting Period	\$ _____0
6.	Monetary Loans Repaid During Reporting Period	\$ _____0
7.	Expenditures - Schedule E	\$ 317,295.22
8.	Debts & Obligations Owed by the Committee - Schedule F	\$ _____0
9.	Monetary Loans Made by the Committee During the Reporting Period - Schedule G	\$ _____0
10.	Monetary Loans Repaid to the Committee During the Reporting Period - Schedule G	\$ _____0
11.	Amount on hand at the close of this reporting period. This should equal lines (1+3+4+5+10) - (6+7+9)	*\$ _27,704.78

**\*Note: You cannot end the reporting period with a negative balance.**

**County, municipal and school candidates file with the person in charge of the local election.**

**If you are a ballot question committee which received a contribution from an organization, please attach to this campaign finance disclosure statement, the Ballot Question Statement you received from the organization.**

OCT-19-2010 15:40 From:SDSMA SDFMC DC

6053360270

To:6052247947

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### Ballot Question Contribution Statement State of South Dakota

Complete one of the following three sections that pertain to your organization.

#### Section 1

Check here if your organization is filed as a domestic or foreign entity in good standing with the Office of South Dakota Secretary of State.

Full Name of Organization: South Dakota State Medical Holding Co., Inc. dba DAKOTACARI: \_\_\_\_\_

Date: 10/19/10 \_\_\_\_\_ Signature: *Neil J. Garrison* \_\_\_\_\_

\*\*\*\*\*

#### Section 2 N/A

State law requires any organization that makes a contribution to a ballot question committee that is not filed as a domestic or foreign entity in good standing with the South Dakota Secretary of States Office, to include Section 2 of this informational statement with any contribution to a ballot question committee.

Full Name of Organization: \_\_\_\_\_

State or Country under Whose Law the Organization is Incorporated or Organized: \_\_\_\_\_

Street Address of the Organization's Principle Office: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

\*\*\*\*\*

#### Section 3 N/A

State law requires any organization that makes a contribution to a ballot question committee which is not filed as a domestic or foreign entity in good standing with the South Dakota Secretary of States Office and is not eligible to complete section 2, must include Section 3 of this informational statement with any contribution to a ballot question committee.

Full Name of Organization: \_\_\_\_\_

Street Address of the Organization's Principle Office: \_\_\_\_\_

You must provide the names and street addresses of any owners, directors, or officers of the organization including the name and street address of the person authorizing the contribution.

OCT-19-2010 15:40 From:SDSMA SDFMC DC

6053360270

To:6052247847

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Name of Organization's Owners, Directors or Officers	Street Address

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Name of Person Authorizing the Contribution: \_\_\_\_\_

Street Address: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

\*\*\*\*\*

**Section 4 N/A**

If any organization contributes more than ten thousand dollars in the aggregate to a ballot question committee the organization must submit with the contribution the name and address of every person who owns ten percent or more of the organization, has provided ten percent or more of the organization's gross receipts, including capital contributions, in the current or preceding year, or has provided ten percent or more of the funds being contributed to the ballot question committee

Name of Shareholder or Member	Street Address

I hereby declare and affirm under penalty of perjury that the name and address of every person who owns ten percent or more of the organization, has provided ten percent or more of the organization's gross receipts, including capital contributions, in the current or preceding year, or has provided ten percent or more of the funds being contributed to the ballot question committee is included above and that no part of the contribution was raised or collected by the organization for the purpose of influencing the ballot questions.

Date: 10/19/10 President Signature: Stephen H. Stehling

Date: 10/19/10 Treasurer Signature: Terrence A. Nemece

State law requires you to submit this information to the treasurer of the committee you are making the contribution to.

Amended 6-2-00

### Ballot Question Contribution Statement State of South Dakota

Complete one of the following three sections that pertain to your organization.

**Section 1**

Check here if your organization is filed as a domestic or foreign entity in good standing with the Office of South Dakota Secretary of State.

Full Name of Organization: Delta Dental Plan of South Dakota

Date: 10/19/10 Signature: [Signature]

\*\*\*\*\*

**Section 2 N/A**

State law requires any organization that makes a contribution to a ballot question committee that is not filed as a domestic or foreign entity in good standing with the South Dakota Secretary of States Office, to include Section 2 of this informational statement with any contribution to a ballot question committee.

Full Name of Organization: \_\_\_\_\_

State or Country under Whose Law the Organization is Incorporated or Organized: \_\_\_\_\_

Street Address of the Organization's Principle Office: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

\*\*\*\*\*

**Section 3 N/A**

State law requires any organization that makes a contribution to a ballot question committee which is not filed as a domestic or foreign entity in good standing with the South Dakota Secretary of States Office and is not eligible to complete section 2, must include Section 3 of this informational statement with any contribution to a ballot question committee.

Full Name of Organization: \_\_\_\_\_

Street Address of the Organization's Principle Office: \_\_\_\_\_

You must provide the names and street addresses of any owners, directors, or officers of the organization including the name and street address of the person authorizing the contribution.

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Name of Organization's Owners, Directors or Officers	Street Address

Name of Person Authorizing the Contribution: \_\_\_\_\_

Street Address: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

\*\*\*\*\*

N/A - DDSD gave \$10,000 and is a  
Section 4 5D nonprofit - no owners

If any organization contributes more than ten thousand dollars in the aggregate to a ballot question committee the organization must submit with the contribution the name and address of every person who owns ten percent or more of the organization, has provided ten percent or more of the organization's gross receipts, including capital contributions, in the current or preceding year, or has provided ten percent or more of the funds being contributed to the ballot question committee

Name of Shareholder or Member	Street Address
N/A	

I hereby declare and affirm under penalty of perjury that the name and address of every person who owns ten percent or more of the organization, has provided ten percent or more of the organization's gross receipts, including capital contributions, in the current or preceding year, or has provided ten percent or more of the funds being contributed to the ballot question committee is included above and that no part of the contribution was raised or collected by the organization for the purpose of influencing the ballot questions.

Date: 10/19/10 President Signature: [Signature]

Date: 10-19-10 Treasurer Signature: [Signature]

State law requires you to submit this information to the treasurer of the committee you are making the contribution to.

Amended 6-2-09