



Candidate's or Committee's Report of Receipts and Expenditures

Candidates and candidate committees: File in the office where you filed your nominating petition. PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office, 500 E Capitol Ave., Pierre, SD 57501-5070

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See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.

Name of Candidate or Committee Jessica Nathanson

Complete Mailing Address 2609 S Williams Ave, #204 Sioux Falls, SD 57105

Name of Person Making Report Jessica Nathanson Daytime Phone Number 605-339-2884

If you are a candidate, what office are you seeking? State Rep District 12 (now withdrawn)

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.

Type of Report (See pages 4 & 5 of Guideline Book) Post-Primary Campaign Finance

For Reporting Period Ending (See pages 4 & 5 of Guideline Book) July 3, 2006

The following verification must be completed before submitting report.

VERIFICATION OF PERSON MAKING REPORT

I Jessica Nathanson (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.

Date: 7/26/06

[Signature] Candidate Signature or Signature of Committee Treasurer or Chairperson

Revised July 2001

Filed this 31st day of July 06 [Signature] SECRETARY OF STATE











Name of Candidate or Committee:

Jessica Nathanson

For the reporting period ending:

July 3, 2006**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. Amount on hand, if any, at the beginning of the reporting period: |             | \$ <u>0</u> |
| 2. Receipts  |             |             |
| Schedule A - Direct Contributions                                    | \$ <u>0</u> |             |
| Schedule B - Fund-Raising Events                                     | \$ <u>0</u> |             |
| Schedule C - In Kind Contributions                                   | \$ <u>0</u> |             |
| Schedule D - Other Income  | \$ <u>0</u> |             |
| Total of all Receipts  | \$ <u>0</u> |             |
| 3. Total Monetary Receipts (A+B+D)                                   |             | \$ <u>0</u> |
| 4. Candidate's Personal Contribution to Own Campaign                 |             | \$ <u>0</u> |
| 5. Monetary Loans to Candidate or Committee During Reporting Period  |             | \$ <u>0</u> |
| 6. Monetary Loans Repaid During Reporting Period                     |             | \$ <u>0</u> |
| 7. Expenditures - Schedule E   |             | \$ <u>0</u> |
| 8. Unpaid Obligations - Schedule F                                   | \$ <u>0</u> |             |
| 9. Amount on hand at the close of this reporting period. *           |             | \$ <u>0</u> |
| This should equal lines (1+3+4+5) - (6+7)                            |             |             |

State Capitol, Suite 204  
500 East Capitol Avenue  
Pierre, South Dakota  
57501-5070  
sdsos@state.sd.us  
www.sdsos.gov



**Chris Nelson**  
Secretary of State

Chad Heinrich  
Deputy

**State of South Dakota**

**Voluntary Statement of Organization for a  
Political Action or Ballot Question Committee**

State law does not require new political action (PAC) or ballot question committees to register with the Secretary of State. Law does however require these committees to file campaign finance reports periodically following the commencement of political activity. This voluntary registration form will give the Secretary of State the information necessary to send your committee the proper reporting forms prior to the deadline for filing.

FULL NAME OF COMMITTEE: \_\_\_\_\_

\_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

COMMITTEE TREASURER: \_\_\_\_\_

PHONE: \_\_\_\_\_

TYPE OF COMMITTEE (PAC or Ballot Question): \_\_\_\_\_

If you are a ballot question committee, please also indicate the measure which you are supporting or opposing.

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

\_\_\_\_\_  
Signature of person submitting voluntary registration