## South Dakota Petition Copy Request Form

**SDCL 12-1-39.** Availability of petition to public. No petition submitted may be made available to the public until the validation process has been completed and the office where that petition was submitted has filed or rejected the petition, except as provided in § 2-1-15.

\*\*This form is considered a public document and will be available to the public if requested.\*\*

Name	Phone #		_Email		
	on Name (if applicable)_				
Legislative Can Candidate nom	didate or Special District inating petitions - \$15.00 applies only to candidates	data file (or en • 1 • 5	nailed list) New Party Fo Statewide Car	rmation petiti ndidate nomin	ons - \$50.00 ating petitions - \$50.00 etitions - \$50.00
You must choose <b>ONI</b>	below:				
Statewide Candida	te (list candidate name)				
New Party Formati	<b>on</b> (list the name of the Party	)			
Legislative district	(list district number and candi	date name)			
Special District (list	special district name and cano	lidate name)			
Description Paper Copy - Paper Payment	to size this file may have to copies are \$2.00 per page. must be received befor use this section if req	A two-sided sheet on two-sided sheet on two-sided sheet of two sets the set of two sets of	of paper would an electroni	1 be \$4.00. <mark>c file or harc</mark>	
<b>🗆 Statewide Ballot M</b>	easure (list ballot measure n	ame)			
□ SW Ballot Measure	e Random Sample Valid	ation Sheets (list ba	allot measure n	ame)	
- Random sample	validation sheets are \$2.00	per page.			
	retary of state shall generat sample validation sheets w			16 and make a	vailable to the public
DATE//_	Signature			(	no electronic signature font)
S	outh Dakota Secretary of S	l, mail or fax this for elections@state.sd.u tate, 500 East Capito -773-3537 • Fax: 60	<u>s</u> 1, Ste 204, Pie	erre, SD 57501	
OFFICE USE ONLY:	Amount Paid:	Payment Type		Date Pai	d://
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