

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Corinna for South Dakota

ADDRESS (number and street)

PO Box 3432

Check if different than previously reported. (ACC)

Rapid City

SD

57709

2. FEC IDENTIFICATION NUMBER ▼

C C00551127

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

SD

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

06

03

2014

in the State of

SD

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

04

01

2014

through

05

14

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Sam Khoroosi

Signature of Treasurer Sam Khoroosi

[Electronically Filed]

Date

05

22

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Corinna for South Dakota**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 05 / 14 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	17170.00	106114.47
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	17170.00	106114.47
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	27990.23	117542.76
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	27990.23	117542.76
8. Cash on Hand at Close of Reporting Period (from Line 27).....	8572.19	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	20000.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Corinna for South Dakota**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 05 / 14 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11320.00	60429.04
(ii) Unitemized.....	5850.00	23533.00
(iii) TOTAL of contributions from individuals ▶	17170.00	83962.04
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	15000.00
(d) The Candidate.....	0.00	7152.43
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	17170.00	106114.47
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	20000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	20000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.48	0.48
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	17170.48	126114.95

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	27990.23	117542.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	27990.23	117542.76

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	19391.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	17170.48
25. SUBTOTAL (add Line 23 and Line 24).....	36562.42
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	27990.23
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	8572.19

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

**A.** Full Name (Last, First, Middle Initial)  
**Gayle Nelson**

Mailing Address 2901 S Bahnson Ave

City: Sioux Falls State: SD Zip Code: 57103-4805

FEC ID number of contributing federal political committee: **C**

Name of Employer: Pediatric Dentistry Inc. Occupation: Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1300.00

Date of Receipt: 04 / 01 / 2014

**Transaction ID : VN926CKK280**

Amount of Each Receipt this Period: 100.00

\* In-Kind:

**B.** Full Name (Last, First, Middle Initial)  
**Warren Hovland**

Mailing Address 1919 Moriarty Dr

City: Brookings State: SD Zip Code: 57006-5485

FEC ID number of contributing federal political committee: **C**

Name of Employer: South Dakota State Univ Occupation: Flight Trainer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 05 / 13 / 2014

**Transaction ID : VN926CQGHM0**

Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary and Dale Berkebile**

Mailing Address 255 Texas St. Appt. 116

City: State: SD Zip Code:

FEC ID number of contributing federal political committee: **C**

Name of Employer: Information Requested Occupation: Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 05 / 14 / 2014

**Transaction ID : VN926CQQJW0**

Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

700.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

**A.** Full Name (Last, First, Middle Initial)  
**Keith Rounds**

Mailing Address 1600 Blairhill Cir

City State Zip Code  
Brookings SD 57006-5459

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 15 / 2014

**Transaction ID : VN926CN3041**

Amount of Each Receipt this Period  
 350.00

**B.** Full Name (Last, First, Middle Initial)  
**James (Jim) Barker**

Mailing Address 501 N Euclid Ave

City State Zip Code  
Sioux Falls SD 57104-2103

FEC ID number of contributing federal political committee. **C**

Name of Employer Researching Occupation Researching

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 26 / 2014

**Transaction ID : VN926CP2FP1**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary DeJong**

Mailing Address 2705 S Alana Cir

City State Zip Code  
Sioux Falls SD 57103-4817

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Yoga Instructor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : VN926CRHMQ1**

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1650.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

**A.** Full Name (Last, First, Middle Initial)  
**Russell Hilberry**

Mailing Address 620 G St NE

City Washington State DC Zip Code 20002-4306

FEC ID number of contributing federal political committee. **C**

Name of Employer World Bank Occupation Economist

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2014

**Transaction ID : VN926CPAM92**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**William Cooper**

Mailing Address 1206 S 3rd Ave

City Sioux Falls State SD Zip Code 57105-0817

FEC ID number of contributing federal political committee. **C**

Name of Employer Researching Occupation Researching

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 27 / 2014

**Transaction ID : VN926CP2H92**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Kathryn Johnson**

Mailing Address 24054 Palmer Gulch Rd

City Hill City State SD Zip Code 57745-6525

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Scientist

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 02 / 2014

**Transaction ID : VN926CHKYE2**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

**A.** Full Name (Last, First, Middle Initial)  
**Stephanie Herseth-Sandlin**

Mailing Address 900 W White Willow Cir

City State Zip Code  
Sioux Falls SD 57108-2881

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Raven Industries Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 26 / 2014

**Transaction ID : VN926CP2FH2**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Catherine Ratliff**

Mailing Address 13060 Eagle Ct

City State Zip Code  
Hot Springs SD 57747-7352

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ratliff Law Office Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
220.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 15 / 2014

**Transaction ID : VN926CN0X73**

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
**Richard Henkle**

Mailing Address 10410 Midnight Dr

City State Zip Code  
Edgemont SD 57735-7000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Disabled Veteran N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 01 / 2014

**Transaction ID : VN926CRETG4**

Amount of Each Receipt this Period  
-400.00

Returned Check

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

620.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

**A.** Full Name (Last, First, Middle Initial)  
**Judy Duhamel**

Mailing Address 1106 Hyland Dr

City State Zip Code  
Rapid City SD 57701-4456

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 27 / 2014**

**Transaction ID : VN926CP2KS4**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Kay Jorgensen**

Mailing Address 1909 Stagebarn Cir

City State Zip Code  
Spearfish SD 57783-2945

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RET RET

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 03 / 2014**

**Transaction ID : VN926CHQNW4**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Larry L Stroschein**

Mailing Address 37302 143rd St

City State Zip Code  
Mansfield SD 57460-6813

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 11 / 2014**

**Transaction ID : VN926CMV9A5**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**450.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

**A.** Full Name (Last, First, Middle Initial)  
**William (Bill) Walsh**

Mailing Address 36 Lincoln Ave

City State Zip Code  
Deadwood SD 57732-1453

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 11 / 2014**

**Transaction ID : VN926CMV8W5**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Carol Miller**

Mailing Address 18523 W Port Au Prince Ln

City State Zip Code  
Surprise AZ 85388-7577

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested  
United States Air Force Lt Col

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 01 / 2014**

**Transaction ID : VN926CRJ906**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Robin Zephier**

Mailing Address 3020 Sunny Hill Cir

City State Zip Code  
Rapid City SD 57702-9201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested  
Abourezk & Zephier Attorney/Owner

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 01 / 2014**

**Transaction ID : VN926CPJR76**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**550.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

**A.** Full Name (Last, First, Middle Initial)  
**Benny Bailey**

Mailing Address 4864 Cavallo Way

City Woodbridge State VA Zip Code 22192-5439

FEC ID number of contributing federal political committee. **C**

Name of Employer DoD Occupation Security

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 11 / 2014**

**Transaction ID : VN926CQ96A6**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Nancy Feinstein**

Mailing Address 3205 E Marson Dr

City Sioux Falls State SD Zip Code 57103-7106

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 27 / 2014**

**Transaction ID : VN926CP2KR6**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Edward (Ed) Clark**

Mailing Address 47156 S Clubhouse Rd

City Sioux Falls State SD Zip Code 57108-8165

FEC ID number of contributing federal political committee. **C**

Name of Employer Sanford Health Occupation Doctor

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 07 / 2014**

**Transaction ID : VN926CPSMS6**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1350.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

**A.** Full Name (Last, First, Middle Initial)  
**James Beddow**

Mailing Address 2520 S Main Ave

City State Zip Code  
Sioux Falls SD 57105-4821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Rural Learning Center Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 27 / 2014

**Transaction ID : VN926CP2HZ6**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Roberta Olson**

Mailing Address 1303 Wahpeton Pass

City State Zip Code  
Brookings SD 57006-3641

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Nurse N/A

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 27 / 2014

**Transaction ID : VN926CP2J37**

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
**Edwin (Ed) Fischbach**

Mailing Address 38928 152nd St

City State Zip Code  
Mellette SD 57461-5118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 21 / 2014

**Transaction ID : VN926CP2EJ7**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

700.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

**A.** Full Name (Last, First, Middle Initial)  
**Phil Clark**

Mailing Address 4708 S Wildwood Cir

City State Zip Code  
Sioux Falls SD 57105-7122

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 01 / 2014

**Transaction ID : VN926CPAMS7**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**William Cooper**

Mailing Address 1206 S 3rd Ave

City State Zip Code  
Sioux Falls SD 57105-0817

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested  
Researching Researching

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 27 / 2014

**Transaction ID : VN926CP2HS8**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Robin Zephier**

Mailing Address 3020 Sunny Hill Cir

City State Zip Code  
Rapid City SD 57702-9201

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested  
Abourezk & Zephier Attorney/Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 15 / 2014

**Transaction ID : VN926CN3FY8**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

800.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

**A.** Full Name (Last, First, Middle Initial)  
**Arnold Schurr**

Mailing Address 34671 129th St

City Roscoe	State SD	Zip Code 57471-5310
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
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Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : VN926CMV9D9**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Sandy Hoffner**

Mailing Address 515 W Riverside Dr

City Yankton	State SD	Zip Code 57078-4227
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 24 / 2014

**Transaction ID : VN926CP2MJ9**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Ray J Hillenbrand**

Mailing Address 6750 Nameless Cave Rd

City Rapid City	State SD	Zip Code 57702-9448
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : VN926CQQGP9**

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. Kathleen Kittrick</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 13 / 2014
Mailing Address 6505 Waldo Ct		<b>Transaction ID : VN926CQQMZ9</b>
City Alexandria	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Researching	Occupation Researching	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	11320.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. T K Associates International</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 821 Upper Pines Dr		Amount of Each Disbursement this Period 3000.00
City Rapid City	State SD	
Zip Code 57701-2513	Purpose of Disbursement General Management Consulting Services	Transaction ID : VN82Y9SFX10
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Corinna Robinson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address 522 N Main Ave		Amount of Each Disbursement this Period 100.70
City Sioux Falls	State SD	
Zip Code 57104-5900	Purpose of Disbursement Magnetic Car Signs	Transaction ID : VN82Y9SGR40
Candidate Name <b>Corinna Robinson</b>	Category/Type 004	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SD District: 00		

Full Name (Last, First, Middle Initial) <b>c. Gayle Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2901 S Bahnson Ave		Amount of Each Disbursement this Period 100.00
City Sioux Falls	State SD	
Zip Code 57103-4805	Purpose of Disbursement	Transaction ID : VN926CKK280I
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3200.70
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 36			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. Prestige Cleaners</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 2315 Jackson Blvd		Amount of Each Disbursement this Period 36.09
City Rapid City	State SD	
Zip Code 57702-4340		
Purpose of Disbursement Cleaning		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Prestige Cleaners</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 2315 Jackson Blvd		Amount of Each Disbursement this Period 33.34
City Rapid City	State SD	
Zip Code 57702-4340		
Purpose of Disbursement Cleaning		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ExxonMobil Station</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 4128 Jackson Blvd		Amount of Each Disbursement this Period 22.48
City Rapid City	State SD	
Zip Code 57702-3216		
Purpose of Disbursement Travel		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	91.91
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 36
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. South Dakota Democratic Party</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 11 / 2014</b>
Mailing Address <b>335 N Main Ave Ste 200</b>		Amount of Each Disbursement this Period <b>1300.00</b> <b>Transaction ID : VN82Y9SFWW0</b>
City <b>Sioux Falls</b> State <b>SD</b> Zip Code <b>57104-6038</b>	Purpose of Disbursement <b>Meeting &amp; Events</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lakota Building LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 07 / 2014</b>
Mailing Address <b>2029 NE 188 St</b>		Amount of Each Disbursement this Period <b>600.00</b> <b>Transaction ID : VN82Y9SFW41</b>
City <b>Aventura</b> State <b>FL</b> Zip Code <b>33180</b>	Purpose of Disbursement <b>Office Rent</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The UPS Store</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 01 / 2014</b>
Mailing Address <b>3213 W Main St</b>		Amount of Each Disbursement this Period <b>25.92</b> <b>Transaction ID : VN82Y9SFX51</b>
City <b>Rapid City</b> State <b>SD</b> Zip Code <b>57702-2314</b>	Purpose of Disbursement <b>Postage</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1925.92</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 36			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 25.00
City Chicago	State IL Zip Code 60666-0100	
Purpose of Disbursement Travel	Category/Type 001	<b>Transaction ID : VN82Y9SFXA1</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 1331 W Omaha St		Amount of Each Disbursement this Period 6.67
City Rapid City	State SD Zip Code 57701-2664	
Purpose of Disbursement Office Supplies	Category/Type 001	<b>Transaction ID : VN82Y9SFWJ1</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Real Estate Group</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 550 N 5th St		Amount of Each Disbursement this Period 348.00
City Rapid City	State SD Zip Code 57701-1375	
Purpose of Disbursement Office Rent	Category/Type 001	<b>Transaction ID : VN82Y9SFWQ1</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	379.67
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. Corinna Robinson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address 522 N Main Ave		Amount of Each Disbursement this Period 68.99 <b>Transaction ID : VN82Y9SG1Q1</b>
City Sioux Falls	State SD	
Zip Code 57104-5900	Purpose of Disbursement Travel Reimbursement	Category/ Type 002
Candidate Name <b>Corinna Robinson</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: SD District: 00	

Full Name (Last, First, Middle Initial) <b>B. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 2100.00 <b>Transaction ID : VN82Y9SFVZ1</b>
City Washington	State DC	
Zip Code 20005-5006	Purpose of Disbursement Software	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: Primary <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Corinna Robinson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address 522 N Main Ave		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : VN82Y9SGR32</b>
City Sioux Falls	State SD	
Zip Code 57104-5900	Purpose of Disbursement Reimbursement for Office Security Deposit	Category/ Type 001
Candidate Name <b>Corinna Robinson</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: SD District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2768.99
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 36		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 825 Saint Joseph St		Amount of Each Disbursement this Period 12.00
City Rapid City	State SD	
Zip Code 57701-2609	Purpose of Disbursement Bank Fees	<b>Transaction ID : VN82Y9SFXK2</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ExxonMobil Station</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 4128 Jackson Blvd		Amount of Each Disbursement this Period 61.71
City Rapid City	State SD	
Zip Code 57702-3216	Purpose of Disbursement Travel	<b>Transaction ID : VN82Y9SFFVN2</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. T K Associates International</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 821 Upper Pines Dr		Amount of Each Disbursement this Period 169.11
City Rapid City	State SD	
Zip Code 57701-2513	Purpose of Disbursement Travel Reimbursement	<b>Transaction ID : VN82Y9SG0P2</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	242.82
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. South Dakota Department of Labor</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 02 / 2014</b>
Mailing Address <b>PO Box 4730</b>		Amount of Each Disbursement this Period <b>323.75</b> <b>Transaction ID : VN82Y9SFWV2</b>
City <b>Aberdeen</b> State <b>SD</b> Zip Code <b>57402-4730</b>	Purpose of Disbursement <b>Payroll Taxes</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Target</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 28 / 2014</b>
Mailing Address <b>1415 Eglin St</b>		Amount of Each Disbursement this Period <b>11.59</b> <b>Transaction ID : VN82Y9SFX43</b>
City <b>Rapid City</b> State <b>SD</b> Zip Code <b>57701-9504</b>	Purpose of Disbursement <b>Office Supplies</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Corner Pantry</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 07 / 2014</b>
Mailing Address <b>601 Mountain View Rd</b>		Amount of Each Disbursement this Period <b>41.46</b> <b>Transaction ID : VN82Y9SFB3</b>
City <b>Rapid City</b> State <b>SD</b> Zip Code <b>57702-2518</b>	Purpose of Disbursement <b>Travel</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>376.80</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. Rapid City Area Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 444 N Mt Rushmore Rd		Amount of Each Disbursement this Period 195.00 <b>Transaction ID : VN82Y9SFWH3</b>
City Rapid City	State SD	
Zip Code 57701-2763	Purpose of Disbursement Dues & Subscriptions	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ashley Heacock</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 4500 Miracle Pl		Amount of Each Disbursement this Period 2485.50 <b>Transaction ID : VN82Y9SG1P3</b>
City Rapid City	State SD	
Zip Code 57702-6824	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Act Blue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address PO Box 441146		Amount of Each Disbursement this Period 4.36 <b>Transaction ID : VN82Y9SG7Q3</b>
City West Somerville	State MA	
Zip Code 02144-0031	Purpose of Disbursement Credit Card Processing Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2684.86
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. Allegra Design Print Mail</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 301 Main Ave		Amount of Each Disbursement this Period 311.10 <b>Transaction ID : VN82Y9SFV14</b>
City Brookings	State SD	
Zip Code 57006-1934	Purpose of Disbursement Office Supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Sue Tupper</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 5736 NE 56th St		Amount of Each Disbursement this Period 1400.00 <b>Transaction ID : VN82Y9SGR24</b>
City Seattle	State WA	
Zip Code 98105-2004	Purpose of Disbursement Campaign Consulting Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Prestige Cleaners</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 2315 Jackson Blvd		Amount of Each Disbursement this Period 52.58 <b>Transaction ID : VN82Y9SFWC4</b>
City Rapid City	State SD	
Zip Code 57702-4340	Purpose of Disbursement Cleaning	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1763.68
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 36			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. The UPS Store</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014		
Mailing Address 3213 W Main St			Amount of Each Disbursement this Period 30.53		
City Rapid City	State SD	Zip Code 57702-2314	Transaction ID : VN82Y9SFXD4		
Purpose of Disbursement Postage		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014		
Mailing Address 825 Saint Joseph St			Amount of Each Disbursement this Period 7.00		
City Rapid City	State SD	Zip Code 57701-2609	Transaction ID : VN82Y9SFXJ4		
Purpose of Disbursement Bank Fees		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. ExxonMobil Station</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014		
Mailing Address 4128 Jackson Blvd			Amount of Each Disbursement this Period 44.41		
City Rapid City	State SD	Zip Code 57702-3216	Transaction ID : VN82Y9SFVM4		
Purpose of Disbursement Travel		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	81.94
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 36			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. South Dakota Democratic Party</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 335 N Main Ave Ste 200		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VN82Y9SFWT4</b>
City Sioux Falls	State SD	
Zip Code 57104-6038	Purpose of Disbursement Database Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Lakota Building LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 2029 NE 188 St		Amount of Each Disbursement this Period 92.00 <b>Transaction ID : VN82Y9SFW25</b>
City Aventura	State FL	
Zip Code 33180	Purpose of Disbursement Utilities	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 801.00 <b>Transaction ID : VN82Y9SFX85</b>
City Chicago	State IL	
Zip Code 60666-0100	Purpose of Disbursement Travel	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1393.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. Clark Research LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2014
Mailing Address 4610 S Technopolis Dr Ste 103		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : VN82Y9SFVF5</b>
City Sioux Falls	State SD	
Zip Code 57106-4243	Purpose of Disbursement Research Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Rapid City Area Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 444 N Mt Rushmore Rd		Amount of Each Disbursement this Period 46.00 <b>Transaction ID : VN82Y9SFWG5</b>
City Rapid City	State SD	
Zip Code 57701-2763	Purpose of Disbursement Event Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Ashley Heacock</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 4500 Miracle Pl		Amount of Each Disbursement this Period 2485.50 <b>Transaction ID : VN82Y9SG1N5</b>
City Rapid City	State SD	
Zip Code 57702-6824	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6031.50
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 36			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. Act Blue</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address PO Box 441146		Amount of Each Disbursement this Period 0.21 <b>Transaction ID : VN82Y9SGR16</b>
City West Somerville	State MA	
Zip Code 02144-0031	Purpose of Disbursement Credit Card Processing Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Bech's Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 881 E Minnesota St Apt B		Amount of Each Disbursement this Period 421.40 <b>Transaction ID : VN82Y9SFFV56</b>
City Rapid City	State SD	
Zip Code 57701-6820	Purpose of Disbursement Painting Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify) Primary	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Prestige Cleaners</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2315 Jackson Blvd		Amount of Each Disbursement this Period 38.69 <b>Transaction ID : VN82Y9SFFW66</b>
City Rapid City	State SD	
Zip Code 57702-4340	Purpose of Disbursement Cleaning	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify) Primary	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	460.30
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 825 Saint Joseph St		Amount of Each Disbursement this Period 178.12 <b>Transaction ID : VN82Y9SFXH6</b>
City Rapid City	State SD	
Zip Code 57701-2609	Purpose of Disbursement Credit Card Processing Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address 825 Saint Joseph St		Amount of Each Disbursement this Period 3.00 <b>Transaction ID : VN82Y9SFXP6</b>
City Rapid City	State SD	
Zip Code 57701-2609	Purpose of Disbursement Bank Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 1331 W Omaha St		Amount of Each Disbursement this Period 8.32 <b>Transaction ID : VN82Y9SFWS6</b>
City Rapid City	State SD	
Zip Code 57701-2664	Purpose of Disbursement Office Supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	189.44
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement MM / DD / YYYY 05 / 05 / 2014
Mailing Address 1331 W Omaha St		Amount of Each Disbursement this Period 49.54 <b>Transaction ID : VN82Y9SFWY6</b>
City Rapid City	State SD	
Zip Code 57701-2664	Purpose of Disbursement Office Supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	State: District:	

Full Name (Last, First, Middle Initial) <b>B. The UPS Store</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2014
Mailing Address 3213 W Main St		Amount of Each Disbursement this Period 4.77 <b>Transaction ID : VN82Y9SFX77</b>
City Rapid City	State SD	
Zip Code 57702-2314	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	State: District:	

Full Name (Last, First, Middle Initial) <b>c. The UPS Store</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2014
Mailing Address 3213 W Main St		Amount of Each Disbursement this Period 20.54 <b>Transaction ID : VN82Y9SFXC7</b>
City Rapid City	State SD	
Zip Code 57702-2314	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	74.85
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 36			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. Corner Pantry</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 601 Mountain View Rd		Amount of Each Disbursement this Period 63.37
City Rapid City	State SD	
Zip Code 57702-2518	Purpose of Disbursement Travel	<b>Transaction ID : VN82Y9SFVE7</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 1331 W Omaha St		Amount of Each Disbursement this Period 119.19
City Rapid City	State SD	
Zip Code 57701-2664	Purpose of Disbursement Office Supplies	<b>Transaction ID : VN82Y9SFWF7</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 1331 W Omaha St		Amount of Each Disbursement this Period 42.27
City Rapid City	State SD	
Zip Code 57701-2664	Purpose of Disbursement Office Supplies	<b>Transaction ID : VN82Y9SFWM7</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	224.83
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 1331 W Omaha St		Amount of Each Disbursement this Period 257.11 <b>Transaction ID : VN82Y9SFX28</b>
City Rapid City	State SD	
Purpose of Disbursement Office Supplies	Category/ Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1331 W Omaha St		Amount of Each Disbursement this Period 37.09 <b>Transaction ID : VN82Y9SFWA8</b>
City Rapid City	State SD	
Purpose of Disbursement Office Supplies	Category/ Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 825 Saint Joseph St		Amount of Each Disbursement this Period 12.00 <b>Transaction ID : VN82Y9SFXG8</b>
City Rapid City	State SD	
Purpose of Disbursement Bank Fees	Category/ Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	306.20
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. Sue Tupper</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 5736 NE 56th St		Amount of Each Disbursement this Period 2001.50 <b>Transaction ID : VN82Y9SG2G8</b>
City Seattle	State WA	
Zip Code 98105-2004	Purpose of Disbursement Travel Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 825 Saint Joseph St		Amount of Each Disbursement this Period 76.38 <b>Transaction ID : VN82Y9SFXN8</b>
City Rapid City	State SD	
Zip Code 57701-2609	Purpose of Disbursement Credit Card Processing Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify) Primary	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 1331 W Omaha St		Amount of Each Disbursement this Period 73.19 <b>Transaction ID : VN82Y9SFWX8</b>
City Rapid City	State SD	
Zip Code 57701-2664	Purpose of Disbursement Office Supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify) Primary	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2151.07
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 36		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. The UPS Store</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 3213 W Main St		Amount of Each Disbursement this Period 25.97
City Rapid City	State SD	
Zip Code 57702-2314		
Purpose of Disbursement Postage		Category/ Type 001
Candidate Name		
Office Sought:	House Senate President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 825 Saint Joseph St		Amount of Each Disbursement this Period 0.02
City Rapid City	State SD	
Zip Code 57701-2609		
Purpose of Disbursement Bank Fees		Category/ Type 001
Candidate Name		
Office Sought:	House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. The UPS Store</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 3213 W Main St		Amount of Each Disbursement this Period 8.48
City Rapid City	State SD	
Zip Code 57702-2314		
Purpose of Disbursement Postage		Category/ Type 001
Candidate Name		
Office Sought:	House Senate President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	34.47
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Corinna for South Dakota**

Full Name (Last, First, Middle Initial) <b>A. John Gossom</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 01 / 2014</b>
Mailing Address 1001 S Prairie Ave		Amount of Each Disbursement this Period <b>1662.00</b>
City <b>Sioux Falls</b>	State <b>SD</b>	
Zip Code <b>57105-0526</b>	Purpose of Disbursement <b>Salary</b>	<b>Transaction ID : VN82Y9SG1R9</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1662.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>26044.95</b>

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : VN926BP7844L  
**Corinna for South Dakota**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Corinna Robinson</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 522 N Main Ave		

City	State	ZIP Code
Sioux Falls	SD	57104-5900

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 12 / Y 2013	M M / D D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	<input style="width: 100%;" type="text" value="20000.00"/>
<b>TOTALS</b> This Period (last page in this line only).....	<input style="width: 100%;" type="text" value="20000.00"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	