

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
South Dakota Democratic Party

ADDRESS (number and street) 207 East Capitol Suite 103  
 Check if different than previously reported. (ACC)  
Pierre SD 57501

2. **FEC IDENTIFICATION NUMBER** C00160937  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2006 through 07 31 2006

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 Bill Nibbelink  
Signature of Treasurer Electronically Filed by Bill Nibbelink Date 08 21 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
South Dakota Democratic Party

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		97068.40
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	11018.45									
(c) Total Receipts (from Line 19) .....	16308.44	219589.01								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	27326.89	316657.41								
7. Total Disbursements (from Line 31) .....	16918.05	306248.57								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	10408.84	10408.84								
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) .....	715.33									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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**

Write or Type Committee Name  
South Dakota Democratic Party

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	3261.00	54582.00
(i) Itemized (use Schedule A) .....	847.44	43732.55
(ii) Unitemized .....	4108.44	98314.55
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	1200.00	40075.00
(c) Other Political Committees (such as PACs) .....	5308.44	138389.55
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	4500.00	58256.72
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	813.69
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	6500.00	22129.05
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	6500.00	22129.05
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	16308.44	219589.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9808.44	197459.96

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	194.25	9246.06
(ii) Non-Federal Share.....	1100.75	52351.72
(b) Other Federal Operating Expenditures.....	7403.17	35822.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	8698.17	97419.88
22. Transfers to Affiliated/Other Party Committees.....	0.00	100000.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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	525.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	525.00
29. Other Disbursements.....	5423.00	64021.60
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	2796.88	44282.09
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	2796.88	44282.09
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	16918.05	306248.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	15817.30	253896.85

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	5308.44	138389.55
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	525.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5308.44	137864.55
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7597.42	45068.16
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7597.42	45068.16

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
South Dakota Democratic Party

**A.** Full Name (Last, First, Middle Initial)  
Tony Doom

Mailing Address 26022 231st Avenue

City State Zip Code  
Marshall MN 56258-5461

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

Name of Employer Tony Doom Supply Co. Occupation Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1130.00

Date of Receipt  
MM / DD / YYYY  
07 / 12 / 2006

Transaction ID: 11 ai-000066895

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Glen Rice

Mailing Address 350 N Summit

City State Zip Code  
Sioux Falls SD 57104

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

Name of Employer Federal Aviation Administration Occupation Air Traffic Controller

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 347.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2006

Transaction ID: 11 ai-000066916

Amount of Each Receipt this Period  
42.00

**C.** Full Name (Last, First, Middle Initial)  
Carol Andersons

Mailing Address 1109 Lakewood Drive

City State Zip Code  
Pierre SD 57501

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

Name of Employer Best Effort Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2006

Transaction ID: 11 ai-000066896

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	292.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 20
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
South Dakota Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Elaine Whittlesy		Date of Receipt M M / D D / Y Y Y Y Y 07 / 27 / 2006	
Mailing Address 24933 Big Valley Trail		<b>Transaction ID:</b> 11 ai-000066902	
City State Zip Code Custer SD 57730		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 730.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Judy Duhamel		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 1106 Hyland Dr.		<b>Transaction ID:</b> 11 ai-000066889	
City State Zip Code Rapid City SD 57701		Amount of Each Receipt this Period 1400.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2405.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ted McBride		Date of Receipt M M / D D / Y Y Y Y Y 07 / 10 / 2006	
Mailing Address 1601 West Blvd		<b>Transaction ID:</b> 11 ai-000066911	
City State Zip Code Rapid City SD 57701-4553		Amount of Each Receipt this Period 84.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self-Employed Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 504.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1734.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
South Dakota Democratic Party

**A.** Full Name (Last, First, Middle Initial)  
Harold J. Schaunaman

Mailing Address 12108 389Th Ave

City State Zip Code  
Westport SD 57481

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

Name of Employer Self employed Occupation Farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 705.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2006

Transaction ID: 11 ai-000066898

Amount of Each Receipt this Period  
100.00

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

Mailing Address 36 Lincoln

City State Zip Code  
Deadwood SD 57732

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

Name of Employer Franklin Hotel Occupation Hotel Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2006

Transaction ID: 11 ai-000066897

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
John McIntyre

Mailing Address 3204 S Jefferson Ave

City State Zip Code  
Sioux Falls SD

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

Name of Employer Best Effort Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2006

Transaction ID: 11 ai-000066912

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **650.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
South Dakota Democratic Party

Full Name (Last, First, Middle Initial) <b>A. Dennis Langley</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 13137 Thunderhead Falls Lane		<b>Transaction ID: 11 ai-000066891</b>	
City State Zip Code Rapid City SD 57702		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Management Resource Group		Occupation Ceo	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5310.00	

Full Name (Last, First, Middle Initial) <b>B. Gayle Bussell</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2006	
Mailing Address Po Box 442		<b>Transaction ID: 11 ai-000066899</b>	
City State Zip Code Huron SD 57350		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Comm 1st St. Bank		Occupation Banker/Cashier	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Bret Healy</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 10 / 2006	
Mailing Address Box 672		<b>Transaction ID: 11 ai-000066905</b>	
City State Zip Code Frederick SD 57441		Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Four Directions Committee		Occupation Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 510.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	335.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 20						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
South Dakota Democratic Party

**A.** Full Name (Last, First, Middle Initial)  
Lawrence Hogan

Mailing Address 1936 Fulton St

City State Zip Code  
Sturgis SD 57785

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

Name of Employer Occupation  
na Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	0	/	2	0	0	6

Transaction ID: 11ai-000066900

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	3261.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 20
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
South Dakota Democratic Party

**A.** Full Name (Last, First, Middle Initial)  
Communication Workers of America

Mailing Address 501 3rd Street NW

City State Zip Code  
Washington DC 20001

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	8	/	2	0	0	6

**Transaction ID:** 11c-000066903

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
BellSouth FED-PAC

Mailing Address 1155 Peachtree Street NE

City State Zip Code  
Atlanta GA 30309

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	0	/	2	0	0	6

**Transaction ID:** 11c-000066892

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1200.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 20
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
South Dakota Democratic Party

**A.** Full Name (Last, First, Middle Initial)  
DNC-ASDC Dollars for Democrats

Mailing Address 430 South Capitol SE

City	State	Zip Code
Washington	DC	20003

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

Name of Employer	Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 12 / 2006

**Transaction ID:** 12-01-01069-02077

Amount of Each Receipt this Period  
4500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	4500.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
South Dakota Democratic Party

Full Name (Last, First, Middle Initial) <b>A. Tony Doom Supplies Inc</b>		<b>Transaction ID:</b> 21b-01-01083-02092 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 6
Mailing Address PO Box 252		Amount of Each Disbursement this Period 989.02
City Marshall State MN Zip Code 56258	Category/ Type	
Purpose of Disbursement club pins not for a federal candidate 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) ▼		

Full Name (Last, First, Middle Initial) <b>B. Curt Merriman Printing, Inc.</b>		<b>Transaction ID:</b> 21b-01-01029-02014 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address PO Box 1046		Amount of Each Disbursement this Period 6200.00
City Pierre State SD Zip Code 57501	Category/ Type	
Purpose of Disbursement printing - not for a federal candidate 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) ▼		

Full Name (Last, First, Middle Initial) <b>C. Meyer Associates, INC.</b>		<b>Transaction ID:</b> 21b-01-01030-02015 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address 14 North 7th Ave		Amount of Each Disbursement this Period 214.15
City Saint Cloud State MN Zip Code 56301	Category/ Type	
Purpose of Disbursement event calls -not for a federal candidate 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) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>7403.17</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>7403.17</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
South Dakota Democratic Party

Full Name (Last, First, Middle Initial) <b>A. SDDP State Operating Account</b>		<b>Transaction ID:</b> 29-01-01076-02085 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 7 / 2 0 0 6
Mailing Address 207 East Capitol		Amount of Each Disbursement this Period 1748.00
City Pierre State SD Zip Code 57501		
Purpose of Disbursement Contribution to non-federal account	<input type="checkbox"/> Category/Type	
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. SDDP State Operating Account</b>		<b>Transaction ID:</b> 29-01-01077-02086 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 6
Mailing Address 207 East Capitol		Amount of Each Disbursement this Period 2800.00
City Pierre State SD Zip Code 57501		
Purpose of Disbursement Contribution to non-federal account	<input type="checkbox"/> Category/Type	
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. SDDP State Operating Account</b>		<b>Transaction ID:</b> 29-01-01081-02090 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 6
Mailing Address 207 East Capitol		Amount of Each Disbursement this Period 375.00
City Pierre State SD Zip Code 57501		
Purpose of Disbursement Contribution to nonfederal account	<input type="checkbox"/> Category/Type	
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4923.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
South Dakota Democratic Party

Full Name (Last, First, Middle Initial)  
**A.** SDDP State Operating Account

Mailing Address 207 East Capitol

City Pierre State SD Zip Code 57501

Purpose of Disbursement  
Contribution to nonfederal account

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 29-01-01082-02091

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
South Dakota Democratic Party

Full Name (Last, First, Middle Initial) <b>A. Wellmark Blue Cross</b>		<b>Transaction ID:</b> 30b-01-01026-02011 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 6
Mailing Address 1601 West Madison		Amount of Each Disbursement this Period 308.06
City State Zip Code Sioux Falls SD 57104	Purpose of Disbursement Health Insurance	
Candidate Name		Category/ Type
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jason Schulte</b>		<b>Transaction ID:</b> 30b-03-00183-00193 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 6
Mailing Address 103 South Poplar Street #4		Amount of Each Disbursement this Period 1266.91
City State Zip Code Pierre SD 57501	Purpose of Disbursement Salary	
Candidate Name		Category/ Type
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Donald Carr</b>		<b>Transaction ID:</b> 30b-03-00184-00194 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 6
Mailing Address 234 Meriwether Lane		Amount of Each Disbursement this Period 1221.91
City State Zip Code Pierre SD 57501	Purpose of Disbursement Salary	
Candidate Name		Category/ Type
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2796.88
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	2796.88

**SCHEDULE D (FEC Form 3X)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 17 / 20	
	FOR LINE NUMBER: (check only one)	
	<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 South Dakota Democratic Party

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor State Bank of Alcester	Nature of Debt (Purpose): Credit Card
Mailing Address P.O. Box 168	
City State ZIP Code Alcester SD 57001	

Outstanding Balance Beginning This Period <input type="text" value="715.33"/>	<b>Transaction ID: 10-000001</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="715.33"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor State Bank of Alcester Visa	Nature of Debt (Purpose): Credit Card
Mailing Address PO Box 77042	
City State ZIP Code Madison WI 77042	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID: 10-000009</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor State Bank of Alcester Visa	Nature of Debt (Purpose): Credit Card
Mailing Address PO Box 77042	
City State ZIP Code Madison WI 77042	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID: 10-000010</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="715.33"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text" value="715.33"/>
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 South Dakota Democratic Party

NAME OF ACCOUNT SDDP State Operating Account	DATE OF RECEIPT M M / D D / Y Y Y Y 0 7 / 1 0 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 5000.00
---	---	-------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	5000.00	Transaction ID: H318a-01-01068
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 South Dakota Democratic Party

NAME OF ACCOUNT SDDP State Operating Account	DATE OF RECEIPT M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 1500.00
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	1500.00	Transaction ID: H318a-01-01073
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	6500.00
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	6500.00

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
South Dakota Democratic Party

<b>A. Full Name (Last, First, Middle Initial)</b> Biltmore & Associates INC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4200 S. Louise Ave.   Suite 105			Allocated Activity or Event Year-To-Date 60897.53		
City Sioux Falls	State SD	Zip Code 57106	Category/ Type	Date MM / DD / YYYY 07 / 05 / 2006	
Purpose of Disbursement: Office Rent				Transaction ID: 21a-01-01027-02012	
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
93.75		531.25		625.00

<b>B. Full Name (Last, First, Middle Initial)</b> Oahe Storage			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 22			Allocated Activity or Event Year-To-Date 60967.53		
City Pierre	State SD	Zip Code 57501	Category/ Type	Date MM / DD / YYYY 07 / 06 / 2006	
Purpose of Disbursement: storage rent				Transaction ID: 21a-01-01028-02013	
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.50		59.50		70.00

<b>C. Full Name (Last, First, Middle Initial)</b> Reis, April			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 571			Allocated Activity or Event Year-To-Date 61567.53		
City Reliance	State SD	Zip Code 57569	Category/ Type	Date MM / DD / YYYY 07 / 19 / 2006	
Purpose of Disbursement: Milage				Transaction ID: 21a-01-01031-02016	
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.00		510.00		600.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
194.25		1100.75		1295.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
194.25		1100.75		1295.00