

Secretary of State State of North Dakota 600 E Boulevard Ave Dept 108 Bismarck ND 58505-0500 701-328-4146 Telephone Toll Free 800-352-0867 701-328-3413 Fax

Web Site: www.nd.gov/sos/electvote

SEE BACK PAGE FOR INSTRUCTIONS

Business Owner

Other

Laborer

X Professional

Refe	erences to the Statement of Interests are found in North Dakota Century Code, Chapter 16.1-09.				
	FILING REQUIREMENTS FOR STATEMENT OF INTERES	TS			
1.	Every candidate for elective office shall file a Statement of Interests with the appropriate filing officer with who of Endorsement SFN 17196 or Petition/Certificate of Nomination SFN 2704.	om the candidate filed his/her Certificate			
	a. Candidates for President and Vice President of the United States shall file with the Secretary of State ei required by Chapter 16.1-09 of the North Dakota Century Code or a copy of the personal disclosure stat Commission.				
	b. Candidates for statewide office shall file with the Secretary of State.				
	c. Candidates for legislative office shall file with the Secretary of State.				
	 d. Candidates for Garrison Conservancy and Soil Conservation district shall file with the County Auditor in e. Candidates for District Judge shall file with the Secretary of State. 	their county of residence.			
	f. Candidates for county offices shall file with the County Auditor.				
	g. Candidates for city offices shall file with the City Auditor.				
	h. Candidates for school district offices shall file with the School Business Manager of the school district.				
	The Statement of Interests shall be filed at the same time a Petition/Certificate of Nomination or Certificate of Endorsement is filed.				
Candidates filing a Statement of Interests for the primary election need not refile for the general election.					
2.	Every person appointed by the Governor to a state agency, board, bureau, commission, department, or occupation or professional licensing board shall file a Statement of Interests with the Secretary of State no later than the announcement of the appointment.				
Plea	ase refer to the instructions provided on back of the Statement of Interests for answering specific questions bet	fore completing this form.			
	ase print	oup as to come of contract of the contract of			
	me (Name of candidate or appointee)	Telephone Number			
3	Sarah Ricks	216-916-6661			
Spc	ouse's name				

Marc Ricks State Zip Code Dickinson 1005 5th Avenue West DN 58601 Office which candidate is seeking Position to which appointed OR Dickinson School Board Member ITEM A Name of business or employer: NIA stay-at-home mother PRINCIPAL OCCUPATION/SOURCE OF INCOME (Check One) Farmer Military Investor or Retired Government Employee Clerical & Sales Professional **Business Owner** Laborer Student Craftsman Other Name of business or employer: Sanford Health of Dickinson SPOUSE'S PRINCIPAL OCCUPATION/SOURCE OF INCOME (Check One) Farmer Military Investor or Retired Clerical & Sales Government Employee

Craftsman

Student

Please print

ITEM B

List the name of each business or trust that is NOT the principal source of income, in which you and/or your spouse have a financial interest.

Place an "X" to indicate the interested party. Specific dollar amounts not required.

[BUSINESS NAME OR TRUST NAME (list city and state where located)]		SPOUSE
EXAMPLE/Make Me A Lot of Money Investment Co. (Mutual Funds) Bismarck, ND	X	X
Met Life - T. Rowe Price Retirement Investments Hartford CT		X
		1 3
		11
		1
		9.75
		2 12

ITEM C

List below the associations or institutions with which you, and/or your spouse are closely associated, or serve as a director or officer, AND which may be affected by legislative action (for legislative candidates), or action of the officeholder of the office to which you are a candidate or appointee.

Place an "X" to indicate the interested party.

ASSOCIATION OR INSTITUTION	1 - ST - DN: N	CAPACITY	SELF	SPOUSE
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		Listants MV		
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				1

Please print

ITEM D

Identify below by name, any business offices, business directorships, and fiduciary re	elationships that	Place an "V"	to indicate					
you and/or your spouse have held in the preceding year. Place an "X" to the interested			ted party.					
[BUSINESS OR TRUST (list city and state where located)]	CAPACITY	SELF	SPOUSE					
NONE		-	_					
			4:					
-								
AFFIRANCE	J							
AFFIDAVIT (Sign before a commissioned	Notary)							
I, the undersigned, declare this Statement of Interests has been examined by me and to the best of my knowledge is a true, correct, and complete statement of my financial interests. I understand any intentional violation of the law requiring the filing of this statement shall result in my being deprived of my appointment or assuming the duties of the elective office.								
Signature of candidate or appointee								
State ofOrth Dutota County of Stark								
Subscribed and sworn to before me this day of (arch	, 20 14.							

LAURIE A ZASTOUPIL

NOTARY PUBLIC, STATE OF NORTH DAKOTA

MY COMMISSION EXPIRES AUG 10, 2017

Signature of Notarial Officer

INSTRUCTIONS FOR STATEMENT OF INTERESTS

WHO FILES: The Statement of Interests must be filed by all candidates seeking to have their name placed on the ballot for federal, statewide, judicial district, legislative, county, multi-district, city, and school district office. Every person appointed by the Governor to a state agency, board, bureau, commission, department, or occupation or professional licensing board shall also file a Statement of Interests.

WHEN TO FILE: Every candidate for elective office must file a Statement of Interests with the appropriate filing officer at the same time as filing his/her Certificate of Endorsement SFN 17196 or Petition/Certificate of Nomination SFN 2704 and Affidavit of Candidacy SFN 2703. Appointees of the Governor shall file a Statement of Interests no later than the announcement of the appointment.

WHERE TO FILE:

FEDERAL, STATEWIDE, JUDICIAL, AND LEGISLATIVE DISTRICT CANDIDATES - File with the Secretary of State

Secretary of State State of North Dakota 600 E Boulevard Ave Dept 108 Bismarck ND 58505-0500

APPOINTEES OF THE GOVERNOR - File with the Secretary of State
COUNTY AND MULTI-DISTRICT CANDIDATES - File with the County Auditor in their county of residence
CITY CANDIDATES - File with the City Auditor
SCHOOL DISTRICT CANDIDATES - File with the School Business Manager

HOW TO FILE:

ITEM A - PRINCIPAL OCCUPATION: The occupations listed are those defined on the North Dakota state income tax return. Check only one category for the principal source of income for yourself, and only one for your spouse. Please mark and complete the box labeled "Other" if you or your spouse's occupation is not listed.

ITEM B - List by name each business or trust that is NOT the principal source of income, in which you and/or your spouse have a financial interest. Include any of the following that apply:

- 1. Any business or trust in which you and/or your spouse own a legal or equitable interest.
- 2. Any business or trust in which you and/or your spouse have investments. Include the name of the business or trust of which you have stocks, mutual funds, bonds, debentures, or debt obligations of corporations and/or municipal corporations. Financial interests that are contained in diversified portfolios need only be mentioned by the brokerage establishment it is with.
- 3. Any business or trust from which you and/or your spouse receive compensation.
- 4. Any business or trust paying you and/or your spouse a fee or commission for professional or consulting services. Include those public agencies from which you and/or your spouse received a fee or commission. Attorneys and others who list their principal occupation as "professional" are not required to list clients.
- 5. Public agencies (state or local) to which you and/or your spouse sold goods or services.

ITEM C - List the associations or institutions with which you and/or your spouse are closely associated, or serve as a director or officer of, and which may be affected by legislative action (for legislative candidates) or action of the office holder of the office to which you are a candidate or appointee.

List organizations and associations and note the capacity of you and/or your spouse's relationship such as "member", "board of directors", "consultant", etc.

ITEM D - Identify by name any business office, business directorship, and fiduciary relationship that you and/or your spouse have held in the preceding calendar year.

Fiduciary means acting as a guardian, trustee, executor, administrator, or conservator for any person, whether individual or corporate. Specify the capacity of the relationship of you and/or your spouse for any of the listed businesses, trusts and/or fiduciary relationships, such as "director", "executor", "trustee", etc.

SPECIAL NOTES:

Items B, C and D of this form have limited space for listing items. If you need more space, attach additional sheets in the same format and clearly identify which of the three items (B, C or D) the additional sheet continues. Insert the additional sheets into this form.

Use an "X" to indicate the "interest" relationship for (a) yourself, or (b) your spouse.

You are not required to list dollar amounts or the nature of the work performed in ITEMS B, C or D.

ASSISTANCE: Questions regarding the Statement of Interests may be directed to the Elections Division of the Secretary of State's Office at (701) 328-4146 or (800) 352-0867 or the appropriate filing officer.