



STATEMENT OF INTERESTS
 SECRETARY OF STATE
 SFN 10172 (08-13)

Secretary of State
 State of North Dakota
 600 E Boulevard Ave Dept 108
 Bismarck ND 58505-0500
 Telephone 701-328-4146
 Toll Free 800-352-0867
 Fax 701-328-3413
 Web Site: www.nd.gov/sos/electvote

SEE BACK PAGE FOR INSTRUCTIONS

References to the Statement of Interests are found in North Dakota Century Code, Chapter 16.1-09.

FILING REQUIREMENTS FOR STATEMENT OF INTERESTS

1. Every candidate for elective office shall file a Statement of Interests with the appropriate filing officer with whom the candidate filed his/her Certificate of Endorsement SFN 17196 or Petition/Certificate of Nomination SFN 2704.
 - a. Candidates for President and Vice President of the United States shall file with the Secretary of State either a Statement of Interests as required by Chapter 16.1-09 of the North Dakota Century Code or a copy of the personal disclosure statement required by the Federal Election 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 their county of residence.
 - e. Candidates for District Judge shall file with the Secretary of State.
 - 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.

Please refer to the instructions provided on back of the Statement of Interests for answering specific questions before completing this form.

Please print

Name (Name of candidate or appointee) Sarah Ricks		Telephone Number 701-495-4446 216-916-6661	
Spouse's name Marc Ricks			
Address 1005 5th Avenue West		City Dickinson	State ND
		Zip Code 58601	

Office which candidate is seeking Dickinson School Board Member	OR	Position to which appointed
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ITEM A

Name of business or employer: N/A stay-at-home mother	
PRINCIPAL OCCUPATION/SOURCE OF INCOME (Check One)	
<input type="checkbox"/> Farmer	<input type="checkbox"/> Military
<input type="checkbox"/> Business Owner	<input type="checkbox"/> Laborer
<input type="checkbox"/> Other _____	<input type="checkbox"/> Investor or Retired
	<input type="checkbox"/> Professional
	<input type="checkbox"/> Clerical & Sales
	<input type="checkbox"/> Craftsman
	<input type="checkbox"/> Government Employee
	<input type="checkbox"/> Student

Name of business or employer: Sanford Health of Dickinson	
SPOUSE'S PRINCIPAL OCCUPATION/SOURCE OF INCOME (Check One)	
<input type="checkbox"/> Farmer	<input type="checkbox"/> Military
<input type="checkbox"/> Business Owner	<input type="checkbox"/> Laborer
<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Professional
	<input type="checkbox"/> Investor or Retired
	<input type="checkbox"/> Clerical & Sales
	<input type="checkbox"/> Craftsman
	<input type="checkbox"/> Government Employee
	<input type="checkbox"/> Student

Please print

ITEM D

Identify below by name, any business offices, business directorships, and fiduciary relationships that you and/or your spouse have held in the preceding year.

Place an "X" to indicate the interested party.

[BUSINESS OR TRUST (list city and state where located)]	CAPACITY	SELF	SPOUSE
NONE	—	—	—

AFFIDAVIT
(Sign before a commissioned Notary)

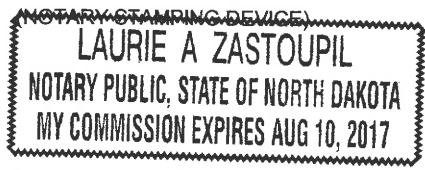
I, the undersigned, declare this Statement of Interests has been examined by me and to the best of my knowledge is a true, correct, and complete statement of my financial interests. I understand any intentional violation of the law requiring the filing of this statement shall result in my being deprived of my appointment or assuming the duties of the elective office.

[Signature]
Signature of candidate or appointee

State of North Dakota
County of Stark

Subscribed and sworn to before me this 5 day of March, 20 14.

[Signature]
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 officeholder 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.