

**City of Sioux Falls  
Statement of Financial Interest  
Candidate for Public Office**

RECEIVED  
CITY CLERK'S OFFICE  
3/14/14 12 NOON  
Date Time

File statement within 15 days after filing nominating petitions. File additions or corrections within 15 days after taking office.

- 1. Name Christine M. Erickson
- 2. Address 1109 Hyannis Port Ln
- 3. Phone Number 605-366-5377
- 5. Office Sought Sioux Falls City Council At-Large 'B'
- 6. What is your occupation/profession? State Representative District 11, Stay at home mother, small business owner-rental property

7. List any enterprise which accounted for more than 10 percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise.

What is the nature of your immediate family's association with each? The value of the financial interest need not be reported.

Erickson Properties LLC  
State of South Dakota  
Hegg Realtors

Owner  
Employee (State Representative)  
1099

8. List any enterprise in which you, your spouse, or minor children living at home control more than 10 percent of the capital or stock. Identify who has the ownership interest in each enterprise.

What is the nature of your immediate family's association with each?

State of South Dakota )  
  ) SS  
County of Minnehaha )

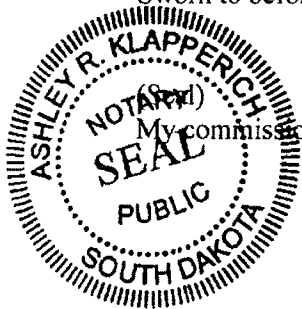
Verification

I have reviewed paragraphs 1 through 8 of the Information Regarding Statement of Financial Interest (attached), my Statement of Financial Interest, and certify that the information reported is a complete, true, and accurate representation of my financial interests for the preceding calendar year.

(Signed) Christine M. Erickson

Sworn to before me this 14<sup>th</sup> day of March, 20 14.

Ashley R. Klapperich  
Officer Administering Oath



My commission expires: 02/12/2020

Submit Statement of Organization to:  
City Clerk's Office  
235 West Tenth Street  
Sioux Falls, SD 57117-7402  
or fax to (605) 367-8070 or email to [clerks@siouxfalls.org](mailto:clerks@siouxfalls.org)

Fax and email images must contain the signature(s) and the original must be filed in our office within one week following the date the fax/email was received.