

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

RECEIVED
CITY CLERK'S OFFICE
3/4/14 4:05 p.m.
Date Time

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

1. Name Kiley For Council
 2. Address 3809 S. Lissanne Ave., Sioux Falls, SD 57103
 3. Phone Number 605-359-4501 4. E-Mail Address kick.riley@sio.midco.net
 5. Office Sought SE District City Council
 6. What is your occupation/profession? Retired Teacher/Safety Specialist

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.

- South Dakota Safety Council
South Dakota Retirement
Sioux Falls School District
Avera McKennan Hospital
American Enterprise Investment Services

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

- Rick - Salary
Rick - Retirement
Rick - Early Retirement Bonus
Donna - Salary
Rick + Donna - Investments

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) Richard D. Kiley

Sworn to before me this 3rd day of March, 2014.

Georgia Hanson
 Officer Administering Oath

(Seal)

My commission expires: 9-30-2018

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

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.