REGISTRATION AND STATEMENT OF ORGANIZATION

			New Registration	🔀 Amendment	
1. } 2. [3. [elective offic Political Co	es) (See regis mmittee (See	stration form instructions.) C	on, Brooklyn Park, & Minneapolis, or l omplete Items 4-10 and 12-13. ns.) Complete items 4-7, 10, 12-13. omplete items 4-7, 10-13.	Hennepin County Government
4.	NAME OF COMM	ITTEE OR FUND	: When you become	EU CABANNIA	
5.	Mailing Address of Committee or Fund (Include City, State, Zip Code):				
6.	E-Mail Addres	s:			
7.	TELEPHONE OF	COMMITTEE OR	Fund:		
8.				Jillia Pessenda	Received by Hennepin Ceur Taxpayer Services
	CANDIDATE'S PH	HONE:			FEB 0.2. 2017
9.	OFFICE SOUGHT			·	Log <u>DB</u>
· 	Bloomington:	☐ Mayor	Council District No	:	Cas f
	Brooklyn Park:	☐ Mayor	Council District No.		
	Minneapolis:	☐ Mayor	Council Ward No.	Library Board	Park Board District No.
		Minneap	olis School District #1 Distri	ct No.(1-6 OR at Large)	☐ Board of Estimate/Taxation
	Hennepin County:	☐ Attorney	Sheriff vers Park District No	☐ Commissioner District No	
10.	COMMITTEE OFF	ICERS:	NAME	MAILING ADDRESS FOR COMMITTEE BU	SINESS PHONE
	Chair:				
	Treasurer:				
				E-mail address	
	Deputy Treasu	ırer (if any): _	· · · · · · · · · · · · · · · · · · ·		
11.	Associations Supporting a Political Fund:				
12.	DEPOSITORY/BANK (Location of Committee Funds):				
	Address:				
13.	CERTIFICATION: Any individual who signs and certifies to be true a statement which the individual knows contains false information or who knowingly omits required information is guilty of a gross misdemeanor.				
	1, (Print Name) Elizabeth Loeb , The Treasurer CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS COMPLETE, TRUE AND CORRECT. Once submitted, all information within this form is public data.				
			e of Treasurer)		/ <u>/</u>