

# REGISTRATION AND STATEMENT OF ORGANIZATION

(All data on this form is public information.)

☐ New Registration

☒ Amendment

1. ☒ **Principal Campaign Committee** (Cities of Bloomington & Minneapolis, or Hennepin County Government elective offices) (See registration form instructions.) Complete Items 4-10 and 12-13.  
2. ☐ **Political Committee** (See registration form instructions.) Complete items 4-7, 10, 12-13.  
3. ☐ **Political Fund** (See registration form instructions.) Complete items 4-7, 10-13.

4. NAME OF COMMITTEE OR FUND: Allen Aybogan for City Council

5. MAILING ADDRESS OF COMMITTEE OR FUND (Include City, State, Zip Code):

2329 S. 9th St #422, Minneapolis, MN 55406

6. E-MAIL ADDRESS: allen.aybogan@allenforminneapolis.com

7. TELEPHONE OF COMMITTEE OR FUND: 763-228-1047

8. NAME OF CANDIDATE - If Principal Campaign Committee: Allen Aybogan

CANDIDATE'S ADDRESS: 2329 S 9th St #422 Minneapolis, MN 55406

CANDIDATE'S PHONE: 763-228-1047

Received by Hennepin County  
Taxpayer Services

9. OFFICE SOUGHT OR HELD BY CANDIDATE:

Bloomington: ☐ Mayor ☐ Council District No. \_\_\_\_\_

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Minneapolis: ☐ Mayor ☒ Council Ward No. 2  
☐ Minneapolis Special School District No. 1

☐ Library Board ☐ Park Board District No. \_\_\_\_\_  
☐ Board of Estimate/Taxation

Hennepin County: ☐ Attorney ☐ Sheriff

☐ Commissioner District No. \_\_\_\_\_

☐ Three Rivers Park District No. \_\_\_\_\_

☐ Soil and Water Conservation District No. \_\_\_\_\_

10. COMMITTEE OFFICERS: NAME MAILING ADDRESS FOR COMMITTEE BUSINESS PHONE

Chair: Allen Aybogan 2329 S 9th St #422, Mpls, MN 763-228-1047

Treasurer: Allen Aybogan 2329 S 9th St #422, mpls, MN 763-228-1047

E-mail address allen.aybogan@allenforminneapolis.com

Deputy Treasurer (if any): \_\_\_\_\_

11. ASSOCIATIONS SUPPORTING A POLITICAL FUND: \_\_\_\_\_

12. DEPOSITORY/BANK (Location of Committee Funds): Wells Fargo National Bank

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.

I, (Print Name) Allen Aybogan, 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.

Allen Aybogan  
(Signature of Treasurer)

10/08/09  
(Date)