

# REGISTRATION AND STATEMENT OF ORGANIZATION

☒ New Registration

☐ Amendment

1. ☒ **Principal Campaign Committee** (Cities of Bloomington, Brooklyn Park, & 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: Northside Neighbors for Cunningham

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

6. E-MAIL ADDRESS: cunningham@northsideneighborsforcunningham.com

7. TELEPHONE OF COMMITTEE OR FUND: 612-430-5157

8. NAME OF CANDIDATE - If Principal Campaign Committee: Phillipe Cunningham

CANDIDATE'S ADDRESS: [REDACTED] 55412

CANDIDATE'S PHONE: 612-430-5157

9. OFFICE SOUGHT OR HELD BY CANDIDATE:

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

Brooklyn Park: ☐ Mayor ☐ Council District No. \_\_\_\_\_

Minneapolis: ☐ Mayor ☒ Council Ward No. 4 ☐ Library Board ☐ Park Board District No. \_\_\_\_\_

☐ Minneapolis School District #1 District No. (1-6 OR at Large) \_\_\_\_\_ ☐ Board of Estimate/Taxation

Hennepin County: ☐ Attorney ☐ Sheriff ☐ Commissioner District No. \_\_\_\_\_

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

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Taxpayer Services

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

Chair: Phillipe Cunningham [REDACTED] 612-430-5157

Treasurer: Phillipe Cunningham [REDACTED] 612-430-5157

E-mail address phillipe.cunningham@gmail.com

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

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

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

Address: 4141 Lyndale Ave N, Minneapolis, MN 55412

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) Phillipe Cunningham, 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.

Phillipe M. Cunningham  
(Signature of Treasurer)

11/28/16  
(Date)