## **REGISTRATION AND STATEMENT OF ORGANIZATION**

8. Name of Candidate - If Principal Campaign Committee: Kerneth Forwarth  Candidate's Address: 1859 Vincent Avenue North Highs, MNN 55411  Candidate's Phone: 18-799-35-73  9. Office Sought or Held by Candidate: Bloomington: Mayor Council District No  Brooklyn Park: Mayor Council District  Minneapolis: Mayor Council Ward No. 5 Library Board Park Board District No  Minneapolis School District #1 District No.(1-6 OR at Large) Board of Estimate/Taxation  Hennepin Attorney Sheriff Commissioner District No  Three Rivers Park District No Hennepin Conservation District No  10. Committee Officers: Name Mailing Address for Committee Business Phone  Chair: Gragery Gray 507 Call Park Avenue N Highs, Nin 56411 317-3270				💢 New Re	gistration		☐ Amendm	ent			
5. MAILING ADDRESS OF COMMITTEE OR FUND; P.O. SON 11414 MINNE ADDRESS; MAR 2 0 2013  6. E-MAIL ADDRESS: MAR 2 0 2013  7. TELEPHONE OF COMMITTEE OR FUND; b 12 - 2 09 - 83 8 3 Log DB PM DFL 3  8. NAME OF CANDIDATE - If Principal Campaign Committee: Principal Campaign Campaign Campaign Campaign Campaign Committee: Principal Campaign Camp	2. [	registration for Political Con	orm instruction nmittee (See	ns.) Complete Ite registration form	ems 4-10 and finistructions.)	12-13. Complete	tems 4-7, 10, 1		nment electi	ve offic	es) (See
5. MAILING ADDRESS OF COMMITTEE OR FUND; P.O. SON 11414 MINNE ADDRESS; MAR 2 0 2013  6. E-MAIL ADDRESS: MAR 2 0 2013  7. TELEPHONE OF COMMITTEE OR FUND; b 12 - 2 09 - 83 8 3 Log DB PM DFL 3  8. NAME OF CANDIDATE - If Principal Campaign Committee: Principal Campaign Campaign Campaign Campaign Campaign Committee: Principal Campaign Camp	4.	NAME OF COMMIT	TTEE OR FUND:	Friends	for Ken	Foxwar	th	Rec	eived by	Mann	onim O
6. E-MAIL ADDRESS:  7. TELEPHONE OF COMMITTEE OR FUND:  8. NAME OF CANDIDATE - If Principal Campaign Committee:  CANDIDATE'S ADDRESS:  1659 Vingent Avenue North, Mpls, INN 56411  CANDIDATE'S ADDRESS:  1659 Vingent Avenue North, Mpls, INN 56411  CANDIDATE'S ADDRESS:  1659 Vingent Avenue North, Mpls, INN 56411  CANDIDATE'S PHONE:  1613-799-35-73  9. OFFICE SOUGHT OR HELD BY CANDIDATE: Bloomington: Mayor   Council District No.  Brooklyn Park: Mayor   Council District No.    Minneapolis: Mayor   Council District #1 District No.(1-6 OR at Large)   Board of Estimate/Taxation    Hennepin   Attorney   Sheriff   Commissioner District No.    Three Rivers Park District No.   Hennepin Conservation District No.  10. COMMITTEE OFFICERS: NAME   MAILING ADDRESS FOR COMMITTEE BUSINESS   PHONE  Chair: Greak Gray 50.7 Call fact Avenue N   Mpls, NN 55411   317-3270  Treasurer: Daphane Breaussaus   P. O. 8 & 11367   Mpls, INN 5541   317-3270  E-mail address  Deputy Treasurer (if any):  11. ASSOCIATIONS SUPPORTING A POLITICAL FUND:  12. DEPOSITORY/BANK (Location of Committee Funds): Address:   JSD   June 1851   Jun		Mailing Addres	S OF COMMITT	EE OR FUND (Inclu	ide City, State	. Zip Code):	p Code):		Taxpayer Services		
Name of Candidate - If Principal Campaign Committee:   Kring th   Fouwarth	6.					•			MAR	20	2013
8. NAME OF CANDIDATE - If Principal Campaign Committee: Kenneth Follows the Candidate's Address: 1859 Vingent Avenue North Hopks, MAN S6411  CANDIDATE'S ADDRESS: 1859 Vingent Avenue North Hopks, MAN S6411  CANDIDATE'S PHONE: 1859 Vingent Avenue North Hopks, MAN S6411  OFFICE SOUGHT OR HELD BY CANDIDATE: Bloomington: Mayor Council District No. Brooklyn Park: Mayor Council District No. Brooklyn Park: Mayor Council District No. Department of Councils: Mayor Council District No. Council Ward No. 5 Library Board Park Board District No. Board of Estimate/Taxation  Hennepin Attorney Sheriff Councils: Commissioner District No. Board of Estimate/Taxation  Hennepin Council: Three Rivers Park District No. Hennepin Conservation District No. 1012  Committee Officers: Name Malung Address For Committee Business Phone Chair: Gregory Scale Soly Soly Soly Soly Soly Soly Soly Soly	7.	TELEPHONE OF C	OMMITTEE OR	FUND: 6	12-209-8	283				-	the second secon
CANDIDATE'S ADDRESS: 1859 VINCENT AVENUE NOTH M. M. S. M. S.							Foxworth	(as ) V		DEL	3.
CANDIDATE'S PHONE: 10 - 799 - 35 73  9. OFFICE SOUGHT OR HELD BY CANDIDATE: Bloomington: Mayor Council District No  Brooklyn Park: Mayor Council District Justice Minneapolis: Mayor Council District No  Minneapolis: Mayor Council Ward No  Board of Estimate/Taxation  Hennepin Conservation District No  Therefore Rivers Park District No  Hennepin Conservation District No  10. Committee Officers: Name Malung Address For Committee Business Phone  Chair: Gregory Gray 501 Call Park Avenue N Lapls, NN 5641 311-3270  Treasurer: Maphone Realwassus P. D. & 11367 Mpls., NN Mpls., NN 6641 312-3270  E-mail address  Deputy Treasurer (f any):  11. Associations Supporting a Political Funo:  12. Depository/Bank (Location of Committee Funds): Afterware Lapls., NN 6641 4  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) And Laple Scale 13841 The Treasurer Certify That The Information Contained on This Form is public data.  Madural Name And Malung Address  The Treasurer Certify That The Information in this form is public data.	•							Mpls. M	NN 564	ļ(	
9 OFFICE SOUGHT OR HELD BY CANDIDATE: Bloomington:   Mayor   Council District No.		CANDIDATE'S PH	ONE:	612-799-	3573		_				
Bloomington: Mayor Council District No. Brooklyn Park: Mayor Council District Library Board Park Board District No. Minneapolis: Mayor Council Ward No. 5 Library Board Park Board District No. Minneapolis: Mayor Council Ward No. 5 Library Board Park Board District No. Minneapolis School District #1 District No. (1-6 OR at Large) Board of Estimate/Taxation  Hennepin Attorney Sheriff Commissioner District No. Board of Estimate/Taxation  Hennepin County: Hennepin Conservation District No.   10. Committee Officers: Name Mailing Address for Committee Business Phone Chair: Gregory Gray 50.7 Call Park Avenue N Hols, NN 55411 317-3070  Treasurer: Displace Breauxseus P. O. 8 & 11367 Mpls., INN Mpls., INN 55411 3180-3367  E-mail address  Deputy Treasurer (if any): Address: JSQ () Minustry Alexand & Lyds., MN 56414  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) Address: True AND CORRECT. Once submitted, all information within this form is public data.  Address: Mayor County District No.   Board of Estimate/Taxation    Park Board Of Estimate/Taxation											
Minneapolis: Mayor Council Ward No. 5   Library Board Park Board District No.     Minneapolis School District #1 District No. (1-6 OR at Large)   Board of Estimate/Taxation    Hennepin					istrict No	<u>.</u>				-	
Minneapolis School District #1 District No.(1-6 OR at Large)   Board of Estimate/Taxation		Brooklyn Park:	☐ Mayor	Council Di	strict						
Hennepin Attorney Sheriff Commissioner District No		Minneapolis:	☐ Mayor	Council W	/ard No. <u>5</u>		Library Board		ark Board D	District	No
Three Rivers Park District No.   Hennepin Conservation District No.			☐ Minneap	olis School Distri	ct #1 District N	lo.(1-6 OR a	nt Large)	🗆 E	oard of Esti	mate/T	axation
Chair: Gregory Gray 507 Call Park Avenue N Hols, NN 56411 317-3270  Treasurer: Dephne Breauxseus P. O. Bac 11367 Mpls, NN Mols, NN 66411 382-6367  E-mail address  Deputy Treasurer (if any):  11. Associations Supporting a Political Fund:  Address: 2520 Ministry Alenue C Lypis. MN 66414  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) Male Brewssaus , 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.  Mach 20 2013		•	·		-			<del></del>			
Chair: Gregory Gray 507 Call fark Avenue N Mpls, NN 55411 317-3270  Treasurer: Daphne Breauxsaus P. O. Bar 11367 Mpls, NN Mpls, NN Mpls, NN 65411 382-6367  E-mail address  Deputy Treasurer (if any):  11. Associations Supporting a Political Fund:  12. Depository/Bank (Location of Committee Funds): Affinity Plus Credit Vainn  Address: J52() University Allenue SE 1496. MN 66414  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) Daplace Breaussaus  The Treasurer Certify That the Information contained on this form is public data.  Mach 20, 2013	10.	- COMMITTEE OFFI	ICERS:	NAME	N	AILING ADDI	RESS FOR COMMI	TTEE BUSINESS	Р	HONE	
Treasurer: DAPINE BROWNSONS P. O. Sw. 11367 MPIS. INN MPIS. INN 65411 382-6357  E-mail address  Deputy Treasurer (if any):  11. Associations Supporting a Political Fund:  Address: 252() University Alenue E 14pls. Min 65414  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) 140 Inl Brown Saul , 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.  Machine 1362-6357  E-mail address  Legisland Saul Saul (Frint Name) 1362-634 William Saul Saul (Frint Name) 1362-634 William Saul Saul Saul (Frint Name) 1362-634 William Saul Saul Saul Saul Saul Saul Saul Saul		Chair: Gre	caru G	ray 507	Car P	ark An	enue N	Mpls, MA	1 564 E	્રા (કો) 3	
Deputy Treasurer (if any):  11. Associations Supporting a Political Fund:  12. Depository/Bank (Location of Committee Funds):  Address:  2520  Minuscity Alene SE  144  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)  2, (Print Name)  2, (Print Name)  3, (Print Name)  4, (Print Name)  1, (Print Name)  2, (Print Name)  2, (Print Name)  3, (Print Name)  4, (Print Name)  1, (Print Name)  2, (Print Name)  3, (Print Name)  4, (Print Name)		Treasurer: D	aphne ?	reauxsaus	P.O. 8a	L 11367	Mpes. N	IN Mpls.	NUN 65411	1	
11. Associations Supporting a Political Fund:  12. Depository/Bank (Location of Committee Funds): Affinity Plus Credit Vainn  Address: 2520 Viniversity Alexae SE 14pls MN 65414  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) Ather Brewssey , 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.  1. Address: 2520 Viniversity Alexae Service Support of Contained Supp											
12. DEPOSITORY/BANK (Location of Committee Funds): Affinity Phis Credit Vain Address: 3520 Wivesty Alexue SE 14915, MN 65414  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) Address: TRUE AND CORRECT. Once submitted, all information within this form is public data.  Mach 20, 2013		Deputy Treasur	rer (if any):								
Address: 252() Www.ty Avenue SE 14pls	11.	Associations S	SUPPORTING A F	POLITICAL FUND: _							
Address: 252() Www.ty Avenue SE 14pls	12.	DEPOSITORY/BA	NK (Location o	of Committee Fu	nds): Affi	nity Ph	is Credit	Vinon			
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)									3414		
March 20, 2013	13.	CERTIFICATION:	Any individua	ر Il who signs and	certifies to be	true a state	, ment which the	/	s contains fa	alse inf	ormation
		1, (Print Name) THIS FORM IS	DAD line 1 COMPLETE,	2 <u>Xeay Isau (</u> TRUE AND CO	RRECT. Once	The Treasu submitted,	rer CERTIFY TH	HAT THE INFOR	RMATION C is public dat	ONTAI a.	NED ON
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