

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.

*Modifying Name
From Andrea For Ward
to Andrea Jenkins For
Ward 8. All other
information is the same

4. Name of Committee or Fund: Andrea Jenkins For Ward 8

5. Mailing Address of Committee or Fund (Include City, State, Zip Code):
PO Box 80791, Minneapolis, MN 55408

6. E-Mail Address:
andreaforward8@gmail.com

7. Telephone of Committee or Fund:
612-203-9689

8. Name of Candidate - If Principal Campaign Committee:
Andrea Jenkins

Candidate's Address:
3940 Park Avenue, Minneapolis, MN 55407

Candidate's Phone:
612-203-9689

9. Office Sought or Held by Candidate:

Bloomington: Mayor Council District No. _____

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Taxpayer Services

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Brooklyn Park: Mayor Council District No. _____

Minneapolis: Mayor Council Ward No. 8 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. _____

10. Committee Officers:	Name	Mailing Address for Committee Business	Phone
Chair:	<u>Scott Dibble</u>	<u>PO Box 80791, Minneapolis MN 55408</u>	<u>612-293-7360</u>
Treasurer:	<u>Nicole Pettit</u>	<u>319 Wyoming St. West St. Paul MN 55107</u> E-mail address <u>npettit@msn.com</u>	<u>612-237-3591</u>
Deputy Treasurer (if any):			

11. Associations Supporting a Political Fund:

12. Depository/Bank (Location of Committee Funds): Anchor Bank

Address: 1570 Concordia Ave. St. Paul, MN 55104

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) Nicole Pettit, 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.

Nicole Pettit
(Signature of Treasurer)

1/10/17
(Date)