REGISTRATION AND STATEMENT OF ORGANIZATION

			New Registra	tion	☐ Amendme	ent		
1. 2 . 2 . 3 . 5	registration for Political Co	form instructionsmittee (Second (See regis	nmittee (Cities of Bloor ons.) Complete Items 4- e registration form instru- stration form instructions	10 and 12-13. actions.) Complete a.) Complete items	items 4-7, 10, 12 4-7, 10-13.	2-13.		
4.	NAME OF COMMITTEE OR FUND: DICK FRANSON FOR MAYOR VOLUNTEER COMMITTEE							
5.	MAILING ADDRESS OF COMMITTEE OR FUND (Include City, State, Zip Code): PO BOX 6449, MINNEAPOLIS, MN - 55406-0449							
6.	E-MAIL ADDRESS: SENATE FRANSON @ YAHOO. COM							
7.	TELEPHONE OF COMMITTEE OR FUND: 612-729-6752							
8.	NAME OF CANDIDATE - If Principal Campaign Committee: Dick FRANSON							
	CANDIDATE'S ADDRESS: 5215-39TH AVC. 50., MPLS., MN-55417-2219							
	CANDIDATE'S PH	HONE: 61	2-729-67	52	· .	Received by	Hennepin Ccur	31 1/
9.	OFFICE SOUGHT	TOR HELD BY C	ANDIDATE:				er Services	3
	Bloomington:	☐ Mayor	Council District N	lo		FEB	1 2013	
	Brooklyn Park:	Mayor	Council District			Log	DB	5 ~
	Minneapolis:	Mayor	☐ Council Ward No	o 🗆	Library Board	Park	Board District No	
		☐ Minneap	olis School District #1 D	istrict No.(1-6 OR	at Large)	Boar	d of Estimate/Taxati	ion
	Hennepin County:	☐ Attorney	☐ Sheriff	☐ Com	missioner District	No		
	County.	Three Rivers Park District No Hennepin Conservation District No						
10.	COMMITTEE OFFICERS: NAME MAILING ADDRESS FOR COMMITTEE BUSINESS PHONE							
	Chair: RICHARD V. FRANSON-POBOX 6449, MPLS., MN-55406 729-6752 }							
	Treasurer: RICHARD V. FRANSON-POBOX 6449, MPLS., MN-55406- 729-6752							
	E-mail address SENATE FRANSON @YAHOO . COM							
	Deputy Treasurer (if any):							
11.	Associations Supporting a Political Fund:							
12.	DEPOSITORY/BANK (Location of Committee Funds): WINGS FINANCIAL CREDIT UNION							
	Address: 14985- GLAZIER Ave., STE 100, APPLE VALLEY, MN, 55124-9822							<u> 22</u>
	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) RICHARD V. FRANSON , 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.							
	_	nol V.	Franson			OI, 2013 (Date)		,
		(Signature	of Treasurer)			(Date)	_	