## REGISTRATION AND STATEMENT OF ORGANIZATION

New Registration

Amendment

ր. 2. 3.	elective offices) (See registration form instructions.) Complete Items 4-10 and 12-13.  Political Committee (See registration form instructions.) Complete Items 4-7, 10, 12-13.  Political Fund (See registration form instructions.) Complete Items 4-7, 10-13.						
4.	Name of Committee or Fund: BARB Johnson Volunteer Committee						
5. 6.	Mailing Address of Committee or Fund (Include City, State, Zip Code): 43/8 Xerves Ave. N: Minnelajas / W. 554/2 E-Mail Address: Johnson volunteer committee @ywho.com Telephone of Committee or Fund: (1/2 - 533, 7473						
7.	Telephone of Committee or Fund: (e/z - 522-7873						
8.	Name of Candidate - If Principal Campaign Committee: Barbara A. Johnson						
	Candidate's Address: 43/8 xerxes Arc. N. minneaps 1/2, mn. 554/2 Received by Hennepin County						
	Candidate's Ph	hone: 61Z	-522-7873	,	Received by Taxpa	yer Services	y
9.	Office Sought of Bloomington:	or Held by Ca Mayor	ndidate: Council District No.		NO	V 0 9 2015	
	Brooklyn Park:	Mayor	Council District No.		Log PM	DB DEL	NOTE:
	Minneapolis:	Mayor	Council Ward No. 4	Library Board	Park Board Dis	trict No.	
		Minneapoli	s School District #1 District	No.(1-6 OR at Large)	. Board of E	Estimate/Taxation	
	Hennepin	Attorney	Sheriff	Commissioner District No.	· ·		
	County:	Three Rive	rs Park District No.				
10.	Committee Office	icers:	Name	Mailing Address for Commit	ttee Business	<u>Phone</u>	
	Chair:						
	Treasurer: John W. Rainville 4318 Xerse: Are. N. E-mail address johnsonvolunteer Committe  Deputy Treasurer (if any): Minneypylis, MN. Cyahos. com  55412						
	Heasurer: John W. Mainuite  4318 Xerses Ave. N. E-mail address johnsonvalunteercomm. The  Deputy Treasurer (if any): Minneypylis, MN. Cyahos. com						
	Deputy Treasurer (if any): MINNEY 7/15, MN. Cyahos. Com						
11	Associations Supporting a Political Fund:						
12.	Depository/Bank (Location of Committee Funds): Wings Federal Cradet Cerus						
	2. Depository/Bank (Location of Committee Funds): Wings Federal Credit Cerum  Address: 14985 Dlager au. apple Vally m. N. 55/24						
13. Certification: Any individual who signs and certifies to be true a statement which the individual knows contains false in who knowingly omits required information is guilty of a gross misdemeanor.							
3	I, (Print Name)	H, (Print Name) To An W. Ra'in VIII , 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.					
ĺ	My W. Fo	anile	e of Treasurer)	11/9/15	(Date)		
			,	PSI 012 Government Center Mil	nneanolis MN 55487	7-0012 (612)596-7152	,