

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: Noor for Ward 6

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

515 15th Ave S Unit 326, Minneapolis, MN

6. E-MAIL ADDRESS: ~~mohamudnoor@gmail.com~~ mohamudnoor@gmail.com

7. TELEPHONE OF COMMITTEE OR FUND: 612-250-9660

8. NAME OF CANDIDATE - If Principal Campaign Committee: Mohamud Noor

CANDIDATE'S ADDRESS: 515 15th Ave S Unit 326, Minneapolis, MN

CANDIDATE'S PHONE: 612-250-9660

Received by Hennepin County
Taxpayer Services

JAN 31 2017

9. OFFICE SOUGHT OR HELD BY CANDIDATE:

Bloomington: ☐ Mayor ☐ Council District No. _____

Log DB
PM DEL

Brooklyn Park: ☐ Mayor ☐ Council District No. _____

Minneapolis: ☐ Mayor ☒ Council Ward No. 6 ☐ 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: Erik Myster 515 15th Ave S unit 326, Minneapolis MN 651-280-5460

Treasurer: Erik Myster 515 15th Ave S Unit 326, Minneapolis, MN 651-280-5460

E-mail address erikmyster@gmail.com

Deputy Treasurer (if any): _____

11. ASSOCIATIONS SUPPORTING A POLITICAL FUND: _____

12. DEPOSITORY/BANK (Location of Committee Funds): Firefly Credit Union

Address: 2535 27th AveS, Minneapolis MN 55406

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) Erik Myster, 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.

Erik Myster
(Signature of Treasurer)

1/30/2017
(Date)