REGISTRATION AND STATEMENT OF ORGANIZATION

(All data on this form is public information.)

		×	J New Regi	stration	Amendment		
1.) 2. [3. [registration form in Political Commit	nstructions.) C tee (See regis	Complete Item stration form i	ns 4-10 and 12-13.	lete items 4-7, 10, 12-13.	Government elective offices) (See	
4.	NAME OF COMMITTEE	OR FUND:	leigh bur	s for Am	y Arcand		-
5.	MAILING ADDRESS OF COMMITTEE OR FUND (Include City, State, Zip Code): 3536 21St Ave. S. Minneapolis, MN 55407						
6.	E-MAIL ADDRESS: amy.arcand a gmail.com						
7.	TELEPHONE OF COMMITTEE OR FUND: 612-961-9517						
8.	Name of Candidate	AME OF CANDIDATE - If Principal Campaign Committee: Amy Arcand					
	CANDIDATE'S ADDRESS: 3536 21St Ave. S. Minneapolis, MN 55407						
	CANDIDATE'S PHONE:	612-0	161-951	<u> </u>			t
9.	OFFICE SOUGHT OR H	ELD BY CANDID	ATE;			Received by Hennepin Co Taxpayer Services	วนทเง
	Bloomington:	☐ Mayor	Council	District No		NOV 1.3 2008	
-	Minneapolis:	Mayor	☑ Council	Ward No. 9	Library Board	☐ Park Board District No.	- ,
	·	_		chool District No. 1	-	LOG DB V	
	Hennepin County: Attorney Sheriff Commissioner District No.						
		☐ Three Riv	vers Park Dis -	strict No	∐ Soil and Wat	er Conservation District No.	
10.	COMMITTEE OFFICERS: NAME MAILING ADDRESS FOR COMMITTEE BUSINESS PHONE						
	Chair:						
	Treasurer: Mich	iael Rol	nrer	3153 2	3rd Ave S. MA	ols.mn 55407 613	1-722
	Treasurer: Michael Rohrer 3153 23rd Ave S. Mpls, MN 55407 612-722 E-mail address Michael erohrer agmail. Com						
	Deputy Treasurer (if any):						
11			CAL FUND:				_
	1. Associations Supporting a Political Fund:						
12.					is, mn 55407	111101001	-
							-
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), The Treasurer CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORMS COMPLETE, TRUE AND CORRECT. Once submitted, all information, within this form is public data.						
/	ON THIS FORMS	SOMPLETE,	RUE AND C	UKKEUT, Once su	bristled, as intotriation, with	on this form is public data.	
	/ / / O	Signature of Tr	reasurer)		(Date	<u> </u>	