REGISTRATION AND STATEMENT OF ORGANIZATION

☐ Amendment

1. [2 2. [3. [(See registra Political Co	ation form inst mmittee (Sed	ructions.) Complete Items 4-10	Complete items 4-7, 10, 12-13.		overnment elective offices)	
4.	NAME OF COMMITTEE OR FUND: Neighbors for Lisa Bender						
5.	MAILING ADDRESS OF COMMITTEE OR FUND (Include City, State, Zip Code):						
	2433 Dupont A	2433 Dupont Avenue S, Minneapolis					
6.	E-Mail Addres	-Mail Address: ryan@votelisabender.com					
7.	TELEPHONE OF	ELEPHONE OF COMMITTEE OR FUND: 612-669-3042					
8. NAME OF CANDIDATE - If Principal Campaign Committee: Lisa Bender						menin County	
	CANDIDATE'S A	DDRESS: 243	B Dupont Avenue S		leceived by Hei Taxpayer	Services	
	CANDIDATE'S PHONE: 612-669-3286						
9.	CANDIDATE'S PHONE: 612-669-3286 DEC 1 3 2012 OFFICE SOUGHT OR HELD BY CANDIDATE:						
	Bloomington:	☐ Mayor	Council District No.			OEL	
	Brooklyn Park:	☐ Mayor	Council District		PM		
	Minneapolis:	☐ Mayor	☑ Council Ward No. <u>10</u>	Library Board	☐ Park Board	District No	
	☐ Minneapolis School District #1 District No.			o.(1-6 OR at Large)	☐ Board of Es	timate/Taxation	
	Hennepin	Attorney	☐ Sheriff	Commissioner District N	lo		
	County:	Three Rivers Park District No.		☐ Hennepin Conservation □	District No		
10.	COMMITTEE OFFICERS: NAME			Mailing Address for Commi	TTEE BUSINESS	PHONE	
	Chair: Max Musicant			2219 Garfield Avenue South 204, 55405 612-670-671		612-670-6717	
	Treasurer: John Ryan Bender			2433 Dupont Avenue S, 55405		612-669-3042	
				E-mail address			
	Deputy Treasurer (if any):						
11.	ASSOCIATIONS SUPPORTING A POLITICAL FUND:						
12.	DEPOSITORY/BANK (Location of Committee Funds): US Bank						
	Address: 2420 Hennepin Avenue, Minneapolis, MN 55045						
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) John Ryan Bender , 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.						
		(Signatur	re of Treasurer)		//2		

FILE WITH: TAXPAYER SERVICES DEPARTMENT, ELECTIONS DIVISION • PSL 012 GOVERNMENT CENTER, MINNEAPOLIS, MN 55487-0060 • (612)596-7152