

## REGISTRATION AND STATEMENT OF ORGANIZATION (All data on this form is public information)

MAR 21 2011

	(n) (check one):		Amendment	RAMSEY COUNTY FLECTIONS
The organizatio	n is for a (check one):	Candidate	Political Committee	ELECTIONS Holder
(Please Print or	· Type)	•		
Name of Commi	ittee: ny Howar	d for V	Vard 1 City	Cauncil
Mailing Address	of Committee (include a	ty state & zip code)		Phone Number:
638	Van Bur	en Ave		651.aaa.7698
Purpose or Offic	<b>C●</b>	1 1		
Cit,	y Counci	1-Ward	St Paul	
Geographic Are	Nard 1-	St Paul		
Officers of (	Committee			
Officer	Name		Address	Phone Number
Chair:	Robert	McClain	321 Toppino St Paul, Mn.	) St 651-755 55117 7801
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Officer	Name	Address	Phone Number
Chair:	Robert McClain	321 Topping St St Paul, Mn 55117	651-755 7801
Co-Chair (If any)	Anthony Schmitz	843 Van Buren Ave St Paul, Mn 55104	7479
Treasurer	Rachelle Robinson	1108 E with st St Paul, Mn 55106	651-442- 7576
Deputy Treasurer (If any)			
Other Principal Officers (if any)			
Other Principal Officers (If any)			

Custodian of Books	Name: Rachelle Robinson	Address: 1108 E with St Mn 5511	Phone Number: 651 442
Depository(les)/Bank Location of Committe Funds	Name: Wells Fargo	Address: Phalen Blvd St Paul, Mn 55106	Phone Number: 451.205
Depository(les)/Bank Location of Committee Funds	Name:	Address:	Phone Number:

## This section for Political Committees Only

Candidate or Party Supported by Political Committee

Candidate or Party Name	Address	Office	Party Affiliation (If any)
NIA			
		,	
is the committee & C	ontinuing one? (Check appropriate re		No
	Be Completed By All Committees		
Liquid assets on har	d as of (date)2   2   4   /	11 are \$10	
1. Rachel	le Robinsoncertify	THAT THE INFORMATION CO	ONTAINED ON THIS FORM IS
COMPLETE, TRUE	AND CORRECT.		

ANY PERSON WHO SIGNS AND CERTIFIES TO BE TRUE A STATEMENT WHICH HE OR SHE KNOWS CONTAINS FALSE INFORMATION OR WHO KNOWINGLY OMITS REQUIRED INFORMATION IS GUILTY OF A MISDEMEANOR.

Treasurer, Candidate or Office Holder