



REGISTRATION AND STATEMENT OF ORGANIZATION

(All data on this form is public information)

This report is a(n) (check one): New Registration Amendment

The organization is for a (check one): Candidate Political Committee Office Holder

(Please Print or Type)

Name of Committee: Sheldon Johnson	
Mailing Address of Committee (include city state & zip code) 2031 Howard St. S., St. Paul MN 55119	Phone Number: 651.738.3143
Purpose or Office State Representative 67B	
Geographic Area St. Paul, MN	

Officers of Committee

Officer	Name	Address	Phone Number
Chair:	Joe Fleischhacker	25 E. Sandralee Dr. St. Paul, MN 55119	651. 731.1583
Co-Chair (If any)			
Treasurer	Mary Cahill	2191 Douglyn Lane St. Paul, MN 55119	651.201 3701
Deputy Treasurer (If any)			
Other Principal Officers (If any)			
Other Principal Officers (If any)			

Custodian of Books	Name:	Address:	Phone Number:
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Depository(ies)/Bank Location of Committee Funds	Name: Anchor Bank	Address: 2700 E. 7th Ave, N. St. Paul MN 55109	Phone Number: 651.770 2341
Depository(ies)/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)
Sheldon Johnson	2031 Howard St. S. St. Paul, MN 55119	state Rep.	DFL

Is the committee a continuing one? (Check appropriate response) Yes No

This Section is To Be Completed By All Committees

Liquid assets on hand as of (date) 8/6/12 are \$ 13,705.70

I, Sheldon Johnson, CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS
(Print or type name)
COMPLETE, TRUE AND CORRECT.

Signature: 
Treasurer, Candidate or Office Holder

Date: 8/16/12

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