

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

This report is a(n) (ch	eck one):New Registration	Amendment RAMSEY	COUN	
This report is a(n) (check one):New RegistrationAmendmentCounty  The organization is for a (check one):CandidatePolitical CommitteeOffice Holder				
(Please Print or Type)				
Name of Committee:  McGuire Volunter Committee  Mailing Address of Committee (include city state & zip code)  Purpose or Office  Name of Committee:  When the Committee (include city state & zip code)  Purpose or Office  Purpose or Office				
Mailing Address of Committee (Include City state & 210 code)				
Purpose or Office 130806, Roswill, MN 55/13 1366				
County Board				
Geographic Area  Wunty District 2				
Officers of Committee				
Officer	Name	Address	Phone Number	
Chair:	Joanne Speucer	TOO Plan	651-335 5784	
Co-Chair (If any)	/		,	
Treasurer	Steve Dehler #418	2601 Kenzie Terrace St Anthony Village, MN	651-331- 1585	
Deputy Treasurer (If any)		55418		
Other Principal Officers (If any)				
Other Principal Officers (If any)				
Custodian of Books	Name:	Address:	Phone Number:	
Depository(ies)/Bank Location of Committ Funds	ee Community Resource	Sank, Roswill, MX Address: 651-631-1040	Phone Number: √ 55//-3	
Depository(ies)/Bank Location of Committ Funds	(   Name: /	Address: 651-631-1040	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)		
		· · · · · · · · · · · · · · · · · · ·			
7 3 700	uire 2200 Draper Ave Roseville, MN 55	113 Boar	d'		
		•			
Is the committee a continuing one? (Check appropriate response)YesNo					
This Section is To Be Completed By All Committees					
Liquid assets on hand as of (date) May 18 12 are \$ 500.00					
Liquid assets on hand as of (date) May 18, 12 are \$ 500.00  I, Muy To McGuire, CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS (Print or type name)					
COMPLETE, TRUE AND	CORRECT				
Signature: Treasurer	y b McDure , Candidate or Office Holder	Date: _	5-18-12		

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.