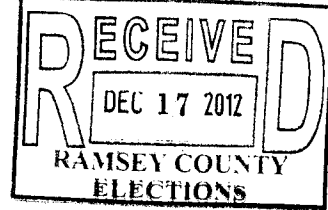




REGISTRATION AND STATEMENT OF ORGANIZATION

(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: Neighbors for Meyer	
Mailing Address of Committee (include city state & zip code) 1523 Laurel Avenue Saint Paul, MN 55104	Phone Number: 651-646-4656
Purpose or Office St. Paul Mayor	
Geographic Area Saint Paul	

Officers of Committee

Officer	Name	Address	Phone Number
Chair:	Elizabeth Dickinson	384 Hall Avenue Saint Paul, MN 55107	651-312-0616
Co-Chair (If any)			
Treasurer	Paul Busch	1523 Laurel Avenue Saint Paul, MN 55104	651-646-4656
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: BankCherokee	Address: 607 Smith Avenue St. Paul, MN 55107	Phone Number: 651-292-9200
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)

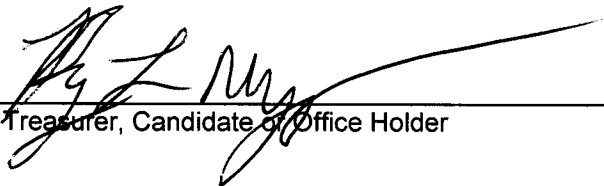
Is the committee a continuing one? (Check appropriate response) Yes No

This Section is To Be Completed By All Committees

Liquid assets on hand as of (date) Dec. 16, 2012 are \$ 2240.00

I, Roger L. Meyer, CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS
(Print or type name)

COMPLETE, TRUE AND CORRECT.

Signature:  _____
Treasurer, Candidate or Office Holder

Date: 12/17/12

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.