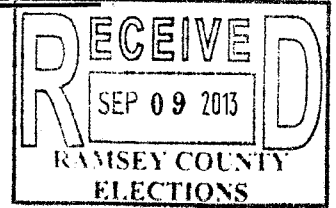


REGISTRATION AND STATEMENT OF ORGANIZATION

(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) 85112121 40317 10/11/12 4821 51522 014 30/11/2012 304119: 19211

Name of Committee: VOLUNTEERS FOR TRAYNOR

Mailing Address of Committee (include city state & zip code) 1396 SEXTANT AVE. W., ROSEVILLE, MN 55113 Phone Number: 651-487-1430

Purpose or Office: ISD #623 SCHOOL BOARD

Geographic Area: ISD #623

Officers of Committee

Table with 4 columns: Officer, Name, Address, Phone Number. Rows include Chair: JENNIFER PETERSON, Co-Chair (If any), Treasurer: JILL LUND, Deputy Treasurer (If any), Other Principal Officers (If any).

Custodian of Books: Name: MARK TRAYNOR, Address: 1396 SEXTANT AVE W ROSEVILLE, MN 55113, Phone Number: 651-487-1430

Depository(ies)/Bank Location of Committee Funds: Name: WELLS FARGO, Address: 1643 COUNTY ROAD B2 WEST ROSEVILLE, MN 55113, Phone Number: 651-205-8020

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)
MARK TRAYNOR	1396 SEXTANT AVE W ROSEVILLE, MN 55113	ISD # 623 SCHOOL BOARD	N/A

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) 9/1/13 are \$ 784.84

I, MARK TRAYNOR, CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS
(Print or type name)

COMPLETE, TRUE AND CORRECT.

Signature: Mark Traynor Date: 9/1/13
Treasurer, Candidate or Office Holder

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.