



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: <i>Volunteers for McGehee</i>	
Mailing Address of Committee (include city state & zip code) <i>2100 Fairview Avenue, Roseville, MN</i>	Phone Number: <i>651-636-7359</i>
Purpose or Office <i>City Council</i>	
Geographic Area <i>City of Roseville</i>	

Officers of Committee

Officer	Name	Address	Phone Number
Chair:	<i>Tammy McGehee</i>	<i>77 Mid Oaks Lane Roseville, MN 55113</i>	<i>651-645-2993</i>
Co-Chair (If any)			
Treasurer	<i>Karen Schaffer</i>	<i>2100 Fairview Ave. Roseville, MN 55113</i>	<i>651-636-7359</i>
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:	Address:	Phone Number:
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) 7-28-14 are \$ 0.00

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

COMPLETE, TRUE AND CORRECT.

Signature: Tommy McGehee
Treasurer, Candidate or Office Holder

Date: 7.28.14

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.