



**REGISTRATION AND STATEMENT OF ORGANIZATION**

(All data on this form is public information)

**RAMSEY COUNTY**

**SEP 19 2014**

**ELECTIONS**

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>aka Niijis (Friends) of David Glass</i><br><i>Friends of David Glass aka Niijis of David Glass</i> |                                      |
| Mailing Address of Committee (include city state & zip code)<br><i>800 Arlington Av</i>                                  | Phone Number:<br><i>651 246 6717</i> |
| Purpose or Office<br><i>Elect David Glass to City Council, Ward 5, St Paul</i>   |                                      |
| Geographic Area<br><i>St Paul</i>  |                                      |

**Officers of Committee**

| Officer                           | Name                       | Address                                  | Phone Number        |
|-----------------------------------|----------------------------|--|---------------------|
| Chair:                            | <i>Grace Kelly</i>         | <i>1660 Hague Av St Paul MN 55104</i>    | <i>651 246 6717</i> |
| Co-Chair (If any)                 |                            |  |                     |
| Treasurer                         | <i>Lynne Larken-Wright</i> | <i>749 Cottage Av W St Paul MN 55117</i> | <i>651 489 4959</i> |
| Deputy Treasurer (If any)         |                            |  |                     |
| Other Principal Officers (If any) |                            |  |                     |
| Other Principal Officers (If any) |                            |  |                     |

|                    |                                    |   |                                      |
|--------------------|------------------------------------|---|--------------------------------------|
| Custodian of Books | Name:<br><i>Lynn Larken-Wright</i> | Address:<br><i>749 Cottage Av W St Paul, MN 55117</i> | Phone Number:<br><i>651 489 4959</i> |
|--------------------|------------------------------------|---|--------------------------------------|

|  |                              |  |                                      |
|--|------------------------------|--|--------------------------------------|
| Depository(ies)/Bank Location of Committee Funds | Name:<br><i>Western Bank</i> | Address:<br><i>663 University Av St Paul, MN 55104</i> | Phone Number:<br><i>615 290 8100</i> |
| 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) |
|-------------------------|---------|--------|----------------------------|
|                         |         |        |                            |
|                         |         |        |                            |
|                         |         |        |                            |
|                         |         |        |                            |
|                         |         |        |                            |

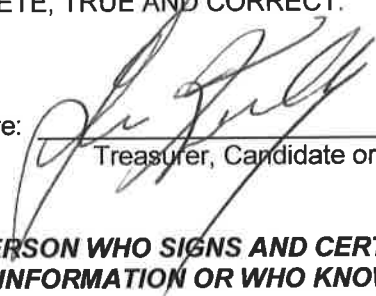
Is the committee a continuing one? (Check appropriate response)  Yes  No

**This Section is To Be Completed By All Committees**

Liquid assets on hand as of (date) Sept 19, 2014 are \$ 850<sup>00</sup>

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

COMPLETE, TRUE AND CORRECT.

Signature:   
Treasurer, Candidate or Office Holder

Date: 9-19-2014

**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.**