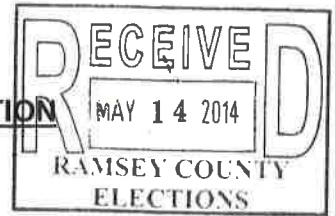




REGISTRATION AND STATEMENT OF ORGANIZATION

(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>FRIENDS OF REBECCA NOECKER</i>	
Mailing Address of Committee (include city state & zip code) 1486 <i>1486 MINNEHAWKA AVE. W., ST. PAUL, MN 55104</i>	Phone Number: <i>651-314-9311</i>
Purpose or Office <i>ST. PAUL CITY COUNCIL WARD 2 - ELECTION IN 2015</i>	
Geographic Area <i>ST. PAUL - WEST SIDE, W. 7TH, DOWNTOWN, SUMMIT HILL (WARD 2)</i>	

Officers of Committee

Officer	Name	Address	Phone Number
Chair:	<i>BETSY REVEAL</i>	<i>534 SUPERIOR ST., ST. PAUL, MN 55102</i>	<i>202-250-4746</i>
Co-Chair (If any)			
Treasurer	<i>RACHEL SHIELDS</i>	<i>1486 MINNEHAWKA AVE W. ST. PAUL, MN 55104</i>	<i>202-321-6989</i>
Deputy Treasurer (If any)			
Other Principal Officers (If any)			
Other Principal Officers (If any)			

Custodian of Books	Name: <i>RACHEL SHIELDS</i>	Address: <i>1486 MINNEHAWKA AVE. W. ST. PAUL, MN 55104</i>	Phone Number: <i>202-321-6989</i>
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Depository(ies)/Bank Location of Committee Funds	Name: <i>CITY & COUNTY CREDIT UNION</i>	Address: <i>144 11TH ST. E., ST. PAUL, MN 55101</i>	Phone Number: <i>651-225-2700</i>
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Depository(ies)/Bank Location of Committee Funds	Name:	Address:	Phone Number:
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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) 5/9/14 are \$ 0.

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

COMPLETE, TRUE AND CORRECT.

Signature: Rebecca E. Noecker Date: 5-9-14
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.