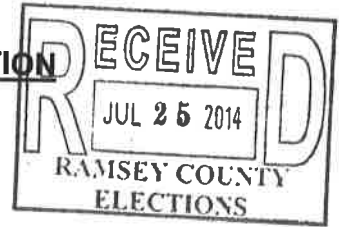




REGISTRATION AND STATEMENT OF ORGANIZATION

(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: A Lot of People Supporting Darren Tobolt	
Mailing Address of Committee (include city state & zip code) PO Box 3701, St. Paul, MN 55101	Phone Number: 651-261-2774
Purpose or Office Candidate for St. Paul City Council, Ward 2	
Geographic Area Ward 2, City of St. Paul	

Officers of Committee

Please redact phone numbers of individuals listed as officers before posting online

Officer	Name	Address	Phone Number
Chair:	Sarah Walker	500 Robert St., Unit 611 St. Paul, MN 55101	NA
Co-Chair (If any)	Fred Perez	360 Stevens St W Saint Paul, MN 55107	651- 224-1001
Treasurer	James Mogen	1931 Lincoln Ave. St. Paul, MN 55105	651- 261-2774
Deputy Treasurer (If any)			
Other Principal Officers (If any)	Elizabeth Emerson	745 Butternut Ave. St. Paul, MN 55102	651- 357-2225
Other Principal Officers (If any)			

Custodian of Books	Name: James Mogen	Address: 1931 Lincoln Ave. St. Paul, MN 55105	Phone Number: 651- 261-2774
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Depository(ies)/Bank Location of Committee Funds	Name: BankCherokee	Address: 985 Grand Ave. St. Paul, MN 55105	Phone Number: 651- 292-9200
Depository(ies)/Bank Location of Committee Funds	Name: PayPal.com	Address: 2211 North First Street San Jose, California 95131	Phone Number: 888- 221-1161

This section for Political Committees Only

Candidate or Party Supported by Political Committee

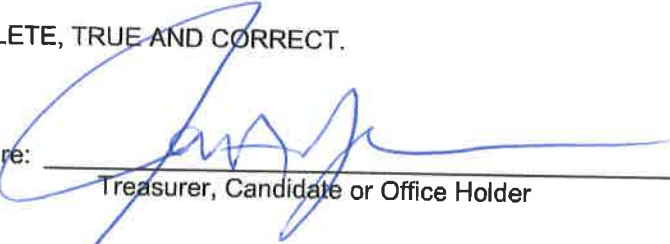
Candidate or Party Name	Address	Office	Party Affiliation (If any)

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) July 24, 2014 are \$ 7,061.54.

I, James A Mogen, CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS
(Print or type name)
COMPLETE, TRUE AND CORRECT.

Signature: 
Treasurer, Candidate or Office Holder

Date: 7/24/2014

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.