

REGISTRATION AND STATEMENT OF ORGANIZATION

(All data on this form is public information)

This report is a(n) (check one):		New registrationAmendment to registration			
The organization is for a (check one):_		✓ Candidat	e Committee	Political Commit	teePolitical Fund
Committee Name		Tom Goldstein for Saint Paul			
Candidate Name	(first and last)	Tom Goldste	ein	(A)	
Mailing Address of Committee (include city, state, and zipcode) 1399 Sherburne Ave, St. Paul, MN 55104					
Emailidealtom@yahoo.comPhone <u>651,644.8558</u>					
Purpose or Office sought Saint Paul City Council					
Geographic Area Ward 4					
Officers of the Committee					
	Name		Address		Phone
Chair (required)	Mathew Goldstein (inte		1399 Sherburi St. Paul, MN 5		651.231.7035
Treasurer/ Secretary (required)	Gretchen Robertson		1562 Laurel A St. Paul, MN 5		651.642.9075
Other Principal Officers (if any)					
Other Principal Officers (if any)					
Depository(ies)/ Bank Location of Committee Funds		985 Grand Av		IN 55105 651	.292.9200 Phone
	Name		Address		Phone

Candidate or Party supported by Political Committee Candidate Name or Party Name Office sought by candidate _____ Party Affiliation (if any) THIS SECTION TO BE COMPLETED BY ALL COMMITTEES Liquid assets on hand as of (date) 7/17/2015 _____ are \$2000.00_____. i, Tom Goldstein______CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS COMPLETE, TRUE, AND CORRECT Signature: Thoma A. Holdstin Date: 7/17/15 ANY PERSON WHO SIGNS AND CERTIFIES TO BE TRUE A STATEMENT WHICH HE OR SHE KNOWS CONTAINS FALSE INFORMATION OR WHO KNOWINGLY OMITS REQUIRED INFORMATION IS GUILTY OF AMISDEMEANOR.

THIS SECTION FOR POLITICAL COMMITTEES ONLY