



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: Steve Marchese for St. Paul School Board	
Mailing Address of Committee (include city state & zip code) 775 Ashland Avenue St Paul, MN 55104	Phone Number: 651- 768-5440
Purpose or Office St Paul School Board	
Geographic Area St. Paul	

Officers of Committee

Officer	Name	Address	Phone Number
Chair:			
Co-Chair (If any)			
Treasurer	Kate Barr	1843 Ashland Avenue St. Paul, MN 55104	612-963- 1515
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: Sunrise Banks	Address: 200 University Ave W St Paul, MN 55103	Phone Number: 651-265- 5600
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)

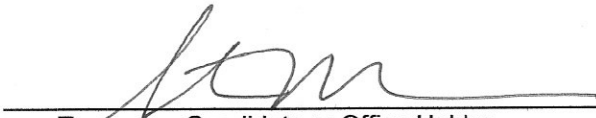
Is the committee a continuing one? (Check appropriate response) Yes No

This Section is To Be Completed By All Committees

Liquid assets on hand as of (date) 1/13/15 are \$ 3,713.94.

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

COMPLETE, TRUE AND CORRECT.

Signature: 
Treasurer, Candidate or Office Holder

Date: 1/13/15

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.