



REGISTRATION AND STATEMENT OF ORGANIZATION
(All data on this form is public information)

This report is a(n) (check one): New registration Amendment to registration

The organization is for a (check one): Candidate Committee Political Committee Political Fund

Committee Name Friends of David Sullivan-Nightengale

Candidate Name (first and last) David Sullivan-Nightengale

Mailing Address of Committee (include city, state, and zipcode) 1132 Norton St St Paul 55117

? Email _____ Phone 651-489-9019

Purpose or Office sought Saint Paul City Council

Geographic Area Ward 5

Officers of the Committee

Name	Address	Phone
Chair (required) <u>Stuart Chastain</u>	<u>3430 Chatsworth St. N. Shoreview, MN 55126</u>	<u>651-482-9026</u>
Treasurer/ Secretary (required) <u>Nancy Chermak</u>		
Other Principal Officers (if any) <u>Philip Fuehrer</u>	<u>1560 Point Douglas Rd. S. St. Paul, MN 55119</u>	<u>651-501-0639</u>
Other Principal Officers (if any)		

Depository(ies)/ Bank Location of Committee Funds Rice St - Western St Paul
 Name _____ Address _____ Phone _____

THIS SECTION FOR POLITICAL COMMITTEES ONLY
Candidate or Party supported by Political Committee

Candidate Name or Party Name _____

Address _____

Office sought
by candidate _____

Party Affiliation
(if any) _____

X THIS SECTION TO BE COMPLETED BY ALL COMMITTEES

Liquid assets on hand as of (date) 7-27-15 are \$ 300.00.

I, Nancie Chermak CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS COMPLETE, TRUE, AND CORRECT.

Signature: Nancie Chermak Date: 7-27-15

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.