

REGISTRATION AND STATEMENT OF ORGANIZATION

(All data on this form is public information)

This report is a(n)	(check one):	New registration Ame	endment to registration
The organization	is for a (check one): $ \sum$	Candidate Committee Po	olitical Committee Political Fund
Committee Name	-		
Candidate Name	(first and last) <u>Sco</u>	TT WILSON	
Mailing Address of (include city, state	of Committee e, and zipcode)		
Email Scarre	# FOR 62.4 SCOTTE	OR 624. BOARO & GMAIL Phone _	
Purpose or Office	sought SCHOOL	BOARD	
Geographic Area	WHITE BEAR LA	AKE AREA	
Officers of the Co	ommittee		
	Name	Address	Phone
Chair (required)	Santi Wilson		
Treasurer/ Secretary (required)	SCOTT WILSON	,	
Other Principal Officers (if any)			
Other Principal Officers (if any)	8	. 3	
Depository(ies)/ Bank Location of Committee Funds	Name	3670 EAST COUNTY LINE N Address	WHITE BEAR LAKE, MN 55110 Phone (651) 426 - 2554

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)
THIS SECTION TO BE COMPLETED BY ALL COMMITTEES
Liquid assets on hand as of (date) 10 NoV, 2015 are \$ 13.51
I, SCOTT WILSON CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS COMPLETE, TRUE, AND CORRECT.
Signature: foot William Date: 10 Nov. 2015
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 A MISDEMEANOR.
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