

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 WORKING AMERICA MINNESOTA POLITICAL COMMITTEE

Candidate Name (first and last) _____

Mailing Address of Committee
(include city, state, and zipcode) 815 16TH ST NW, WASHINGTON, DC, 20006

Email JCOBB@WORKINGAMERICA.ORG Phone 202-637-5273

Purpose or Office sought _____

Geographic Area CITY OF ST. PAUL

Officers of the Committee

	Name	Address	Phone
Chair (required)	DAVID WEHDE	4407 EAST LAKE ST. MINNEAPOLIS, MN 55406	612 331 4562
Treasurer/ Secretary (required)	JAMES COBB JR	815 16 TH ST NW WASHINGTON, DC 20006	202 637 5273
Other Principal Officers (if any)			
Other Principal Officers (if any)			

Depository(ies)/ Bank Location of Committee Funds AMALGAMATED BANK OF CHICAGO
 Name ONE WEST MONROE Address CHICAGO, IL, 60603 Phone 312-822-3000

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

Candidate Name or Party Name DARREN TOBOLT

Address 212 COLBORNE ST, SAINT PAUL, MN 55102

Office sought
by candidate CITY COUNCIL (ST PAUL), WARD 2

Party Affiliation
(if any) DEMOCRATIC FARMER LABOR PARTY

THIS SECTION TO BE COMPLETED BY ALL COMMITTEES

Liquid assets on hand as of (date) 10/12/15 are \$ 688.54.

I, James W Cobb, Jr. CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS COMPLETE, TRUE, AND CORRECT.

Signature:  Date: 10/15/15

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.