

REGISTRATION AND STATEMENT OF ORGANIZATION

(All data on this form is public information)

| This report is a(n) | (check one): x New reg | gistration Amendment to reg | istration |
|---|---|--|--------------------|
| The organization | is for a (check one): $\frac{x}{}$ Candidat | te Committee Political Commit | tee Political Fund |
| Committee Name | United for Paula Mielke | | |
| Candidate Name | (first and last) Paula Mielke | | |
| Mailing Address of (include city, state | of Committee e, and zipcode) <u>1868 Arona St, I</u> | Falcon Heights, MN 55113 | ., |
| Email paula@v | otepaulmielke.com | Phone 651-492-4143 | , |
| Purpose or Office | sought Falcon Heights City Co | uncil | |
| | Falcon Heights, MN | | |
| Officers of the Co | | Address | Phone |
| | Name Beth Mercer-Taylor | 2231 Folwell Ave, Falcon Heights, MN 55108 | 612-481-1797 |
| Treasurer/ Secretary (required) | Heather Hixson | 1841 Asbury St, Falcon Heights, MN 55113 | 541-990-0257 |
| Other Principal Officers (if any) | | | |
| Other Principal Officers (if any) | | | |
| Depository(ies)/ Bank Location of Committee Funds | Spire Credit Union 55 | 17 University Ave SÈ, Minneapolis, MN 414 | 651-215-3500 |
| committee runus | 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) | |
| (iii diiy) | |
| | |
| | |
| THIS SECTION TO BE COMPLETED BY ALL CO | OMMITTEES |
| Liquid assets on hand as of (date) 9/19/17 | are \$ <u>1585.44</u> |
| , Heather Hixson | CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS |
| COMPLETE TRUE AND CORRECT | |
| Signature: | Date: 9-19-17 |
| | O BE TRUE A STATEMENT WHICH HE OR SHE KNOWS CONTAINS |

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.