

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 Neighbors for a Livable Saint Paul

Candidate Name (first and last) _____

Mailing Address of Committee
(include city, state, and zipcode) P.O Box 16058, St. Paul, MN 55116

Email livablesaintpaul@gmail.com Phone 651-917-0988

Purpose or Office sought Encourage responsible development on Ford Plant site

Geographic Area City of Saint Paul

Officers of the Committee

	Name	Address	Phone
Chair (required)	Bruce Hoppe	531 Mount Curve Blvd. Saint Paul, MN 55116	651-917-0988
Treasurer/ Secretary (required)	Paul Mason	695 Mount Curve Blvd. Saint Paul, MN 55116	612-801-2731
Other Principal Officers (if any)			
Other Principal Officers (if any)			

Depository(ies)/
Bank Location of
Committee Funds US Bank 711 Cleveland Ave. 651-695-6200
St. Paul, MN 55116
Name Address Phone

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

Candidate Name or Party Name _____

Address _____

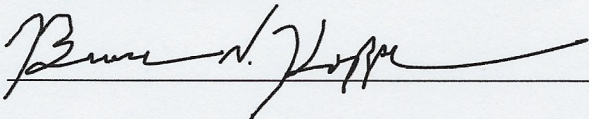
Office sought
by candidate _____

Party Affiliation
(if any) _____

THIS SECTION TO BE COMPLETED BY ALL COMMITTEES

Liquid assets on hand as of (date) 8/2/17 are \$ 2950.

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

Signature:  Date: 8/3/17

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.