

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 Shirley Erstad

Candidate Name (first and last) Shirley Erstad

Mailing Address of Committee (include city, state, and zipcode) 1660 Laurel Avenue, St. Paul, MN 55104

Email neighborsforshirleyerstad@gmail.com Phone 612-703-9044

Purpose or Office sought Ward 4 St. Paul City Council

Geographic Area Ward 4, St. Paul, Ramsey County

Officers of the Committee

	Name	Address	Phone
Chair (required)	Barb Spears	1656 Blair Avenue, St. Paul, MN 55104	651-328-0463
Treasurer/ Secretary (required)	Linda Winsor	708 Goodrich Avenue, St. Paul, MN 55105	651-224-6004
Other Principal Officers (if any)			
Other Principal Officers (if any)			

Depository(ies)/ Bank Location of Committee Funds Bank Cherokee 985 Grand Avenue, St. Paul, MN 55105 651-292-9200

Name Address Phone

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

Candidate Name or Party Name _____

Address _____

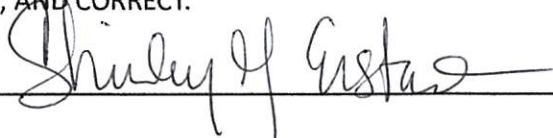
Office sought
by candidate _____

Party Affiliation
(if any) _____

THIS SECTION TO BE COMPLETED BY ALL COMMITTEES

Liquid assets on hand as of (date) 2/14/2018 are \$ 1,200.00.

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

Signature:  Date: 2/14/2018

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.