

## **REGISTRATION AND STATEMENT OF ORGANIZATION**

(All data on this form is public information)

This report is a(r	n) (check one): X New re	egistration Amendment to reg	istration
The organization is for a (check one): X Candidate Committee Political Committee Political Fund			
Committee Name Neighbors For Mitra			
Candidate Name (first and last) Mitra Jalali Nelson			
Mailing Address of Committee (include city, state, and zipcode) 765 N Hampden Ave Apt 424 St. Paul, MN 55114			
Email_neighborsformitra@gmail.com Phone 612-817-2373			
Purpose or Office sought Saint Paul City Council Ward 4			
Geographic Area City of Saint Paul Ward 4			
Officers of the Committee			
	Name	Address	Phone
Chair (required)	Lekie Dwanyen	765 N Hampden Ave Apt 438 St. Paul, MN 55114	763-843-9353
Treasurer/ Secretary (required)	Daniel Nelson	765 N Hampden Ave Apt 424 St. Paul, MN 55114	651-497-1707
Other Principal Officers (if any)	Matt Privratsky	1237 Hubbard Ave St. Paul, MN 55105	651-403-1051
Other Principal Officers (if any)	Houa Moua	825 Seal St Apt 500 St. Paul, MN 55114	(651) 214-2924
Depository(ies)/ Bank Location of	Suprigo Poples 23	00 Como Ave, St Paul, MN 55108	(054) 005 5000
Committee Funds	Sunrise Banks Name	Address	(651) 265-5600 Phone

## THIS SECTION FOR POLITICAL COMMITTEES ONLY

Candidate or Party supported by Political Committee

Candidate Name or Party Name Mitra Jalali Nelson			
Address 765 N Hampden Ave Apt 424 Saint Paul, MN 55114			
Office sought by candidate Saint Paul City Council Ward 4			
Party Affiliation (if any) Democratic Farm Labor			
THIS SECTION TO BE COMPLETED BY ALL COMMITTEES			
Liquid assets on hand as of (date) $02/06/2018$ are $$100$			
I, Mitra Jalali Nelson CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS COMPLETE, TRUE, AND CORRECT.			
Signature:			
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.