

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 St Paul Trash Lawsuit

Candidate Name (first and last) Not applicable

Mailing Address of Committee
(include city, state, and zip code) P.O. Box 16401 St. Paul, MN 55116

Email sttrashpac@gmail.com Phone 651-698-9547

Purpose or Office sought To require a referendum on Ordinance 18-39 (Residential Coord. Collection)

Geographic Area Citywide

Officers of the Committee

	Name	Address	Phone
Chair (required)	Colleen M. Halpine	110 Virginia St St Paul, MN 55102	not-public
Treasurer/ Secretary (required)	Peter K. Butler	2140 Bayard Avenue St. Paul, MN 55116	651-698-9547
Other Principal Officers (if any)			
Other Principal Officers (if any)			

Depository(ies)/
Bank Location of
Committee Funds

Name	Address	Phone
US Bank-Highland Branch	711 Cleveland Ave S St. Paul, MN 55116-1320	651.695.6200

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

Candidate Name or Party Name Not Applicable

Address _____

Office sought
by candidate _____

Party Affiliation
(if any) _____

THIS SECTION TO BE COMPLETED BY ALL COMMITTEES

Liquid assets on hand as of (date) 12/1/2018 are \$ 100.

I, Peter K. Butler CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS
COMPLETE, TRUE, AND CORRECT.

Signature:  Date: 12/1/2018

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.