

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 regi	stration
The organization	is for a (check one): X Candidat	te Committee Political Committe	ee Political Fund
Committee Name Patty for Ward 3			
Candidate Name (first and last) Patricia J. Hartmann			
Mailing Address of Committee (include city, state, and zipcode) 2140 Bayard Avenue, St. Paul, MN 55116-1235			
Email pattypacward3@gmail.com Phone 651-698-9547			
Purpose or Office sought St. Paul City Council			
Geographic Area Ward 3			
	*		
Officers of the Co			_
_1 *	Name		Phone
Chair (required)	Patricia J. Hartmann	1294 Jefferson Ave Saint Paul, MN 55105	651-757-7825
Treasurer/ Secretary	Peter K. Butler	2140 Bayard Avenue St. Paul, MN 55116	651-698-9547
(required)			
Other Principal			
Officers			
(if any)			
Other Principal			
Officers			
(if any)			
Depository(ies)/			
Bank Location of		1 South Cleveland Avenue, St. Paul, MN	
Committee Funds	Name	Address	651-695-8200 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)July 24, 2019 are \$_\$97.74
I, Peter ButlerCERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS
COMPLETE, TRUE, AND CORRECT. Signature: Date: July 24, 2019
Signature: Date: July 24, 2019

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.