

**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 Chris Holbrook 4W4

Candidate Name (first and last) Chris Holbrook

Mailing Address of Committee  
(include city, state, and zipcode) 1302 Van Buren Ave.

Email minnesotachris@comcast.net     Phone 651-644-8413

Purpose or Office sought St. Paul City Council Ward 4

Geographic Area Ward 4

**Officers of the Committee**

	Name	Address	Phone
Chair (required)	Chris Holbrook	1302 Van Buren Ave. St. Paul, MN 55104	651-644-8413
Treasurer/ Secretary (required)	Angie Holbrook	1302 Van Buren Ave. St. Paul, MN 55104	651-644-8413
Other Principal Officers (if any)			
Other Principal Officers (if any)			

Depository(ies)/  
Bank Location of  
Committee Funds

Bremer Bank	427 Snelling Ave. St. Paul, MN 55104	651-288-3881
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) 50 are \$ 50.

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

Signature:  Date: 7-24-19

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.