

**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 Jessica4StPaulSchools

Candidate Name (first and last) Jessica Kopp

Mailing Address of Committee  
(include city, state, and zipcode) PO Box

Email jessica4stpaulschools@gmail.com Phone 651-428-4576

Purpose or Office sought School Board

Geographic Area St Paul

**Officers of the Committee**

	Name	Address	Phone
Chair (required)	Jessica Kopp	1688 Thomas Ave St. Paul, MN 55104	651-428-4576
Treasurer/ Secretary (required)	Greta Sikorski	1240 Thomas Ave St Paul, MN 55104	507-450-8581
Other Principal Officers (if any)			
Other Principal Officers (if any)			

Depository(ies)/  
Bank Location of  
Committee Funds Sunrise Bank 2171 University Avenue West St. Paul, MN 55114 (651) 265-5600

Name Address Phone

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

Candidate Name or Party Name Jessica Kopp

Address PO Box 14415, St Paul, MN 55114

Office sought  
by candidate School Board

Party Affiliation  
(if any) DFL

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**THIS SECTION TO BE COMPLETED BY ALL COMMITTEES**

Liquid assets on hand as of (date) 2/13/19 are \$ 100.00.

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

Signature: Jessica C Kopp Date: 2/13/19

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.