

REGISTRATION AND STATEMENT OF ORGANIZATION

(All data on this form is public information)

SEP 27 2019

ELECTIONS

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 Yes For Saint Paul

Candidate Name (first and last) _____

Mailing Address of Committee
(include city, state, and zipcode) P.O. Box 4566, Saint Paul, MN 55101

Email VoteYesSaintPaul@gmail.com Phone 612-314-9631

Purpose or Office sought To advocate for ORD 18-39

Geographic Area City of Saint Paul

Officers of the Committee

| | Name | Address | Phone |
|-----------------------------------|-----------------------|---|-------|
| Chair (required) | Javier Morillo-Alicea | 89 King Street Saint Paul, MN 55107 | |
| Treasurer/ Secretary (required) | Darren Tobolt | 212 Colborne Street Saint Paul, MN 55102 | |
| Other Principal Officers (if any) | | | |
| Other Principal Officers (if any) | | | |

Depository(ies)/
Bank Location of
Committee Funds Bremmer 372 Saint Peter Street 651-288-3751
Name Address Phone

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

Candidate Name or Party Name Yes For Saint Paul

Address P.O. Box 4566, Saint Paul, MN 55101

Office sought
by candidate _____

Party Affiliation
(if any) _____

THIS SECTION TO BE COMPLETED BY ALL COMMITTEES

Liquid assets on hand as of (date) 9/24/19 are \$ Ø.

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

Signature:  Date: 9/24/2019

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.