

**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 Mageen Caines for ISD 282

Candidate Name (first and last) Mageen Caines

Mailing Address of Committee  
(include city, state, and zipcode) 3100 32<sup>nd</sup> Ave NE St Anthony, MN 55418

Email heff0024@umn.edu Phone 612 353 8155

Purpose or Office sought School Board

Geographic Area ISD 282 (St Anthony - New Brighton)

**Officers of the Committee**

	Name	Address	Phone
Chair (required)	Mageen Caines	3100 32 <sup>nd</sup> Ave NE St Anthony, MN 55418	612 353 8155
Treasurer/ Secretary (required)	Mageen Caines	3100 32 <sup>nd</sup> Ave NE St Anthony, MN 55418	612 353 8155
Other Principal Officers (if any)			
Other Principal Officers (if any)			

Depository(ies)/  
Bank Location of  
Committee Funds Bremer Bank 2401 Lowry Ave NE 612 781 6991  
Name Address Phone  
St Anthony, MN 55418

**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) \_\_\_\_\_

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

Liquid assets on hand as of (date) 8/19/2021 are \$ 110,000.

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

Signature:  Date: 8/19/2021

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.