

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 Volunteers for Guerin

Candidate Name (first and last) Dino Guerin

Mailing Address of Committee
(include city, state, and zipcode) 721 McKnight Rd N unit G 55119

Email dinoguerin@msn.com Phone 612-366-3296

Purpose or Office sought Saint Paul Mayor

Geographic Area City of Saint Paul

Officers of the Committee

	Name	Address	Phone
Chair (required)	Stu Bestland	2573 Oakridge ST Paul 55119	651 246-1000
Treasurer/ Secretary (required)	James Moody	6386 49 th St N Oakdale 55128	651 246-2421
Other Principal Officers (if any)	Christie Guerin	101 10 St ST Paul 55101	651 366-0066
Other Principal Officers (if any)	John Mayer	221 Bridlewood ST Paul 55119	651 735-2260

Depository(ies)/
Bank Location of
Committee Funds Sunrise Bank 2300 Como 651-265-5600
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) _____ are \$ _____.

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

Signature: _____ Date: _____

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.