

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 BILL HOSKO FOR MAYOR OF SAINT PAUL

Candidate Name (first and last) BILL HOSKO

Mailing Address of Committee (include city, state, and zip code) 151 E. 7TH ST. 55101

Email BILL@BILLHOSKO.COM Phone 651-222-4767

Purpose or Office sought SAINT PAUL MAYOR

Geographic Area SAINT PAUL

Officers of the Committee

	Name	Address	Phone
Chair (required)	BILL HOSKO	151 E. 7TH ST.	651-222-4767
Treasurer/ Secretary (required)	BILL HOSKO	151 E. 7TH ST.	651-222-4767
Other Principal Officers (if any)			
Other Principal Officers (if any)			

Depository(ies)/ Bank Location of Committee Funds BREMER BANK 372 ST. PETER ST
 Name Address Phone 651-258-3751

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) NONE

THIS SECTION TO BE COMPLETED BY ALL COMMITTEES

Liquid assets on hand as of (date) 8/30/21 are \$ 500.

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

Signature:  Date: 8/30/21
WILLIAM (BILL) L. HOSKE

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.