

## 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 Sensible Housing Ballot Committee

Candidate Name (first and last) \_\_\_\_\_

Mailing Address of Committee

(include city, state, and zipcode) 1600 West 82nd Street, Suite 110, Minneapolis, MN 55431

Email sensiblehousing@mmha.com

Phone (952) 854-8500

Purpose or Office sought \_\_\_\_\_

Geographic Area Minnesota

### Officers of the Committee

	Name	Address	Phone
Chair (required)	Cecil Smith	1600 West 82nd Street, Suite 110, Minneapolis, MN 55431	(952) 854-8500
Treasurer/ Secretary (required)	Cecil Smith	1600 West 82nd Street, Suite 110, Minneapolis, MN 55431	(952) 854-8500
Other Principal Officers (if any)			
Other Principal Officers (if any)			

Depository(ies)/

Bank Location of

Committee Funds

Bridgewater Bank

4450 Excelsior Blvd., Suite 100  
Saint Louis Park, MN 55416

(952) 893-6868

Name

Address

Phone

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

Candidate Name or Party Name \_\_\_\_\_

Address \_\_\_\_\_

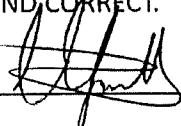
Office sought  
by candidate \_\_\_\_\_

Party Affiliation  
(if any) \_\_\_\_\_

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

Liquid assets on hand as of (date) August 6, 2021 are \$ 0.

I, CECIL SMITH \_\_\_\_\_ CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS  
COMPLETE, TRUE, AND CORRECT.

Signature:  \_\_\_\_\_ Date: 8/6/21

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.