

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			istration
The organization is for a (check one): Candidate Committee Political Committee Political Fund			
Committee Name Vote Yes Roseville Committee			
Candidate Name (first and last) N/A			
Mailing Address of Committee (include city, state, and zipcode) 1396 Sextant Ave W, Roseville, MN 55113			
Email_voteYESroseville@gmail.com Phone 651-983-5163			
Purpose or Office sought Support ballot questions regarding operating levy for ISD623			
Geographic Area ISD623			
Officers of the Committee			
	Name		Phone
Chair (required)	Margot Olsen	1830 Holton Ave Falcon Heights, MN 55113	651-646-2983
Treasurer/ Secretary (required)	Mark Traynor	1396 Sextant Ave W Roseville, MN 55113	651-983-5163
Other Principal Officers (if any)	Katie Engman	1413 Eldridge Ave W Roseville, MN 55113	651-484-9329
Other Principal Officers (if any)			
Depository(ies)/ Bank Location of Committee Fund	27 Ro S Affinity Plus Federal Credit Union Name	750 E. Snelling Dr. Oseville, MN 55113 Address	1-800-322-7228 Phone
			5 515.00 A.5.00

THIS SECTION FOR POLITICAL COMMITTEES ONLY

Candidate or Party supported by Political Committee

Candidate Name or Party Name N/A			
Address			
Office sought by candidate			
Party Affiliation (if any)			
THIS SECTION TO BE COMPLETED BY ALL COMMITTEES			
Liquid assets on hand as of (date) October 5, 2021 are \$ 1190.00 .			
I, Mark Traynor CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS COMPLETE, TRUE, AND CORRECT.			
Signature: Mark Vigy 20 Date: 10/5/2021			
ANY PERSON WHO SIGNS AND CERTIFIES TO BE TRUE A STATEMENT WHICH HE OR SHE KNOWS CONTAINS			

ANY PERSON WHO SIGNS AND CERTIFIES TO BE TRUE A STATEMENT WHICH HE OR SHE KNOWS CONTAINS FALSE INFORMATION OR WHO KNOWINGLY OMITS REQUIRED INFORMATION IS GUILTY OF A MISDEMEANOR.