

## **REGISTRATION AND STATEMENT OF ORGANIZATION**

(All data on this form is public information)

This report is a(n	) (check one): X New re	gistration Amendment to reg	gistration
The organization	is for a (check one): Candida	te Committee X Political Commit	tee Political Fund
Committee Name Community Awareness for ISD 624 Taxpayers			
Candidate Name	(first and last)		
Mailing Address of Committee (include city, state, and zipcode) PO Box 10931, White Bear Lake, MN 55110			
Email_isd624taxpayers@gmail.com Phone (651) 243-1499			
Purpose or Office sought to inform the community as it relates to taxation and spending within ISD 624			
Geographic Area White Bear Lake Area School District			
Officers of the Committee			
Officers of the Co	ommittee		
	Name	Address	Phone
Chair (required)	Jennifer Thayer	5729 Morgan Trl White Bear Lake, MN 55110	715-299-0049
Treasurer/ Secretary (required)	Rebekah Bradfield	3831 Highland Ave White Bear Lake, MN 55110	224-805-3476
Other Principal Officers (if any)			
Other Principal Officers (if any)			
Depository(ies)/ Bank Location of Committee Funds	5 · 5 · Wh	51 3rd St iite Bear Lake, MN 55110	651-426-7800
20	Name	Address	Phone

## 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) $8/1/2022$ are \$ 0.9.
I, Rebekal M Bradfield CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS COMPLETE, TRUE, AND CORRECT.
Signature: Rhokoh M Brudbeld Date: 8/1/2002
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.