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REGISTRATION AND STATEMENT OF ORGANIZATION

(All data on this form is public information)

This report is a(n) (check one): X New registration Amendment to registration							
The organization is for a (check one): X Candidate Committee Political Committee Political Fund							
Committee Name Campaign Fund for Tena Monson							
Candidate Name	(first and last) Tena	Monson					
Mailing Address of Committee (include city, state, and zipcode) 3331 New Brighton Rd., Arden Hills, MN 55112							
Email tenaforardenhill@gmail.com Phone 320.223.9660							
Purpose or Office sought Arden Hills City Council							
Geographic Area City of Arden Hills							
Officers of the Co	ommittee						
	Name	Address	Phone				
Chair (required)	Tena Monson	3331 New Brighton Rd., Arden Hills, MN 55112	320,223.9660				
Treasurer/ Secretary (required)	ChrisHughes	3515 Snelling Ave North, Arden Hills, MN 55112	651.635.0647				
Other Principal Officers (if any)							
Other Principal Officers (if any)							
Depository(ies)/ Bank Location of Committee Fund	s Old National Bank Name	644 Arden Hills MN 1240 County Road E West Arden Hills. MN 55112 Address	763.656.1628 Phone				

THIS SECTION FOR POLITICAL COMMITTEES ONLY

Candidate or Party supported by Political Committee

Candidate Name or Party Name	
Address	
Office sought by candidate	
by candidate	
Party Affiliation (if any)	
THIS SECTION TO BE COMPLETED BY ALL CO	DMMITTEES
Liquid assets on hand as of (date) 8-14-22	are \$_2,341.25
I, Tena Monson	CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS
COMPLETE, TRUE, AND CORRECT	_
Signature: Lens Len	Date: 8-14-22

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.