

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	2				
Candidate Name	(first and last)				
Mailing Address	of Committee				
Email		P	hone		
Purpose or Office	sought				
Geographic Area					
Officers of the Committee					
1	Name	Address	Ph	one	
Chair (required)					
Treasurer/ Secretary (required)					
Other Principal Officers (if any)					
Other Principal Officers (if any)					
Depository(ies)/ Bank Location of Committee Funds)	A .ll	ni	2000	
	Name	Address	PI	none	

THIS SECTION FOR POLITICAL COMMITTEES ONLY

Candidate or Party supported by Political Committee

Candidate Name or Party Name	
,	
Address	
Office sought	
Party Affiliation (if any)	
THIS SECTION TO BE COMPLETED BY AL	L COMMITTEES
Liquid assets on hand as of (date)	are \$
I,COMPLETE, TRUE, AND CORRECT.	CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS
Signature:	Date:
ANY DEDOON WHO SIGNS AND CEPTIEIE	S TO BE TRUE A STATEMENT WHICH HE OD SHE KNOWS CONTAINS

FALSE INFORMATION OR WHO KNOWINGLY OMITS REQUIRED INFORMATION IS GUILTY OF A MISDEMEANOR.