

REGISTRATION AND STATEMENT OF ORGANIZATION

New Registration

Amendment

- 1. **Principal Campaign Committee** (Cities of Bloomington, Brooklyn Park, & Minneapolis, or Hennepin County Government elective offices) (See registration form instructions.) Complete Items 4-10 and 12-13.
- 2. **Political Committee** (See registration form instructions.) Complete items 4-7, 10, 12-13.
- 3. **Political Fund** (See registration form instructions.) Complete items 4-7, 10-13.

4. Name of Committee or Fund: Neighbors for Scott Vreeland for Park Board at-large

5. Mailing Address of Committee or Fund (Include City, State, Zip Code):  
2437 33rd Ave. S. Mpls. MN 55406

6. E-Mail Address:  
svattheriver@aol.com

7. Telephone of Committee or Fund:  
(612) 721-7892

8. Name of Candidate - If Principal Campaign Committee:  
Scott Vreeland

Candidate's Address:  
2437 33rd Ave. S. Mpls. MN 55406

Candidate's Phone:  
(612) 721-7892

9. Office Sought or Held by Candidate:

Bloomington: Mayor Council District No. \_\_\_\_\_

Brooklyn Park: Mayor Council District No. \_\_\_\_\_

Minneapolis: Mayor Council Ward No. \_\_\_\_\_ Library Board Park Board District No. at large

Minneapolis School District #1 District No. (1-6 OR at Large) \_\_\_\_\_ Board of Estimate/Taxation

Hennepin County: Attorney Sheriff Commissioner District No. \_\_\_\_\_

Three Rivers Park District No. \_\_\_\_\_

10. Committee Officers: \_\_\_\_\_ Name \_\_\_\_\_ Mailing Address for Committee Business \_\_\_\_\_ Phone (612) 721-7892

Chair:

Treasurer: Scott Vreeland 2437 33rd Ave. S. Mpls MN 55406

E-mail address  
svattheriver@aol.com

Deputy Treasurer (if any):

11. Associations Supporting a Political Fund:

12. Depository/Bank (Location of Committee Funds): Wells Fargo

Address: P.O. Box 6995  
Portland, OR 97228

13. Certification: Any individual who signs and certifies to be true a statement which the individual knows contains false information or who knowingly omits required information is guilty of a gross misdemeanor.

I, (Print Name) Scott Vreeland, The Treasurer CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS COMPLETE, TRUE AND CORRECT. Once submitted, all information within this form is public data.

[Signature]  
(Signature of Treasurer)

11/20/17  
(Date)

Received by Hennepin County  
Taxpayer Services

NOV 20 2017

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