



REGISTRATION AND STATEMENT OF ORGANIZATION

(All data on this form is public information)

This report is a(n) (check one): _____ New Registration Amendment

The organization is for a (check one): _____ Candidate Political Committee _____ Office Holder

(Please Print or Type)

Name of Committee:

Saint Paul Republican City Committee

Mailing Address of Committee (include city state & zip code)

515 S. Lexington Pkwy. # 502, St Paul MN 55116

Phone Number:

651-699-1937

Purpose of Office

To carry out the business of the Republican Party in the city of St. Paul

RECEIVED

Geographic Area

City of St. Paul

MAY 18 2007

Officers of Committee

RAMSEY COUNTY ELECTIONS

Officer	Name	Address	Phone Number
Chair:	Scott Walker	100 Fairview Ave. South St. Paul, MN 55105	(651) 699-3354
Co-Chair (if any)	NA		
Treasurer	Jennette A. Gudgeal	515 S. Lexington Pkwy # 502 St. Paul, MN 55116	(651) 699-1937
Deputy Treasurer (if any)	NA		
Other Principal Officers (if any)	NA		
Other Principal Officers (if any)	NA		

Custodian of Books	Name: Jennette A. Gudgeal	Address: 515 S. Lexington Pkwy # 502 St. Paul, MN 55116	Phone Number: (651) 699-1937
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Depository(ies)/Bank Location of Committee Funds	Name: A.F. Fidelity Plus Fed. Credit Union	Address: 2520 University Ave, S.E. Mpls. MN. 55414	Phone Number: (651) 321-9800
Depository(ies)/Bank Location of Committee Funds	Name: _____	Address: _____	Phone Number: _____

This section for Political Committees Only

Candidate or Party Supported by Political Committee

Candidate or Party Name	Address	Office	Party Affiliation (If any)

Is the committee a continuing one? (Check appropriate response) Yes No

This Section is To Be Completed By All Committees

Liquid assets on hand as of (date) ~~\$1,084.24~~ 3/31/07 are \$ 1,084.24

I, Jennette Gudael, CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS
(Print or type name)

COMPLETE, TRUE AND CORRECT.

Signature: Jennette Gudael
Treasurer, Candidate or Office Holder

Date: 5/3/07

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

RAMSEY COUNTY GOVERNMENT CENTER WE
ELECTIONS OFFICE
50 KELLOGG BLVD. W. S. #722
ST. PAUL MN 55102-1657

Depository (financial institution) of committee or fund

1. Depository
Affinity Plus Federal Credit Union
Address
2520 University Ave, S.E
City, state, zip
Mpls. MN 55414

2. Depository
Address
City, state, zip

Associations that support the political fund (for political funds only)

Association name
Address
City, state, zip

Association name
Address
City, state, zip

Nonprofit corporation providing administrative assistance (if any)

Nonprofit corporation name
Address
City, state, zip

Category of committee or fund (check one and complete the line)

1. Political party organization: Democratic Farmer Labor Constitution Party of Minnesota Green Party of Minnesota
 Independence Party of Minnesota Progressive Minnesota
 Republican Party of Minnesota Other
2. Business oriented: Trade Health Professional Other
3. Labor oriented: Education Other
4. Issue oriented: Membership association Other

Certification

I, Jennette A. Gudge
(print or type name)

certify that the information contained on this form is complete, true, and correct.

Jennette A. Gudge
Signature of treasurer

May 14, 2007
Date

Any person who signs and certifies to be true a report or statement which the person knows contains false information, or who knowingly omits required information, is guilty of a gross misdemeanor.



Campaign Finance & Public Disclosure Board

Fairfax, Centennial Office Building, 638 Cedar Street, St. Paul MN 55105-1603, 651/296-5146, 800/657-3889

Registration and Statement of Organization Political Committee or Political Fund under Minn. Stat. § 10A.14

Instructions

- This statement is completed for registration of each political committee or political fund. It must be signed and dated on page two by the current treasurer of record or by the deputy treasurer.
- The report is due at the Campaign Finance and Public Disclosure Board office within 14 days after the committee or fund raises or spends in excess of \$100 or 10 days after any change in previously filed information.
- This statement may be filed electronically. Fax number: 651/296-1722.
- Do not use pencil or red ink.
- All information on this report is public information.
- Address questions to Board staff at 651/296-5615; 800/657-3889; or for TTY/TDD communication contact us through the Minnesota Relay Service at 800/627-3529
- Board staff may be reached by e-mail at: cf.board@state.mn.us.

Registration

New registration Amendment: registration no. # 20722

Committee

Chair

Committee name
St. Paul Republican City Committee

Address
515 S. Lexington Relay # 502

City, state, zip
St. Paul, MN 55116

Telephone (daytime)
(651) 699-1937

Chair name
Scott Walker

Address
100 Fairview Ave South

City, state, zip
St. Paul, MN 55116 1A5

Telephone (daytime)
(651) 699-3354

Treasurer

Deputy treasurer (if any)

Treasurer name
Jennette A. Rudgel

Address
515 S. Lexington Relay #502

City, state, zip
St. Paul, MN 55116

Telephone (daytime)
(651) 699-1937

Deputy treasurer name
/

Address
/

City, state, zip
/

Telephone (daytime)
/

This document is available in alternative formats to individuals with disabilities by calling 651/296-5146, 800/657-3889, or through the Minnesota Relay Service at 800/627-3529.