



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: Fran Lamb for City Council Volunteers	
Mailing Address of Committee (include city state & zip code) 806 JAMES AVE, ST PAUL MN 55102	Phone Number: 651-434-7979
Purpose or Office: City Council, City of St. Paul	
Geographic Area: WARD 2	

RECEIVED
JUN 18 2007

RAMSEY COUNTY ELECTIONS

Officers of Committee

Officer	Name	Address	Phone Number
Chair:	Elli Ansari	4680 MANITOWIC TOWER BAY MN.	62-747 8447
Co-Chair (if any)			
Treasurer	Elli Ansari	SAME AS ABOVE	
Deputy Treasurer (if any)			
Other Principal Officers (if any)			
Other Principal Officers (if any)			

Custodian of Books	Name:	Address:	Phone Number:

Depository(ies)/Bank Location of Committee Funds	Name:	Address:	Phone Number:
Depository(ies)/Bank Location of Committee Funds	Name:	Address:	Phone Number:
	THE POKER	BRANCH / SMITH AVE	651-

This section for Political Committees Only

Candidate or Party Supported by Political Committee

Candidate or Party Name	Address	Office	Party Affiliation (if any)
FRANK ZAMB	806 JAMES AVE	NA	


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) June 18, 2007 are \$ 0

I, FRANKS E. ZAMB, CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS
(Print or type name)

COMPLETE, TRUE AND CORRECT

Signature: 
(Treasurer, Candidate or Office Holder)

Date: June 18 2007

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.