

DETAILED SUMMARY OF

REPORT OF CONTRIBUTIONS AND EXPENDITURES

(To be used by Candidate Committees, Political Committees, Issue Committees and Political Party Committees)

1. FULL NAME OF COMMITTEE (as shown on statement of organization) <u>Ross Cunniff for Council</u>	2. NAME OF FINANCIAL INSTITUTION <u>First National Bank</u>
ADDRESS <input type="checkbox"/> check if different than previously reported <u>2267 Clydesdale Drive</u>	ADDRESS <u>2100 W. Drake Rd Ft Collins CO 80526</u>
CITY, STATE and ZIP CODE <u>Ft Collins, CO 80526</u>	3. SECRETARY OF STATE I.D. NUMBER

4. Did you accept Voluntary Spending Limits? (State Candidate Committees Only) Yes No

5. TYPE OF REPORT (County and Municipal Elections)

Pre-election Reports	Post-election Reports
<input checked="" type="checkbox"/> 21 days before election (3/16/99)	<input type="checkbox"/> 30 days after election (5/6/99)
<input type="checkbox"/> 14 days before election (3/23/99) (City of Fort Collins only)	<input type="checkbox"/> Annual (April 1 of each year)
<input type="checkbox"/> Friday before election (4/2/99)	

Termination Report Other (specify) _____ Is this report an Amendment? Yes No

6. REPORTING PERIOD COVERED <u>2-11-99</u> THRU <u>3-16-99</u>	COLUMN A This Rept. Period	COLUMN B Calendar Year-To-Date
7. FUNDS ON HAND AT BEGINNING OF REPORTING PERIOD	\$ - 0 -	XXXXXXXXXXXX
8. TOTAL CONTRIBUTIONS (from Line 16)	\$ 2979.15	\$ 2979.15
9. TOTAL EXPENDITURES (from Line 21)	\$ 951.24	\$ 951.24
10. FUNDS ON HAND AT CLOSE OF REPORTING PERIOD	\$ 518.74	XXXXXXXXXXXX
11. Debt and Obligations Owed BY the Committee	\$ 1509.17	XXXXXXXXXXXX
12. Pledges Owed TO the Committee	\$ -	XXXXXXXXXXXX

I certify that I have examined this Report of Contributions and Expenditures and to the best of my knowledge and belief it is true, correct and complete. I understand submission of false, erroneous, or incomplete information may be subject to sanctions in accord with CRS 1-45-113.

PRINT NAME OF REG. AGENT: Ross Cunniff AGENT SIGNATURE: [Signature] DATE 3/15/99

I. CONTRIBUTIONS - [as set forth by CRS 1-45-103(4)] Use Schedule "A" for each line item below, except for Loans)

	<i>COLUMN A - Total This Reporting Period</i>	<i>COLUMN B - Total Calendar Year-To-Date</i>
13. <i>Itemized Contributions from Individuals and Persons (Other than Political Committees)</i>	\$ 1390.00	\$ 1390.00
a. <i>Total of Non-Itemized Contributions (Under \$20)</i>	\$ 79.98	\$ 79.98
b. <i>Political Party Committees</i>	\$ —	\$ —
c. <i>Political Committees</i>	\$ —	\$ —
14. <i>Loans Received (Use Schedule C)</i>	\$ 1509.17	\$ 1509.17
15. <i>Other Receipts (Dividends, Interest, Refunds, Rebates, etc.)</i>	\$ —	\$ —
16. TOTAL CONTRIBUTIONS (Add all of the above items)	\$ 2979.15	\$ 2979.15

II. EXPENDITURES - [as set forth by CRS 1-45-103(6)] Use Schedule "B" for each line item below, except for Loans

	<i>COLUMN A - Total This Reporting Period</i>	<i>COLUMN B - Total Calendar Year-To-Date</i>
17. <i>Itemized Expenditures (\$20 and up)</i>	\$ 932.74	\$ 932.74
18. <i>Total of Non-Itemized Expenditures</i>	\$ 18.50	\$ 18.50
19. <i>Loan Repayments (Use Schedule C)</i>	\$ —	\$ —
20. <i>Return of Contributions to:</i>		
a. <i>Individuals/Persons Other than Political Committees</i>	\$ —	\$ —
b. <i>Political Committees</i>	\$ —	\$ —
c. <i>Political Party Committees</i>	\$ —	\$ —
21. TOTAL EXPENDITURES (Add all of the above items)	\$ 951.24	\$ 951.24

III. OFFSETS TO OPERATING EXPENDITURES (Offsets to expenditures means a payment made by a person to a third party for the benefit of any committee or party. Such goods or services are used directly or indirectly by the committee or party for its purposes. [1-45-103(4)(II); 1-45-108(1); 1-45-104 and Secretary of State Rule 24.3]) - USE SCHEDULE A- LISTING ONLY DO NOT ADD TO CONTRIBUTIONS OR EXPENDITURES

	<i>COLUMN A - This Reporting Period</i>	<i>COLUMN B - Calendar Year-To-Date</i>
<i>Total Itemized Offsets (\$20 and over)</i>	\$ —	\$ —
<i>Total Non-Itemized Offsets</i>	\$ 18.00	\$ 18.00

IV. CONTRIBUTIONS IN-KIND (The fair market value of any gift or loan of property made to any candidate committee, issue committee, political party committee or political committee) USE STATEMENT OF ITEMIZED CONTRIBUTION IN-KIND FORM - LISTING ONLY DO NOT ADD TO CONTRIBUTIONS OR EXPENDITURES

	<i>COLUMN A - This Reporting Period</i>	<i>COLUMN B - Calendar Year-To-Date</i>
<i>Total Itemized Contributions In-Kind (\$20 and over)</i>	\$ —	\$ —
<i>Total Non-Itemized Contributions In-Kind</i>	\$ —	\$ —

SCHEDULE A

FULL NAME OF COMMITTEE (as shown on statement of organization)

Ross Cunniff for Council

ITEMIZED CONTRIBUTIONS - \$20 or more

(Use a separate schedule(s) for each line item[#13, a, b, c, 14 and 16] of the Detail Summary Page)

No information copied from such reports shall be sold or used by any person for the purpose of soliciting contributions or for any commercial purpose. [CRS 1-45-111(1)(d)]

<p>A. Full Name of Contributor, Address and Zip <u>Glen Colton</u> <u>625 Hinsdale Dr</u> <u>Ft Collins Co 80526</u></p> <p>Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Amount of Contribution This Report Period</p> <p>\$ <u>50.00</u></p>	<p>Date Contribution Received</p> <p><u>2-11-99</u></p> <p>Aggregate Year to Date \$ <u>50.00</u></p>
<p>B. Full Name of Contributor, Address and Zip <u>Trudy Haines</u> <u>625 Hinsdale Dr</u> <u>Ft Collins Co 80526</u></p> <p>Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Amount of Contribution This Report Period</p> <p>\$ <u>50.00</u></p>	<p>Date Contribution Received</p> <p><u>2-11-99</u></p> <p>Aggregate Year to Date \$ <u>50.00</u></p>
<p>C. Full Name of Contributor, Address and Zip <u>Ross Cunniff</u> <u>2267 Clydesdale Dr</u> <u>Ft Collins Co 80526</u></p> <p>Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Amount of Contribution This Report Period</p> <p>\$ <u>500.00</u></p>	<p>Date Contribution Received</p> <p><u>2-11-99</u></p> <p>Aggregate Year to Date \$ <u>500.00</u></p>
<p>D. Full Name of Contributor, Address and Zip <u>Roy Cunniff</u> <u>224 W. Greening Ave</u> <u>Las Cruces, NM 88005</u></p> <p>Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Amount of Contribution This Report Period</p> <p>\$ <u>50.00</u></p>	<p>Date Contribution Received</p> <p><u>2-18-99</u></p> <p>Aggregate Year to Date \$ <u>50.00</u></p>

SUBTOTAL - THIS PAGE

\$ 650.00

SCHEDULE A

FULL NAME OF COMMITTEE (as shown on statement of organization)

Ross Cunniff for Council

ITEMIZED CONTRIBUTIONS - \$20 or more

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<p>A. Full Name of Contributor, Address and Zip Donna J. Cunniff 224 W. Greening Ave Las Cruces, NM 88005</p>	<p>Amount of Contribution This Report Period</p>	<p>Date Contribution Received</p>
<p>Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>\$ 50.00</p>	<p>2-18-99 Aggregate Year to Date \$ 50.00</p>
<p>B. Full Name of Contributor, Address and Zip Tim Geppert 2818 McKeag Drive Ft Collins CO 80526</p>	<p>Amount of Contribution This Report Period</p>	<p>Date Contribution Received</p>
<p>Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>\$ 50.00</p>	<p>2-23-99 Aggregate Year to Date \$ 50.00</p>
<p>C. Full Name of Contributor, Address and Zip Margo Geppert, M.D. 2818 McKeag Drive Ft Collins CO 80526</p>	<p>Amount of Contribution This Report Period</p>	<p>Date Contribution Received</p>
<p>Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>\$ 50.00</p>	<p>2-23-99 Aggregate Year to Date \$ 50.00</p>
<p>D. Full Name of Contributor, Address and Zip Mary Jo Ziegman 1039 W. Mountain Ave Ft Collins CO 80521</p>	<p>Amount of Contribution This Report Period</p>	<p>Date Contribution Received</p>
<p>Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>\$ 25.00</p>	<p>2-27-99 Aggregate Year to Date \$ 25.00</p>

SUBTOTAL - THIS PAGE

\$ 175.00

SCHEDULE A

FULL NAME OF COMMITTEE (as shown on statement of organization)

Ross Cunniff for Council

ITEMIZED CONTRIBUTIONS - \$20 or more

(Use a separate schedule(s) for each line item[#13, a, b, c, 14 and 16] of the Detail Summary Page)

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A. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
Cynthia Bennett 2524 Charolais Drive Ft Collins CO 80526		2-27-99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ 20.00	Aggregate Year to Date \$ <u>20.00</u>
B. Full Name of Contributor, Address and Zip Marie Southworth 335 Capri Ave Las Cruces NM 88005		2-27-99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ 50.00	Aggregate Year to Date \$ <u>50.00</u>
C. Full Name of Contributor, Address and Zip Paul martz 2706 Appleton Ct Ft Collins CO 80525		3-8-99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ 20.00	Aggregate Year to Date \$ <u>20.00</u>
D. Full Name of Contributor, Address and Zip Gloria Davidson 2731 Dixon Creek Ln. Ft Collins CO 80524		3-8-99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ 50.00	Aggregate Year to Date \$ <u>50.00</u>

SUBTOTAL - THIS PAGE

\$ 140.00

SCHEDULE A

FULL NAME OF COMMITTEE (as shown on statement of organization)

Ross Cunniff for Council

ITEMIZED CONTRIBUTIONS - \$20 or more

(Use a separate schedule(s) for each line item[#13, a, b, c, 14 and 16] of the Detail Summary Page)

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A. Full Name of Contributor, Address and Zip <u>Lisa Lindburg</u> <u>2630 Shavano Ct.</u> <u>Ft Collins CO 80526</u>	Amount of Contribution This Report Period	Date Contribution Received <u>3-8-99</u>
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ <u>20.00</u>	Aggregate Year to Date \$ <u>20.00</u>
B. Full Name of Contributor, Address and Zip <u>Deb Anonson</u> <u>2266 Clydesdale Dr</u> <u>Ft Collins CO 80526</u>	Amount of Contribution This Report Period	Date Contribution Received <u>3-8-99</u>
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ <u>20.00</u>	Aggregate Year to Date \$ <u>20.00</u>
C. Full Name of Contributor, Address and Zip <u>Kirk Brush</u> <u>1843 Scarborough Dr</u> <u>Ft Collins CO 80526</u>	Amount of Contribution This Report Period	Date Contribution Received <u>3-8-99</u>
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ <u>50.00</u>	Aggregate Year to Date \$ <u>50.00</u>
D. Full Name of Contributor, Address and Zip <u>Ramon Ajero</u> <u>3712 Soderburg Dr</u> <u>Ft Collins CO 80526</u>	Amount of Contribution This Report Period	Date Contribution Received <u>3-15-99</u>
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ <u>50.00</u>	Aggregate Year to Date \$ <u>50.00</u>

SUBTOTAL - THIS PAGE

\$ 140.00

SCHEDULE A

FULL NAME OF COMMITTEE (as shown on statement of organization)

Ross Cunniff for Council

ITEMIZED CONTRIBUTIONS - \$20 or more

(Use a separate schedule(s) for each line item[#13, a, b, c, 14 and 16] of the Detail Summary Page)

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A. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
Maureen Hoffert 530 Smith St Ft Collins CO 80524		3-15-99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ 50.00	Aggregate Year to Date \$ <u>50.00</u>
B. Full Name of Contributor, Address and Zip David Lechtenberg 2912 Mercy Dr. Ft Collins CO 80526		3-15-99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ 20.00	Aggregate Year to Date \$ <u>20.00</u>
C. Full Name of Contributor, Address and Zip Lili Romo 1708 Dora St Ft Collins CO 80526		3-15-99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ 20.00	Aggregate Year to Date \$ <u>20.00</u>
D. Full Name of Contributor, Address and Zip Roy Broeren 2841 McKeag Dr Ft Collins CO 80526		3-15-99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ 20.00	Aggregate Year to Date \$ <u>20.00</u>

SUBTOTAL - THIS PAGE

\$ 110.00

SCHEDULE A

FULL NAME OF COMMITTEE (as shown on statement of organization)

Ross Cunniff for Council

ITEMIZED CONTRIBUTIONS - \$20 or more

(Use a separate schedule(s) for each line item[#13, a, b, c, 14 and 16] of the Detail Summary Page)

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A. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
<u>Daryl Poe</u> <u>1960 Kingsborough Dr</u> <u>Ft Collins Co 80526</u>		<u>3-15-99</u>
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ <u>50.00</u>	Aggregate Year to Date \$ <u>50.00</u>
B. Full Name of Contributor, Address and Zip <u>Chris J. Bachman</u> <u>2730 Garrett Dr</u> <u>Ft Collins CO 80526</u>		<u>3-15-98</u>
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ <u>25.00</u>	Aggregate Year to Date \$ <u>25.00</u>
C. Full Name of Contributor, Address and Zip <u>Lori L. Roland</u> <u>2757 McKeag Dr</u> <u>Ft Collins CO 80526</u>		<u>3-15-99</u>
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ <u>50.00</u>	Aggregate Year to Date \$ <u>50.00</u>
D. Full Name of Contributor, Address and Zip <u>Kathleen Mason</u> <u>861 Sandy Cove Ln</u> <u>Ft Collins CO 80525</u>		<u>3-15-98</u>
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ <u>50.00</u>	Aggregate Year to Date \$ <u>50.00</u>

SUBTOTAL - THIS PAGE

\$ 175.00

SCHEDULE B

FULL NAME OF COMMITTEE (as shown on statement of organization)

Ross Cunniff for Council

ITEMIZED EXPENDITURES - \$20 or more

(Use a separate schedule(s) for each line item [#17, 18, and 19a, b, c] of the Detailed Summary Page)

No information copied from such reports shall be sold or used by any person for the purpose of soliciting contributions or for any commercial purpose. [CRS 1-45-111(1)(d)]

<p>A. Full Name, Address and Zip <u>Kinkos</u> <u>2834 S. College Ave</u> <u>Ft Collins CO 80525</u></p> <p>Expenditure For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date <u>3-2-99</u></p>	<p>Amount of Expenditure This Reporting Period <u>\$ 61.65</u></p> <p>Purpose of Expenditure <u>paper for fliers</u></p>
<p>B. Full Name, Address and Zip <u>Alliance 360 Ltd</u> <u>903 Buckingham St</u> <u>Ft Collins CO 80524</u></p> <p>Expenditure For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date <u>3-3-99</u></p>	<p>Amount of Expenditure This Reporting Period <u>\$ 68.00</u></p> <p>Purpose of Expenditure <u>4- 8/2x11 film negs.</u></p>
<p>C. Full Name, Address and Zip <u>Lewis Paper Place</u> <u>300 Lincoln Ct Unit D</u> <u>Ft Collins CO 80524</u></p> <p>Expenditure For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date <u>3-4-99</u></p>	<p>Amount of Expenditure This Reporting Period <u>\$ 198.70</u></p> <p>Purpose of Expenditure <u>paper for fliers</u></p>
<p>D. Full Name, Address and Zip <u>St. Patricks Day Parade</u></p> <p>Expenditure For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date <u>3-5-99</u></p>	<p>Amount of Expenditure This Reporting Period <u>\$ 40.00</u></p> <p>Purpose of Expenditure <u>parade entry fee</u></p>

SUBTOTAL - THIS PAGE

\$ 368.35

SCHEDULE B

FULL NAME OF COMMITTEE (as shown on statement of organization)

Ross Cunniff for Council

ITEMIZED EXPENDITURES - \$20 or more

(Use a separate schedule(s) for each line item [#17, 18, and 19a, b, c] of the Detailed Summary Page)

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A. Full Name, Address and Zip <u>Color Pro</u> <u>819 Locust Ct</u> <u>Ft Collins CO 80524</u>	Date <u>3-6-99</u>	Amount of Expenditure This Reporting Period \$ <u>564.39</u>
Expenditure For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Purpose of Expenditure <u>printing fliers</u>
B. Full Name, Address and Zip	Date	Amount of Expenditure This Reporting Period \$ _____
Expenditure For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Purpose of Expenditure
C. Full Name, Address and Zip	Date	Amount of Expenditure This Reporting Period \$ _____
Expenditure For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Purpose of Expenditure
D. Full Name, Address and Zip	Date	Amount of Expenditure This Reporting Period \$ _____
Expenditure For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Purpose of Expenditure

SUBTOTAL - THIS PAGE

\$ 564.39

SCHEDULE C

FULL NAME OF COMMITTEE (as shown on statement of organization)

Ross Cunniff for Council**LOANS* - Loans Owed by the Committee**

(Use a separate schedule(s) for each loan. This form is for line item #15 and #20 of Detailed Summary Page)

No information copied from such reports shall be sold or used by any person for the purpose of soliciting contributions or for any commercial purpose. [CRS 1-45-111(1)(d)]

A. Full Name, Address and Zip Code of Loan Source	Original Amount of Loan	Interest Rate %
Ross Cunniff 2267 Clydesdale Dr Ft Collins CO 80526	1509.17	—

Amount Repaid This Reporting Period: \$ —Total Cumulative Payment To Date: \$ —Outstanding Balance \$ 1509.17TERMS OF LOAN: Date Loan Received Jan/Feb 19 99 Due Date for Final Payment n/A 19—

LIST ALL ENDORSERS OR GUARANTORS (if applicable) TO THIS LOAN

FULL NAME	COMPLETE ADDRESS (Street Number and Name, City/Town, State and Zip)	AMOUNT GUARANTEED
none		

* CRS 1-45-104(9) Notwithstanding any other section of this article to the contrary, a state candidate's candidate committee may receive a loan from a financial institution organized under state or federal law if the loan bears the usual and customary interest rate, is made on a basis that assures repayment, is evidenced by a written instrument, and is subject to a due date or amortization schedule.



STATEMENT
OF
CONTRIBUTIONS IN-KIND
(CRS 1-45-103[4][a][III] and CRS 1-45-108[1])

FOR OFFICE USE ONLY

1. FULL NAME OF COMMITTEE (as shown on the statement of organization)

Ross Cunniff for Council

ADDRESS (number & name, city/town, state, zip code)

2267 Clydesdale Dr
Ft Collins CO 80526

2. REPORTING PERIOD

Pre-election Reports

- 21 days before election (3/16/99)
 14 days before election (3/23/99) (City of Fort Collins only)
 Friday before election (4/2/99)

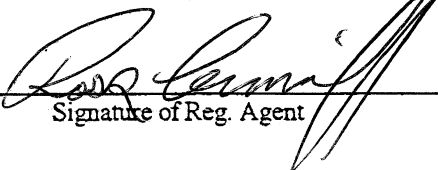
Post-election Reports

- 30 days after election (5/6/99)
 Annual (April 1 of each year)

Full Name & Address	Fair Market Value	Date Given	Brief Description
none	\$		
	\$		
	\$		
	\$		
	\$		

I certify that I have examined this Statement of Contributions In Kind and to the best of my knowledge and belief it is true, correct and complete. I understand that submission of false, erroneous, or incomplete information may be subject to sanctions in accord with CRS 1-45-113.

Ross Cunniff
Print Name of Reg. Agent


Signature of Reg. Agent

3/15/99
Date