



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) <i>C. To Elect KAREN W</i>	2. NAME OF FINANCIAL INSTITUTION <i>1st NAT'l Bank</i>
ADDRESS <input type="checkbox"/> check if different than previously reported <i>3009 Phoenix</i>	ADDRESS <i>1600 N edge</i>
CITY, STATE and ZIP CODE <i>Ft. Collins Co 80525</i>	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 type="checkbox"/> 21 days before election (3/16/99) | <input type="checkbox"/> 30 days after election (5/6/99) |
| <input checked="" 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	COLUMN A This Rept. Period	COLUMN B Calendar Year-To-Date
<i>3-16-99 THRU 3-23-99</i>		
7. FUNDS ON HAND AT BEGINNING OF REPORTING PERIOD	\$ <i>260.05</i>	XXXXXXXXXXXX
8. TOTAL CONTRIBUTIONS (from Line 16)	\$ <i>620⁰⁰</i>	\$ <i>2550⁰⁰</i>
9. TOTAL EXPENDITURES (from Line 21)	\$ _____	\$ <i>1669⁹⁵</i>
10. FUNDS ON HAND AT CLOSE OF REPORTING PERIOD	\$ <i>880⁰⁵</i>	XXXXXXXXXXXX
11. Debt and Obligations Owed BY the Committee	\$ <i>886⁶⁵</i>	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: *KAREN WEIKUNAT* AGENT SIGNATURE *Karen Weikunat* DATE *3/22/99*

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

	COLUMN A - Total This Reporting Period	COLUMN B - Total Calendar Year-To-Date
13. Itemized Contributions from Individuals and Persons (Other than Political Committees)	\$ 61500	\$ 204500
a. Total of Non-Itemized Contributions (Under \$20)	\$ 500	\$ 500
b. Political Party Committees	\$ -	\$ -
c. Political Committees	\$ -	\$ -
14. Loans Received (Use Schedule C)	\$ -	\$ 50000
15. Other Receipts (Dividends, Interest, Refunds, Rebates, etc.)	\$ -	\$ -
16. TOTAL CONTRIBUTIONS (Add all of the above items)	\$ 62000	\$ 255000

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

	COLUMN A - Total This Reporting Period	COLUMN B - Total Calendar Year-To-Date
17. Itemized Expenditures (\$20 and up)	\$ -0-	\$ 166995
18. Total of Non-Itemized Expenditures	\$ -0-	\$ -0-
19. Loan Repayments (Use Schedule C)	\$ -0-	\$ -0-
20. Return of Contributions to:		
a. Individuals/Persons Other than Political Committees	\$	\$
b. Political Committees	\$	\$
c. Political Party Committees	\$	\$
21. TOTAL EXPENDITURES (Add all of the above items)	\$ -0-	\$ 166995

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

	COLUMN A - This Reporting Period	COLUMN B - Calendar Year-To-Date
Total Itemized Offsets (\$20 and over)	\$	\$
Total Non-Itemized Offsets	\$	\$

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

	COLUMN A - This Reporting Period	COLUMN B - Calendar Year-To-Date
Total Itemized Contributions In-Kind (\$20 and over)	\$ -0-	\$ -0-
Total Non-Itemized Contributions In-Kind	\$ -0-	\$ -0-

SCHEDULE A

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

C TE KAREN W

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)]

A. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
DAVID LAUER 1404 ROBERTSON FT. COLLINS CO 80524 Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>munic</u>	\$ 15 ⁰⁰	3-12-99 Aggregate Year to Date \$ 15 ⁻
CHRIS McELROY 5707 SANDBAR CT. FT. COLLINS, CO 80528 Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	\$ 25 ⁰⁰	3-19-99 Aggregate Year to Date \$ 25 ⁻
HENRY LEWANDOWSKI PO BOX 271035 F.C. 80527 Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>munic</u>	\$ 50 ⁰⁰	3-17-99 Aggregate Year to Date \$ 50 ⁰⁰
SUE SELL 133 W MOUNTAIN FT. COLLINS, CO 80524 Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>munic</u>	\$ 50 ⁰⁰	3-16-99 Aggregate Year to Date \$ 50 ⁰⁰

SUBTOTAL - THIS PAGE

\$ 140⁰⁰

SCHEDULE A

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

CTE KAREN W

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>JIM SELL</u> <u>153 W. Mountain Ave</u> <u>F.C. 80524</u>		<u>3-16-99</u>
Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>municipal</u>	<u>\$ 50⁰⁰</u>	Aggregate Year to Date <u>\$ 50-</u>
B. Full Name of Contributor, Address and Zip <u>Michael HAUSER</u> <u>725 W SHURE CT</u> <u>F.C. 80525</u>		<u>3-19-99</u>
Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	<u>\$ 50⁰⁰</u>	Aggregate Year to Date <u>\$ 50-</u>
C. Full Name of Contributor, Address and Zip <u>JOHNATHAN HARSHAW</u> <u>1225 Hawk Eye CT</u> <u>F.C. 80525</u>		<u>3-19-99</u>
Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>munic</u>	<u>\$ 50⁰⁰</u>	Aggregate Year to Date <u>\$ 50⁰⁰</u>
D. Full Name of Contributor, Address and Zip <u>RALPH WALDO</u> <u>375 E Horsetooth Shores</u> <u>FC 80525</u>		<u>3-19-99</u>
Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>munic</u>	<u>\$ 50⁰⁰</u>	Aggregate Year to Date <u>\$ 50-</u>

SUBTOTAL - THIS PAGE

\$ 200⁰⁰

SCHEDULE A

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

CITE Karen W

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
MARIAN Weisser 637 BOLTZ FC 80525	\$ 20 ⁰⁰	3-17-99
Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>munic</u>		Aggregate Year to Date \$ <u>20</u>
B. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
GARY ERB 2606 Willow Creek Dr FC 80525	\$ 25 ⁰⁰	3-18-99
Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>munic</u>		Aggregate Year to Date \$ <u>25⁰⁰</u>
C. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
William Neal 1015 W Horse Tooth St FC 80526	\$ 50 ⁰⁰	3-18-99
Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>munic</u>		Aggregate Year to Date \$ <u>50</u>
D. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
BILD ON PO Box 669 WINDSOR CO 80550	\$ 50 ⁰⁰	3-18-99
Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		Aggregate Year to Date \$ <u>50</u>

SUBTOTAL - THIS PAGE \$ 145⁰⁰

SCHEDULE A

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

CTE KAREN W

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
DAVID MARCY 4345 Westbrooke Dr FC 80526 Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>MUNIC</u>	\$ 30 ⁰⁰	3-19-99 Aggregate Year to Date \$ <u>30-</u>
B. Full Name of Contributor, Address and Zip Jerry @ASTH 3835 S. College FC 80525 Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>MUNIC</u>	\$ 50 ⁰⁰	3-17-99 Aggregate Year to Date \$ <u>50-</u>
C. Full Name of Contributor, Address and Zip Bill GURSKF 1979 MASSACHUSETTS FC 80525 Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>MUNIC</u>	\$ 50 ⁰⁰	3-18-99 Aggregate Year to Date \$ <u>50-</u>
D. Full Name of Contributor, Address and Zip Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$	Date Contribution Received Aggregate Year to Date \$

SUBTOTAL - THIS PAGE

\$ 130⁰⁰

SCHEDULE B

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

C T E KAREN W

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</p> <hr/> <p>Expenditure For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>	<p>Date</p>	<p>Amount of Expenditure This Reporting Period</p> <p>\$ _____</p> <hr/> <p>Purpose of Expenditure</p>
<p>B. Full Name, Address and Zip</p> <hr/> <p>Expenditure For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>	<p>Date</p>	<p>Amount of Expenditure This Reporting Period</p> <p>\$ _____</p> <hr/> <p>Purpose of Expenditure</p>
<p>C. Full Name, Address and Zip</p> <hr/> <p>Expenditure For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>	<p>Date</p>	<p>Amount of Expenditure This Reporting Period</p> <p>\$ _____</p> <hr/> <p>Purpose of Expenditure</p>
<p>D. Full Name, Address and Zip</p> <hr/> <p>Expenditure For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>	<p>Date</p>	<p>Amount of Expenditure This Reporting Period</p> <p>\$ _____</p> <hr/> <p>Purpose of Expenditure</p>

SUBTOTAL - THIS PAGE

\$ — 0 —

SCHEDULE C

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

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 %
KAREN WEITKUNAT 3009 Phoenix FC 80525 (self)	500 ⁰⁰	

Amount Repaid This Reporting Period: \$ — 0 —

Total Cumulative Payment To Date: \$ _____ Outstanding Balance \$ _____

TERMS OF LOAN: Date Loan Received Feb 16 1999 Due Date for Final Payment _____ 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

* 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)

Committee to elect KAREN W

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

3009 Phoenix Dr. FC 680525

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
	\$		
	\$		
	\$		
	\$		
	\$		

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.

KAREN WEITKUNA
Print Name of Reg. Agent

Karen Weitkuna
Signature of Reg. Agent

3/22/99
Date