



**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) <b>CITIZENS FOR A TRUE BYPASS, INC.</b>	2. NAME OF FINANCIAL INSTITUTION <b>FIRST NATIONAL BANK</b>
ADDRESS <input type="checkbox"/> check if different than previously reported <b>215 WEST OAK, 10TH FLOOR</b>	ADDRESS <b>POST OFFICE BOX 578 FORT COLLINS, CO 80522</b>
CITY, STATE and ZIP CODE <b>FORT COLLINS, CO 80521</b>	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)

<b>Pre-election Reports</b> <input checked="" type="checkbox"/> 21 days before election (10/12/99) <input type="checkbox"/> 14 days before election (10/19/99) <i>(City of Fort Collins only)</i> <input type="checkbox"/> Friday before election (10/29/99)	<b>Post-election Reports</b> <input type="checkbox"/> 30 days after election (12/2/99) <input type="checkbox"/> Annual (November 1 of each year)
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Termination Report                       Other (specify) \_\_\_\_\_                      Is this report an Amendment?     Yes     No

6. REPORTING PERIOD COVERED <u>8/31/99</u> THRU <u>10/12/99</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)	\$ 6,399.00	\$ 6,399.00
9. TOTAL EXPENDITURES (from Line 21)	\$ 737.96	\$ 737.96
10. FUNDS ON HAND AT CLOSE OF REPORTING PERIOD	\$ 5,661.04	XXXXXXXXXXXX
11. Debt and Obligations Owed BY the Committee	\$ -0-	XXXXXXXXXXXX
12. Pledges Owed TO the Committee	\$ -0-	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: DAVID E. DWYER    AGENT SIGNATURE *David E. Dwyer*    DATE 10/12/99

**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>	\$ 6,384.00	\$ 6,384.00
a. <i>Total of Non-Itemized Contributions (Under \$20)</i>	\$ 15.00	\$ 15.00
b. <i>Political Party Committees</i>	\$	\$
c. <i>Political Committees</i>	\$	\$
14. <i>Loans Received (Use Schedule C)</i>	\$	\$
15. <i>Other Receipts (Dividends, Interest, Refunds, Rebates, etc.)</i>	\$	\$
16. <b>TOTAL CONTRIBUTIONS (Add all of the above items)</b>	\$ 6,399.00	\$ 6,399.00

**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>	\$ 737.96	\$ 737.96
18. <i>Total of Non-Itemized Expenditures</i>	\$	\$
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. <b>TOTAL EXPENDITURES (Add all of the above items)</b>	\$ 737.96	\$ 737.96

**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>	\$	\$

**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)**  
 CITIZENS FOR A TRUE BYPASS, INC.

**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><b>A. Full Name of Contributor, Address and Zip</b></p> <p>JOHN CONWAY            SARAH CONWAY            1722 HILLSIDE DRIVE            FORT COLLINS, CO 80524</p> <p>Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Amount of Contribution This Report Period</b></p> <p>\$ 100</p>	<p><b>Date Contribution Received</b></p> <p>10/04/99</p> <p><b>Aggregate Year to Date</b>            \$ <u>100</u></p>
<p><b>B. Full Name of Contributor, Address and Zip</b></p> <p>MARY K. DOOLEY            1921 WARREN DRIVE            FORT COLLINS, CO 80524</p> <p>Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Amount of Contribution This Report Period</b></p> <p>\$ 75</p>	<p><b>Date Contribution Received</b></p> <p>9/15/99</p> <p><b>Aggregate Year to Date</b>            \$ <u>75</u></p>
<p><b>C. Full Name of Contributor, Address and Zip</b></p> <p>MELVIN A. OR CONNIE S. REIFSCHNEIDER            1635 MIRAMONT DRIVE            FORT COLLINS, CO 80524</p> <p>Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Amount of Contribution This Report Period</b></p> <p>\$ 25</p>	<p><b>Date Contribution Received</b></p> <p>9/14/99</p> <p><b>Aggregate Year to Date</b>            \$ <u>25</u></p>
<p><b>D. Full Name of Contributor, Address and Zip</b></p> <p>NORTHEAST COMMUNITY COALITION            c/o JOE SOLOMON            1721 LINDENWOOD DRIVE            FORT COLLINS, CO 80524</p> <p>Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Amount of Contribution This Report Period</b></p> <p>\$ 529</p>	<p><b>Date Contribution Received</b></p> <p>9/9/99</p> <p><b>Aggregate Year to Date</b>            \$ <u>529</u></p>

**SUBTOTAL - THIS PAGE**

\$ 729

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

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A. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
ROBERT J. DAY 1720 LINDEN WAY FORT COLLINS, CO 80524  Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 250	9/15/99  Aggregate Year to Date \$ <u>250</u>
B. Full Name of Contributor, Address and Zip  JEROME D. AND CONSTANCE A. CARR 1704 LINDEN WAY FORT COLLINS, CO 80524  Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	Amount of Contribution This Report Period  \$ 200	Date Contribution Received  9/15/99  Aggregate Year to Date \$ <u>200</u>
C. Full Name of Contributor, Address and Zip  STEVE STOLTZ 4430 INNOVATION DRIVE FORT COLLINS, CO 80525  Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	Amount of Contribution This Report Period  \$ 500	Date Contribution Received  9/15/99  Aggregate Year to Date \$ <u>500</u>
D. Full Name of Contributor, Address and Zip  H. STUART MACMILLAN 1928 LINDENRIDGE DRIVE FORT COLLINS, CO 80524  Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	Amount of Contribution This Report Period  \$ 200	Date Contribution Received  9/14/99  Aggregate Year to Date \$ <u>200</u>

SUBTOTAL - THIS PAGE

\$ 1,150

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A. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
EVELYN M. CLARKE 1401 LINDENWOOD DRIVE FORT COLLINS, CO 80524		9/19/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 25	Aggregate Year to Date \$ 25
B. Full Name of Contributor, Address and Zip JAMES J. MANGLE JOAN MANGLE 6952 GANDER WAY FORT COLLINS, CO 80524		9/19/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 50	Aggregate Year to Date \$ 50
C. Full Name of Contributor, Address and Zip DOLORES L. WILLIAMS 1520 HILLSIDE DRIVE FORT COLLINS, CO 80524		9/19/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 50	Aggregate Year to Date \$ 50
D. Full Name of Contributor, Address and Zip RICHARD L. CORNELIUS BARBARA M. CORNELIUS 1730 LINDEN LAKE ROAD FORT COLLINS, CO 80524		9/16/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 200	Aggregate Year to Date \$ 200

**SUBTOTAL - THIS PAGE**

\$ 325

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A. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
THE LIGHT CENTER, INC. 2725 S. COLLEGE AVENUE FORT COLLINS, CO 80525		
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 250	9/15/99 Aggregate Year to Date \$ 250
<b>B. Full Name of Contributor, Address and Zip</b>	<b>Amount of Contribution This Report Period</b>	<b>Date Contribution Received</b>
RONALD P. OR EILEEN L. ALEXANDER 1404 STEEPLECHASE DRIVE FORT COLLINS, CO 80524		
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 25	9/22/99 Aggregate Year to Date \$ 25
<b>C. Full Name of Contributor, Address and Zip</b>	<b>Amount of Contribution This Report Period</b>	<b>Date Contribution Received</b>
REBECCA J. OR DAVID G. JOYCE 1701 LINDENMEIER COURT FORT COLLINS, CO 80524		
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 200	9/24/99 Aggregate Year to Date \$ 200
<b>D. Full Name of Contributor, Address and Zip</b>	<b>Amount of Contribution This Report Period</b>	<b>Date Contribution Received</b>
WILLIAM OR SANDRA L. STASHAK 5 FOREST HILLS LANE FORT COLLINS, CO 80524		
Contribution For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 50	9/23/99 Aggregate Year to Date \$ 50

SUBTOTAL - THIS PAGE

\$ 525

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A. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
J. JOSEPH LINDSLEY 1735 LINDEN LAKE ROAD FORT COLLINS, CO 80524		9/18/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 25	Aggregate Year to Date \$ <u>25</u>
B. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
F. PAUL GRESKY CAROL M. GRESKY 2351 RIDGECREST ROAD FORT COLLINS, CO 80524		9/17/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 30	Aggregate Year to Date \$ <u>30</u>
C. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
JEFFREY B. OR M. ELLEN FROMM 1716 LINDEN WAY FORT COLLINS, CO 80524		9/17/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 200	Aggregate Year to Date \$ <u>200</u>
D. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
R.W. PHILLIPS, D.V.M. 2 WINDJAMMER COVE FORT COLLINS, CO 80524		9/19/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 100	Aggregate Year to Date \$ <u>100</u>

**SUBTOTAL - THIS PAGE**

\$ 355

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A. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
GEORGE C. THORNTON, III LOUISE F. THORNTON 4 STEEPLECHASE DRIVE FORT COLLINS, CO 80521 Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ 50	9/21/99 Aggregate Year to Date \$ 50
B. Full Name of Contributor, Address and Zip DAVID L. PARKER ELIZABETH U. PARKER 1613 LINDEN LAKE ROAD FORT COLLINS, CO 80524 Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ 200	9/20/99 Aggregate Year to Date \$ 200
C. Full Name of Contributor, Address and Zip MURDENE A. LILYBLADE 1609 LINDEN LAKE ROAD FORT COLLINS, CO 80524 Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ 100	9/25/99 Aggregate Year to Date \$ 100
D. Full Name of Contributor, Address and Zip THOMAS W. OR KRISTINE H. JOHNSON 1419 ASCOT COURT FORT COLLINS, CO 80524 Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	\$ 50	9/24/99 Aggregate Year to Date \$ 50

SUBTOTAL - THIS PAGE

\$ 400



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A. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
VOGEL CONCRETE, INC. 1313 BLUE SPRUCE DRIVE, SUITE B FORT COLLINS, CO 80524		9/28/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 200	Aggregate Year to Date \$ <u>200</u>
B. Full Name of Contributor, Address and Zip  ROGER A. PIELKE GLORIA A. PIELKE 1932 LINDEN RIDGE DRIVE FORT COLLINS, CO 80524		9/27/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 100	Aggregate Year to Date \$ <u>100</u>
C. Full Name of Contributor, Address and Zip  HICKORY VILLAGE MHP COWAN ENTERPRISES, INC. 293 BERTHOUD TRAIL BROOMFIELD, CO 80020		9/29/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 500	Aggregate Year to Date \$ <u>500</u>
D. Full Name of Contributor, Address and Zip  MEREDITH L. OR WINNETTE PAYNE 1000 W. LAUREL STREET FORT COLLINS, CO 80521		9/20/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 50	Aggregate Year to Date \$ <u>50</u>

SUBTOTAL - THIS PAGE

\$ 850

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<p>A. Full Name of Contributor, Address and Zip</p> <p>DWYER, HUDDLESON AND RAY, P.C.            ATTORNEYS AT LAW            215 W. OAK STREET, 10TH FLOOR            FORT COLLINS, CO 80521</p>	<p>Amount of Contribution This Report Period</p>	<p>Date Contribution Received</p> <p>9/21/99</p>
<p>Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>	<p>\$ 300</p>	<p>Aggregate Year to Date            \$ <u>300</u></p>
<p>B. Full Name of Contributor, Address and Zip</p> <p>LINDA HOPKINS            BUSINESS ACCOUNT            1809 RANGEVIEW            FORT COLLINS, CO 80524</p>	<p>Amount of Contribution This Report Period</p>	<p>Date Contribution Received</p> <p>9/19/99</p>
<p>Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>	<p>\$ 100</p>	<p>Aggregate Year to Date            \$ <u>100</u></p>
<p>C. Full Name of Contributor, Address and Zip</p> <p>LEE B. GRANT, JR. M., .D.            PATRICIA H. GRANT            1729 LINDEN LAKE ROAD            FORT COLLINS, CO 80524</p>	<p>Amount of Contribution This Report Period</p>	<p>Date Contribution Received</p> <p>9/17/99</p>
<p>Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>	<p>\$ 350</p>	<p>Aggregate Year to Date            \$ <u>350</u></p>
<p>D. Full Name of Contributor, Address and Zip</p> <p>MR. OR MRS. MARVIN C. HODGSON            1401 HILLSIDE DRIVE            FORT COLLINS, CO 80524</p>	<p>Amount of Contribution This Report Period</p>	<p>Date Contribution Received</p> <p>10/02/99</p>
<p>Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>	<p>\$ 20</p>	<p>Aggregate Year to Date            \$ <u>20</u></p>

SUBTOTAL - THIS PAGE

\$ 770

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A. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
PAUL M SHERICK KATHRYN K. SHERICK 1217 LINDENWOOD DRIVE FORT COLLINS, CO 80524  Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 200	10/04/99  Aggregate Year to Date \$ <u>200</u>
B. Full Name of Contributor, Address and Zip  PAUL S. OR CAROLYN M. BEISER 1301 LINDEN LAKE ROAD FORT COLLINS, CO 80524  Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	Amount of Contribution This Report Period  \$ 100	Date Contribution Received  10/04/99  Aggregate Year to Date \$ <u>100</u>
C. Full Name of Contributor, Address and Zip  KATHERINE DUCHEN SMITH RN MS., C.P.N.P. 1700 LINDEN LAKE ROAD FORT COLLINS, CO 80524  Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	Amount of Contribution This Report Period  \$ 100	Date Contribution Received  10/04/99  Aggregate Year to Date \$ <u>100</u>
D. Full Name of Contributor, Address and Zip  EDWARD A. TUCKER GAIL W. TUCKER 1308 STEEPLECHASE DRIVE FORT COLLINS, CO 80524  Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	Amount of Contribution This Report Period  \$ 25	Date Contribution Received  9/28/99  Aggregate Year to Date \$ <u>25</u>

**SUBTOTAL - THIS PAGE**

\$ 425

**SCHEDULE A**

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TODD SULLIVAN CHERYL SULLIVAN 1705 HILLSIDE DRIVE FORT COLLINS, CO 80524		9/27/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 20	Aggregate Year to Date \$ 20
B. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
ATUL GOEL STEPHANIE CULPS-GOEL 1623 HILLSIDE DRIVE FORT COLLINS, CO 80524		10/02/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 50	Aggregate Year to Date \$ 50
C. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
EDWARD A. FULCOMER KAREN FULCOMER 1706 HILLSIDE DRIVE FORT COLLINS, CO 80524		10/03/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 25	Aggregate Year to Date \$ 25
D. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
HAROLD J. OR MRS. H.J. GROVERT 1622 HILLSIDE DRIVE FORT COLLINS, CO 80524		10/03/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 25	Aggregate Year to Date \$ 25

**SUBTOTAL - THIS PAGE**

\$ 120

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(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
K.R. PASTOR 1700 COTTONWOOD POINT DRIVE FORT COLLINS, CO 80524		10/8/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 25	Aggregate Year to Date \$ <u>25</u>
B. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
MAX L. EIDSWICK SANDRA J. EIDSWICK 1717 LINDEN LAKE ROAD FORT COLLINS, CO 80524		10/06/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 250	Aggregate Year to Date \$ <u>250</u>
C. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
ROBERT N. CAVARRA BARBARA S. CAVARRA 1717 HILLSIDE DRIVE FORT COLLINS, CO 80524		10/01/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 35	Aggregate Year to Date \$ <u>35</u>
D. Full Name of Contributor, Address and Zip	Amount of Contribution This Report Period	Date Contribution Received
CLINTON PAUL SAYERS CHERYL B. SAYERS 1301 MIRAMONT DRIVE FORT COLLINS, CO 80524		10/06/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 50	Aggregate Year to Date \$ <u>50</u>

**SUBTOTAL - THIS PAGE**

\$ 360

**SCHEDULE A**

**FULL NAME OF COMMITTEE** (as shown on statement of organization)  
 CITIZENS FOR A TRUE BYPASS, INC.

**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
JAMES B. TROXELL MARY H. TROXELL 1120 E. ELIZABETH NO. G-3 FORT COLLINS, CO 80524		9/29/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 200	Aggregate Year to Date \$ 200
<b>B. Full Name of Contributor, Address and Zip</b>  T. HAYGOOD 1708 LINDENWOOD DRIVE FORT COLLINS, CO 80524		10/01/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 100	Aggregate Year to Date \$ 100
<b>C. Full Name of Contributor, Address and Zip</b>  LAWRENCE N. HADLEY OR LUCIENNE D. HADLEY 3417 CANADIAN PARKWAY FORT COLLINS, CO 80524		10/08/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 25	Aggregate Year to Date \$ 25
<b>D. Full Name of Contributor, Address and Zip</b>  LUCIENNE DE SIMPLAIRE 3417 CANADIAN PARKWAY FORT COLLINS, CO 80524		10/07/99
Contribution For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)	\$ 50	Aggregate Year to Date \$ 50

**SUBTOTAL - THIS PAGE**

**\$ 375**

**SCHEDULE B**

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

CITIZENS FOR A TRUE BYPASS, INC.

**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> <p>NANCY WATKINS            215 WEST OAK #601C            FORT COLLINS, CO 80521</p>	<p>Date</p> <p>9/22/99</p>	<p>Amount of Expenditure            This Reporting Period</p> <p>\$ <u>87.96</u></p>
<p>Expenditure For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>		<p>Purpose of Expenditure</p> <p>CLERICAL &amp; MAILING</p>
<p>B. Full Name, Address and Zip</p> <p>JOE DUMAIS            1712 WESTVIEW ROAD            FORT COLLINS, CO 80524</p>	<p>Date</p> <p>10/01/99</p>	<p>Amount of Expenditure            This Reporting Period</p> <p>\$ <u>650.00</u></p>
<p>Expenditure For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>		<p>Purpose of Expenditure</p> <p>SIGNS</p>
<p>C. Full Name, Address and Zip</p>	<p>Date</p>	<p>Amount of Expenditure            This Reporting Period</p> <p>\$ _____</p>
<p>Expenditure For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>		<p>Purpose of Expenditure</p>
<p>D. Full Name, Address and Zip</p>	<p>Date</p>	<p>Amount of Expenditure            This Reporting Period</p> <p>\$ _____</p>
<p>Expenditure For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>		<p>Purpose of Expenditure</p>

SUBTOTAL - THIS PAGE

\$ 737.96

**SCHEDULE C**

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

CITIZENS FOR A TRUE BYPASS, INC.

**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 %
NONE		

**Amount Repaid This Reporting Period:** \$ \_\_\_\_\_

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

**TERMS OF LOAN:** Date Loan Received \_\_\_\_\_ 19\_\_\_\_ Due Date for Final Payment \_\_\_\_\_ 19\_\_\_\_

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

<i>FULL NAME</i>	<i>COMPLETE ADDRESS (Street Number and Name, City/Town, State and Zip)</i>	<i>AMOUNT GUARANTEED</i>

\* 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)

CITIZENS FOR A TRUE BYPASS, INC.

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

215 WEST OAK, 10TH FLOOR  
FORT COLLINS, CO 80521

2. REPORTING PERIOD

Quarterly

- April 15th (Jan., Feb., Mar.,)
- July 15th (Apr., May, June)
- October 15th (July, Aug., Sept.)
- January 15th (Oct., Nov., Dec.)

MAJOR ELECTION

- May 1st     June 1st     July 1st     August 1st
- Sept. 1st     Oct. 1st     Nov. 1st
- 14th day preceding the election held on \_\_\_\_\_
- 30th day following the election held on \_\_\_\_\_

<i>Full Name &amp; Address</i>	<i>Fair Market Value</i>	<i>Date Given</i>	<i>Brief Description</i>
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.

David E. Dwyer  
Print Name of Reg. Agent

David E. Dwyer  
Signature of Reg. Agent

10-12-99  
Date