

COMMITTEE REGISTRATION/TERMINATION FORM

Date of Election	<input checked="" type="checkbox"/> April _____	<input type="checkbox"/> November _____	<input type="checkbox"/> Other _____
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Type of Committee (check only one)	
<input checked="" type="checkbox"/> Candidate Committee <input type="checkbox"/> Issue Committee <input type="checkbox"/> Political Committee	<input type="checkbox"/> Small Scale Issue Committee (Note: if you have not received contributions or made expenditures in an aggregate amount exceeding \$200, no registration is required at this time.)

Is this an amendment to, or termination of, a previous registration?	
<input checked="" type="checkbox"/> No. This is a new registration. <input type="checkbox"/> Yes. Reason for amendment: _____ <input type="checkbox"/> Yes. I wish to terminate the Committee and hereby state that the Committee has received no contributions and made no expenditures since the original registration of the Committee. (Note: if the Committee received contributions or made expenditures, you must file a final Campaign Finance Report showing a zero balance and mark the form as a termination report.)	

Full Name of Committee (spell out acronyms)	Phone No.
Jeni Arndt for Mayor	970-231-5090

Street Address (including city/state/zip)	Mailing Address (if different)
1603 West Mulberry Street, Fort Collins, CO 80521	

Email Address	Web Site Address
jenijamesarndt@gmail.com	none, yet

Purpose or Nature of Interest of the Committee
To elect Jeni Arndt for Mayor of Fort Collins.

Name and Address of Financial Institution in which contributions are deposited (in a separate account bearing the name of the Committee). Must provide written documentation of such account.
Canvass Credit Union. Jeni Arndt for Mayor is the account.

Name of Registered Agent for Committee	Registered Agent's Phone No.
Tom Ragouzis	970-482-3742
Registered Agent's Mailing Address	Registered Agent's Email Address
600 Collingswood Drive, Fort Collins 80524	tragouzis@mac.com

Acknowledgement and Certification of Candidate and Registered Agent	
I hereby acknowledge the foregoing information and certify and attest that all information above is true and complete to the best of my knowledge, after reasonably diligent inquiry. I understand that any intentional misrepresentation of facts may result in denial of a registration and that falsification of statements on and with this attestation may be punishable by law.	

Signature of Candidate	Signature of Registered Agent
Date	Date
11/27/20	11/27/2020

Must be filed with City Clerk before accepting or making any contributions. (City Code §7-134)

ALL FIELDS ARE REQUIRED