

COMMITTEE REGISTRATION/TERMINATION FORM

Date of Election April 2021 November _____ Other _____

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.)
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Is this an amendment to, or termination of, a previous registration?

No. This is a new registration.

Yes. Reason for amendment: _____

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.

Melanie for Fort Collins **970-231-3576**

Street Address (including city/state/zip) Mailing Address (if different)

2813 Michener Dr
Fort Collins, CO 80526

Email Address Web Site Address

moreland.melanie@gmail.com **www.melanieforfoco.com**

Purpose or Nature of Interest of the Committee

Support (e.g., fundraising, volunteer coordination) of Melanie Potyondy's campaign for Fort Collins City Council in District 4.

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.

Elevations Credit Union, 2025 South College Avenue, Fort Collins CO 80525

Name of Registered Agent for Committee Registered Agent's Phone No.

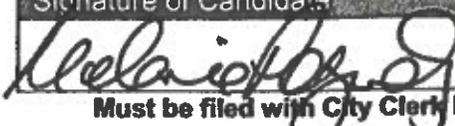
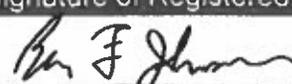
Ben Fields Johnson **(970) 430-6595**

Registered Agent's Mailing Address Registered Agent's Email Address

2955 Headwater Drive
Fort Collins, CO 80521 **benjohnsonphd@gmail.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	Date	Signature of Registered Agent	Date
	12/2/2020		12/3/2020

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