

COMMITTEE REGISTRATION/TERMINATION FORM

Date of Election	<input checked="" type="checkbox"/> April <u>2021</u>	<input type="checkbox"/> November _____	<input type="checkbox"/> 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 <small>(Note: if you have not received contributions or made expenditures in an aggregate amount exceeding \$200, no registration is required at this time.)</small>
-----------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

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.
Sidna For District 4	(970) 377-9568

Street Address (including city/state/zip)	Mailing Address (if different)
1002 Alexa Court Fort Collins, CO 80526	c/o Sidna Rachid 1002 Alexa Court Fort Collins, CO 80526
Email Address	Web Site Address
sidna4district4@gmail.com	will let you know when it is established

Purpose or Nature of Interest of the Committee

To run for Fort Collins City Council 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.

First Bank, P.O. Box 150097, Lakewood, CO 80215-0097

Name of Registered Agent for Committee	Registered Agent's Phone No.
Sidna Rachid	(970) 215-9343
Registered Agent's Mailing Address	Registered Agent's Email Address
1002 Alexa Court Fort Collins, CO 80526	sidnarachid@hotmail.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
	2/2/2021		2/2/2021

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

2000-2001

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000