


COMMITTEE REGISTRATION/TERMINATION FORM

Date of Election		November 2025	<input checked="" type="checkbox"/> November 2025	<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 (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.	
Chris For Council FC			505-490-9040	
Street Address (including city/state/zip)		Mailing Address (if different)		
311 E Magnolia st Fort Collins, CO 80524				
Email Address		Web Site Address		
ebbeconway@gmail.com				
Purpose or Nature of Interest of the Committee				
Council District I				
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 National Bank of Omaha; 205 W Oak st, Fort Collins 80521				
Name of Registered Agent for Committee		Registered Agent's Phone No.		
Christopher Bramhall-Conway		505-490-9040		
Registered Agent's Mailing Address		Registered Agent's Email Address		
311 E Magnolia st, Fort Collins, CO 80524		cbbconway@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	
		11/25/24		

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

ALL FIELDS ARE REQUIRED