Colorado Secretary of State Elections Division 1700 Broadway, Suite 200 Denver, CO 80290 Ph: (303) 894-2200 Fax: (303) 869-4861 Email: cpfhelp@sos.state.co.us Website: www.sos.state.co.us



NEW COMMITTEE REGISTRATION FORM

	(1-45-108, C.R.S.)	
	ou are registering a new committee fo t Expenditure Committees Use Secre	or Colorado campaign finance purposes.
	-	ary of state rollin err-s/
Select Only One Committee Type:		
Committee Name:		
Name should be descriptive	ve. Include office, organization name, etc. N	ote: Colorado does not have PACs, only Political Committees.
Committee Address (mailing):		
Phone Number:		
	Web Address:	
Check Only One Jurisdiction:		
Purpose/Office Sought (include par	rty, office, district & election v	ear, if applicable):
Financial Institution Information		
Institution Name:		
T (') () A 1 1		
Authorized Agents Contact Inform	nation:	
Registered Agent:	Designat	ted Filing Agent: (Optional)
Name:	Name:	
Phone Number:	Phone Nur	mber:
		ldress:
		E-mail 1:
Alternate E-mail 2:	Alternate I	E-mail 2:
	Derlande	
Registered Agent's Signature:		d Filing Agent's Signature:
X 1	Date: X	Date:
Candidate Committee Complete the followi	ng:	
Print Candidate Name:		
Candidate Signature:		
X		Date: