

Colorado Secretary of State
Elections Division
1700 Broadway, Ste. 200
Denver, CO 80290
Ph: (303) 894-2200 ext. 6383
Fax: (303) 869-4861
Email: cphelp@sos.state.co.us
www.sos.state.co.us

Below Space For Office Use Only



NEW COMMITTEE REGISTRATION FORM

(1-45-108, C.R.S.)

Please use this form if you are registering a new committee for Colorado campaign finance purposes.

Select Only One Committee Type:

- Candidate Committee Political Party Small Donor Committee
 Political Committee Issue Committee 527 Political Organization Federal PAC

Committee Name: _____

Name should be descriptive. Include office, organization name, etc. Note: CO does not have PACs, only political committees.

Committee Address (Physical): _____

Committee Address (Mailing): _____

Phone Number: _____ Alternate Phone Number: _____

Fax Number: _____ Web Address: _____

Check Only One Jurisdiction:

- Federal State County
 Municipal Multi-County Other: _____

Purpose/Office Sought (include party, office, district & election year, if applicable): _____

Financial Institution Information:

Institution Name: _____

Institution Address: _____

Agent / Contact Information:

Name of Person Acting As Registered Agent: _____

Under Colorado law, only the registered agent (or the candidate in the case of candidate committees) may file the committee reports.

Phone Number: _____ Registered Agent E-Mail: _____

Alternate E-Mail 1: _____

Alternate E-Mail 2: _____

Authorization

Registered Agent's Signature: _____ Date: _____

Print Candidate Name: _____

Candidate Address (include mailing): _____

Candidate Signature: _____ Date: _____