Colorado Secretary of State Elections Division 1700 Broadway, Suite 200 Denver, CO 80290 Ph: (303) 894-2200 Fax: (303) 869-4861	the second second		Below Space or Office Use Only
Email: cpfhelp@sos.state.co.us Website: www.sos.state.co.us	NEW COMMITTEE	REGISTRATION	FORM
	s form if you are registering a new Independent Expenditure Commit	v committee for Colorado ca	
	Or register online a	at: tracer.sos.colorado.gov	
Select Only One Committe			
CCandidate Committee CIssue Committe	CState Political Committee	Small Donor C Ssue Committee	Committee CPolitical Party C527 Political Organization
Committee Name:			
	•		oes not have PACs, only Political Committees.
Committee Address (physical):			
Committee Address (mailing):			
Phone Number:	Alternate Phone	Number:	Fax Number
Check Only One Jurisdict	$\sim$ COUNTY $-$	Enter Applicab	le
$\bigcirc$ Municipal (file with Municipa	ality) 🔿 School Distri		
Purpose/Office Sought (i	include office & election yes	ar, if applicable):	
Financial Institution Info	rmation:		
Institution Name:			
Institution Address:			
Authorized Agents Contac	rt Information:		
Registered Agent:		Designated Filing	•
Name:			
		—	
		Alternate E-mail 1:	·
Alternate E-mail 2:		Alternate E-mail 2:	
Registered Agent's Signature:		Designated Filing Age	nt's Signature:
X	Date:	X	Date:
Candidate Committee Complete t	he following:		
-	-		
Candidate Address (include mail	ing):		
Candidate Signature: X			Date:
			Colorado Secretary of State Form CPF - 6, Rev. 5/2016