Below Space For Office Use Only

Return to:

Tiffany O'Connell, Town Clerk PO Box 5800 911 Gothic Road Mt. Crested Butte, CO 8125 toconnell@mtcb.colorado.gov 970-349-6632, ext 103



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 Con	ımittee Type:	
Candidate Committee	Political Party	Small Donor Committee 4mall-Scale Issue Committee
Political Committee	Issue Committee	527 Political Organization Federal PAC
Committee Name:	ame should be descriptive. Include off	ice, organization name, etc. Note: CO does not have PACs, only political committees.
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		Alternate Phone Number:
Fax Number:		Web Address:
Check Only One Jur	isdiction: (Municipal)	
Federal	State	County
✓ Municipal	Multi-County	Other:
Purpose/Office Soug	ht (include office, district & e	lection year, if applicable):
· ·	,	<i>y</i> , 11 ,
Financial Institution	Information:	
Institution Name:		
Agent / Contact Info		
Name of Person Acting Under Colorado law, only the	As Registered Agent:e registered agent (or the candidate)	ate in the case of candidate committees) may file the committee reports.
Phone Number:	Registered A	gent E-Mail:
Alternate E-Mail 1:		
Alternate E-Mail 2:		
Authorization		
Registered Agent's Sign	ature:	Date:
Print Candidate Name: _		

Candidate Signature: Date:	Candidate Address (include mailing):		_
	Candidate Signature:	Date:	