

Town of Elizabeth
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Below Space or Office Use Only

Town of Elizabeth

APR 21 2023

RECEIVED

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.

Independent Expenditure Committees Use Secretary of State Form CPF-37

Select Only One Committee Type:

- ☐ Candidate Committee ☐ State Political Committee ☐ Small Donor Committee ☐ Political Party
☐ Issue Committee ☒ Small-Scale Issue Committee ☐ 527 Political Organization

Committee Name: SMART GROWTH FOR ELIZABETH

Name should be descriptive. Include office, organization name, etc. Note: Colorado does not have PACs, only Political Committees.

Committee Address (physical): [REDACTED] ELIZABETH, CO 80107

Committee Address (mailing): [REDACTED] ELIZABETH, CO 80107

Phone Number: [REDACTED] Alternate Phone Number: [REDACTED] Fax Number: N/A

Check Only One Jurisdiction:

☐ State

COUNTY

☐ Special District

Enter Applicable

Counties

☐ School District

☒ Municipal (file with Municipality)

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

TO EDUCATE COMMUNITY ABOUT SMART MANAGED GROWTH FOR ELIZABETH

Financial Institution Information:

Institution Name: COMMUNITY BANKS OF COLORADO - ELIZABETH BRANCH

Institution Address: 120 S. ELIZABETH ST, ELIZABETH, CO 80107

Authorized Agents Contact Information:

Registered Agent:

Name: LARRY GABLE

Phone Number: [REDACTED]

E-mail Address: [REDACTED]

Alternate E-mail 1: _____

Alternate E-mail 2: _____

Designated Filing Agent: (Optional)

Name: _____

Phone Number: _____

E-mail Address: _____

Alternate E-mail 1: _____

Alternate E-mail 2: _____

Registered Agent's Signature:

X [Signature] Date: 4-21-23

Designated Filing Agent's Signature:

X _____ Date: _____

Candidate Committee Complete the following:

Print Candidate Name: _____

Candidate Address (include mailing): _____

Candidate Signature: _____

X _____

Date: _____