

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



Below Space of Office Use Only  
**RECEIVED**

FEB 10 2025

# NEW COMMITTEE REGISTRATION FORM

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

Thornton City Clerk

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  
Or register online at: [tracer.sos.colorado.gov](http://tracer.sos.colorado.gov)

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

Committee Address (physical): 4187 E 95th Dr Thornton Co 80229

Committee Address (mailing): 4187 E 95th Dr Thornton Co 80229

Phone Number: (720) 468-7777      Alternate Phone Number: \_\_\_\_\_      Fax Number: \_\_\_\_\_

Web Address: \_\_\_\_\_

## Check Only One Jurisdiction:

- State       COUNTY       Special District       School District
- Enter Applicable Counties
- Municipal (file with Municipality)

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

Thornton City Council Ward 2      2025

## Financial Institution Information:

Institution Name: First Bank

Institution Address: 3990 E 104th Ave Thornton Co 80233

## Authorized Agents Contact Information:

### Registered Agent:

Name: John Alge  
Phone Number: (720) 468-7777

### Designated Filing Agent: (Optional)

Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_  
Address (Physical): \_\_\_\_\_  
Address (Mailing): \_\_\_\_\_

### Registered Agent's Signature:

X [Signature]      Date: 2/10/2025

### Designated Filing Agent's Signature:

X \_\_\_\_\_      Date: \_\_\_\_\_

### Candidate Committee Complete the following:

Print Candidate Name: John Alge

Candidate Address (include mailing): \_\_\_\_\_

### Candidate Signature:

X [Signature]      Date: 2/10/2025