

Colorado Secretary of State
Elections Division
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Amended
CONDITIONALLY ACCEPTED Office Use Only

MAR 24 2025

NEW COMMITTEE REGISTRATION FORM

THORNTON CITY CLERK

(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

Or register online at: 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: METRO HOUSING COALITION

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

Committee Address (physical): 9033 E EASTER PLACE, SUITE 200, CENTENNIAL, CO 80012

Committee Address (mailing): 9033 3 EASTER PLACE, SUITE 200, CENTENNIAL, CO 80012

Phone Number: 303-551-6734

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):

TO SUPPORT STATE WIDE AND LOCAL PRO-ECONOMIC AND PRO-BUSINESS CANDIDATES

Financial Institution Information:

Institution Name: CITYWIDE BANKS

Institution Address: 6500 E HAMPDEN AVE, #203, DENVER, CO 80224

Authorized Agents Contact Information:

Registered Agent:

Name: KATIE KENNEDY

Phone Number: 719-369-2266

KATIE@STRATEGICCOMPLIANCELLC.COM

2318 CURTIS ST. DENVER, CO 80205

Designated Filing Agent: (Optional)

Name: _____

Phone Number: _____

E-mail Address: _____

Address (Physical): _____

Address (Mailing): _____

Registered Agent's Signature:

X

Date: 3/14/2025

Designated Filing Agent's Signature:

X

Date: _____

Candidate Committee Complete the following:

Print Candidate Name: _____

Candidate Address (include mailing): _____

Candidate Signature:

X

Date: _____