

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



Below Space or Office Use Only

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

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

Committee Address (physical): 5114 GROUSE LN VAIL CO 81657

Committee Address (mailing): SAME

Phone Number: 970 390 0607 Alternate Phone Number: - Fax Number: -

Web Address: SIPESFORVAIL.COM

Check Only One Jurisdiction:

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

Purpose/Office Sought (include party, office, district & election year, if applicable):
VAIL TOWN COUNCIL NOV 2023

Financial Institution Information:

Institution Name: ALPINE BANK

Institution Address: 141 BASE MEADOW DR SUITE 210 VAIL CO 81657

Authorized Agents Contact Information:

| | |
|---|--|
| Registered Agent: | Designated Filing Agent: (Optional) |
| Name: <u>BRIAN SIPES</u> | Name: <u>/</u> |
| Phone Number: <u>970 390 0607</u> | Phone Number: <u>/</u> |
| E-mail Address: <u>SIPESFORVAIL@GMAIL</u> | E-mail Address: <u>/</u> |
| Alternate E-mail 1: <u>/</u> | Alternate E-mail 1: <u>/</u> |
| Alternate E-mail 2: <u>/</u> | Alternate E-mail 2: <u>/</u> |

Registered Agent's Signature: X _____ Date: _____ **Designated Filing Agent's Signature:** X N/A Date: _____

Candidate Committee Complete the following:
Candidate Name: BRIAN SIPES
Candidate Address (include mailing): 5114 GROUSE LN VAIL CO 81657
Candidate Signature: [Signature] Date: _____