Colorado Secretary of State

**Elections Division** 

1700 Broadway, Stc. 550 Denver, CO 80290

**RECEIVED** DEC 10, 2024 ELECTIONS

(303) 894-2200 ext. 6383 Ph: Fax:

(303) 869-4861 SECRETARY OF STATE



Space Below For Office Use Only

**RECEIVED** NOV 5, 2024 **ELECTIONS** 

Website: www.coloradosos.gov		~ SECRE	TARY OF STATE	
Any person, after expending \$5,000 in aggreg file this disclosure form for each additional ex	(1-45-108(1)(a)(V) ms marked with an asterisk ( gate in a calendar year of expenditure of \$1,000 of need to be rep	DOLLARS OR MORE  1), C.R.S.)  (*) are required fields  on Direct Ballot Issue or Ballot r more. Please note, the initial sorted.	Question Expenditures, shall \$5,000 of expenditures do not	
Payor Name (person who made the expenditure) Full Address of Payor (physical or mailing)*:	:	Colorado Dawn		
Phone Number: Email Address(es):	Alt	ernate Phone Number:		
Date of Expenditure*:	4 Am	ount of Expenditure: \$_		
Payee Name (recipient of expenditure) *:  Cole Communications  \$\sqrt{17,050.80}\$  100 East Saint Vrain Street, Suite 105, Colorado Springs, CO 80903  Full Payee Address (physical or mailing) *:				
Purpose / Description of the Expenditure Text Messages in support of Amendr				
Title and Number of Associated Ballot Issue or Question*		Position Taken - Support or Oppose•		
School Choice, Amendment 80		Support		

I affirm, under penalty of perjury, the Payor filing this Disclosure does not meet the Major Purpose definition as outlined in 1-45-103(12)(b), C.R.S., which would require the Payor to register as an Issue Committee.

Print and Sign name of Payor or the Payor's authorized representative if the Payor is not an individual

Date:	11/5/24
Date.	