Colorado Secretary of State Elections Division 1700 Broadway, Ste. 550 Denver, CO 80290 Ph: (303) 894-2200 ext. 6383 Fax: (303) 869-4861 Email: cpfhelp@coloradosos.gov



## **CANDIDATE COMMITTEE FUNDS TRANSFER FORM** [1-45-106(1)(a)(I)(B), C.R.S.]

This form is used by candidate committees established by the same committee for a different public office intending to transfer existing funds from an existing committee as defined by Art. XXVIII, Sec. 2(3).

Full Name of Committee:	
Address (Physical):	
Mailing Address (if different from above):	
Telephone Number:	FAX Number:
Email Address:	
Purpose of Transfer:	
TRANSFERS THE FOLLOWING: (Check appropriate box(	es) and fill in amount; then total)
<ul> <li>Monetary Amount: \$</li> <li>Loan Balance: \$</li> </ul>	
ТО	
Full Name of Committee:	
Address (Physical):	
Mailing Address (if different from above):	
Telephone Number:	FAX Number:
Email Address:	
Purpose of Receipt:	
Signature of Candidate	Date
Signature of Registered Agent (Transferring Agent)	Date
Signature of Registered Agent (Receiving Agent)	Date
	Colorado Secretary of State Form 12/09