Initiative and Referendum Petition Registration Form

A licensed petition entity must complete this form prior to circulating any initiative or referendum petition. Complete, sign, and return this form to the Colorado Secretary of State's office.

Handwritten forms not accepted.

Contact Information		NI HASHI SAKTI MAYOKIMO QUBBANIN KATINGA HASHANIN KATINGA	
Petition Entity Name			
Current Name Concepts Of Marketing Management			
Petition Entity Address			
Street Address 6455 Lindal Drive		Apt/Unit	
City Colorado Springs State	Co	Zip Code	80915
Petition Entity Telephone & Email Address			
Phone Number 7202999088 Email A	Tumber 7202999088 Email Address bcrumpton.tpm@gmail.com		
Petition Entity Designated Agent			
First Name Bryan Last Name Crumpton			
Initiative Number(s)			
List the initiative/referendum number(s) to be circulated			
Initiative/referendum number(s) #108 Valuation For Assessments			
Signature			
Applicant's Affirmation I affirm under penalty of perjury that the above information is true within twenty days of any change in the information submitted ab	and complete and that I will notif ove (including any additional initi	y the Color atives to be	ado Secretary of State e circulated).
1381	5/28/2024		
Signature (Petition Entity Designated Agent)	Date		

Mail or scan and email the signed form to:



Colorado Secretary of State 1700 Broadway, Suite 550 Denver, Colorado 80290 Phone: (303) 894-2200 Fax: (303) 869-4861 Email: ballot.access@coloradosos.gov