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		
Petition Entity Name		
Current Name 5 Star Petitioners LLC		
Petition Entity Address		
Street Address 7174 NW Farnsworth Circle	Apt/Unit	
City Port St Lucie State FI	Zip Code	34987
Petition Entity Telephone & Email Address		
Phone Number 5615747811 Email Address Richardguillen561@gmail.com		
Petition Entity Designated Agent		
First Name Richard Last Name Guillen		
Initiative Number(s)		
List the initiative/referendum number(s) to be circulated		
Initiative/referendum number(s) #108/157/310/145		
Signature		
Applicant's Affirmation I affirm under penalty of perjury that the above information is true and complete and that I will notify the Colorado Secretary of State within twenty days of any change in the information submitted above (including any additional initiatives to be circulated). 6/28/2024		
Signature (Petition Entity Designated Agent)		

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