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 For Office Use Only

# FORM FOR AMENDMENT(S) TO EXISTING COMMITTEE REGISTRATION

(1-45-108, C.R.S.)(Rule 12.1)

Please use this form if you are amending an existing committee registration

**Existing Committee Name:** CHERYL WINK FOR ENGLEWOOD CITY COUNCIL

**SOS ID/Key#:** _____

**What changes need to be made? Please check all that apply, and fill in the appropriate section of the form.**

- ☐ Committee Name
- ☒ Committee Contact Information
- ☒ Registered Agent Information
- ☐ Committee Purpose
- ☐ Financial Institution Information
- ☐ Designated Filing Agent Information

## Committee Contact Information:

Committee Name Change: _____

Committee Address (physical): _____

Committee Address (mailing): _____

Phone Number: _____ Alternate Phone Number: _____ Fax Number: _____

*Please note that this form cannot be used to change the office sought*

**Purpose (include party, office, district & election year, if applicable):**

## Financial Institution Information:

Institution Name: BANK SNB

Institution Address: 3531 SOUTH LOGAN STREET SUITE A ENGLEWOOD CO 80110

## Registered Agent Changes:

**Current Registered Agent:**

Name: _____

Phone Number: 720 409 0876

E-mail Address: CHERYL@WINKFORENGLEWOOD.COM

Alternate E-mail 1: _____

Alternate E-mail 2: _____

**New Registered Agent:**

Name: _____

Phone Number: _____

E-mail Address: _____

Alternate E-mail 1: _____

Alternate E-mail 2: _____

## Designated Filing Agent Changes:

**Current Designated Filing Agent:**

Name: _____

Phone Number: _____

E-mail Address: _____

Alternate E-mail 1: _____

Alternate E-mail 2: _____

**New Designated Filing Agent:**

Name: _____

Phone Number: _____

E-mail Address: _____

Alternate E-mail 1: _____

Alternate E-mail 2: _____

**If the person acting as registered agent is changing, please list the new agent's name and address. Both Agents must sign this form. If the existing agent is not available, please attach an explanation.**

[redacted]

**Current Registered Agent's Signature**

**Current Designated Filing Agent's Signature**

Date: 9/1/2017

[redacted]

**New Registered Agent's Signature (if applicable)**

**New Designated Filing Agent's Signature**

**Candidate Signature (if applicable)**

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