

Colorado Secretary of State
Elections Division
1700 Broadway, Ste. 200
Denver, CO 80290
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www.sos.state.co.us



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Received

Sept. 25, 2025

CITY CLERK

INDEPENDENT EXPENDITURE COMMITTEE REGISTRATION FORM

(1-45-107.5, C.R.S.)

Please use this form if you are registering an Independent Expenditure Committee for Colorado campaign finance purposes. You must register an Independent Expenditure Committee within two business days of the time that you accept donations or make independent expenditures in an aggregate amount in excess of \$1,000.

Committee Name: LITTLETON SMART VOTER

Name should be descriptive.

Full Name of Registrant: LITTELTON SMART VOTER

Include any acronyms used, if registrant is a business or other entity.

Address: 5856 S LOWELL BLVD, #156, LITTLETON, CO 80123

Principal place of operations.

Mailing Address: _____

If different from above.

Phone Number: 719-369-2266

Alternate Phone Number: _____

Fax Number: _____

Web Address: _____

Check Only One Filing Office:



Secretary of State



Municipal Clerk: LITTLETON

Purpose (names of candidates/policy positions supported or opposed): TO OPPOSE DARREN LOMORANDE, DAVID CARLTON, PATRICK DRISCOLL AND CURT SAMUELSON

Ownership interest, if any, held by foreign persons (calculated at time of registration): 0

Financial Institution Information:

Institution Name & Address: First Bank, 600 Broadway, Denver, CO 80203

This committee must have a unique, dedicated bank account.

Parent / Subsidiary Names, D/B/A Names, and Other Affiliated Entity Information (if any):

N/A

List names of any parent/subsidiary corporations and any other organizational forms associated with registrant. Attach additional pages if necessary.

Other Colorado Committees:

Optional. List names of any other committees registered with the Colorado Secretary of State associated with this committee. Attach pages if necessary.

Agent / Contact Information:

Name of Natural Person Acting As Registered Agent: Katie Kennedy

Under Colorado law, only the registered agent may file the committee reports.

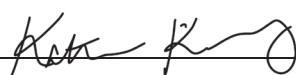
Phone Number: 719-369-2266

Registered Agent E-Mail: katie@strategiccompliancellc.com

Alternate E-Mail 1: _____

Alternate E-Mail 2: _____

Authorization:

Registered Agent's Signature: 

Date: 9/25/2025

Complete this fillable PDF form on your computer, then print and sign. Deliver this form to the appropriate officer. If your filing office is the Secretary of State's Office, you may fax it to (303) 869-4861, scan and email to cpfhelp@sos.state.co.us, or hand deliver to 1700 Broadway Ste. 200 in Denver.