Space Below For Office Use Only Colorado Secretary of State Elections Division FEBRUARY 2, 2024 1700 Broadway, Ste. 200 MARCH 1, 2024 Denver, CO 80290 MARCH 18, 2024 Ph: (303) 894-2200 ext. 6383 (303) 869-4861 Fax: MAY 2, 2024 Email: cpfhelp@sos.state.co.us www.sos.state.co.us CANDIDATE STATEMENT OF NON-RECEIPT OF CONTRIBUTIONS AND **NON-EXPENDITURE OF FUNDS** [1-45-108(1) & 1-45-109, C.R.S.] This form is for the use of candidates that do not have a campaign committee and have not received contributions nor made expenditures. No expenditures have been made on behalf of the candidate. Name of Candidate: Address of Candidate: City, State, Zip: _____ **Reporting Period**: Beginning Date Ending Date **CONTRIBUTIONS RECEIVED OR RECEIVABLE DURING THIS REPORTING PERIOD** \$ 0.00 **EXPENDITURES MADE OR INCURRED DURING THIS REPORTING PERIOD** \$ 0.00 I, ______, affirm that no person received contributions on my behalf nor made any expenditures on my behalf. No contributions have been pledged to me nor on my behalf. I have not received any contributions nor have I made or incurred any expenditures on my own behalf during this election reporting period. Candidate Signature: _____ Date: _____