| ny person or issue committee that provides compensation to a circulator to circulate an initiative, eferendum, candidate, or recall petition must complete this form. It is unlawful for any petition ntity to provide compensation to a circulator without first obtaining a license from the Colorado ecretary of State. Complete, sign, and return this form with the required fee to the Colorado ecretary of State. | Pate Issued: |
|--|---|
| Application Type | Courant license |
| This is an application for: New License Reinstatement of License | Amend Current License |
| Petition Entity Name | |
| Current Name Groundgame Political Solutions | |
| Petition Entity Address | |
| Street Address 300 M Street, SE | Apt/Unit Suite 402 |
| | Zip Code 2000 3 |
| Petition Entity Telephone & Email Address | |
| Phone Number 480.236.9856 Email Address MCOXE ground go | me compaigns. Com |
| 202.891.385° Petition Entity Designated Agent | |
| First Name Meghan Last Name COX | |
| Certificate of Petition Circulator Training | |
| Date training completed (MM/DD/YYYY) 02/16/202~ | |
| Application Fee | |
| The application fee of one hundred dollars (\$100.00) must be enclosed with this appropriate to the Colorado Secretary of State. | olication. Please make the check |
| Signature | |
| Applicant's Affirmation I affirm under penalty of perjury that I have read and understand Colorado petition laws as outlin Rule 15.2, and have completed the training related to potentially fraudulent activities in petitic Secretary of State, and that I will register with the Colorado Secretary of State in accordance with st | on circulation provided by the Colorado |
| Marin Cox 2-17-2 | 22 |
| Signature (Petition Entity Designated Agent) Date | |
| Mail, fax, or scan and email the signed form to: | |

Petition Entity License Application & Certificate of

Circulator Training

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

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