

Colorado Secretary of State
Elections Division
1700 Broadway, Ste. 550
Denver, CO 80290
Ph: (303) 894-2200 ext. 6383
Fax: (303) 869-4861
Email: cpfhelp@coloradosos.gov
www.coloradosos.gov



VOLUNTARY ACCEPTANCE OF CAMPAIGN SPENDING LIMITS

[Art. XXVII, Sec. 4(3) & Sec. 9(1)(c)]

(Must be filed with Candidate Affidavit)

I hereby certify that I have filed a Candidate Affidavit for the office of _____ and voluntarily accept the applicable campaign spending limits for this office. I understand that this acceptance, and the limits in *Art. XXVIII, Sec. 4(3)*, shall be irrevocable unless one of the following conditions are met:

1. If another candidate for the same office refuses to accept the spending limit, **the accepting candidate shall have ten (10) days in which to withdraw acceptance.** The accepting candidate shall have this option of withdrawing acceptance after each additional non-accepting candidate for the same office enters the race; or
2. **The applicable contribution limits shall double** for any candidate who has accepted the applicable voluntary spending limit, **AND** the non-accepting candidate has raised more than ten percent of the applicable voluntary spending limit.

Name: _____
(Print/type)

Address: _____
(Include street, city, state and zip)

Office: _____ **District No.:** _____ **Elec/Yr.:** _____

Signature: _____ **Date:** _____

STATE OF COLORADO
COUNTY OF _____

Before me, _____, a notary duly authorized to administer oaths, in and for said State, personally appeared _____, whose name is subscribed to the foregoing **Acceptance of Voluntary Spending Limits**, and who affirms that said statement is true and that he/she acknowledges the execution of said instrument to be of their own free act and voluntary deed for the uses and purposes therein set forth.

Subscribed and affirmed to before me this _____ day of _____, 20_____.

(Seal) _____
(Notary/Official Signature)

(Commission Expires)