



2026 Town of Frisco Municipal Election

CANDIDATE AFFIDAVIT

Article XXVIII, Sec. 2(2) of the Colorado Constitution & 1-45-110(1), C.R.S.

File with the Municipal or Town Clerk:

Stacey Campbell, Town Clerk

townclerk@townoffrisco.com | (970) 668-9122

This affidavit certifies that I, _____, a member of the _____, (Name*)
_____ political party/organization (if applicable), am a candidate
(Political Party*)
for the _____ election, [Art. XXVIII, Sec. 2(2)] for the office of _____,
(Year*) (Office*)
District _____ (if applicable), County _____ (if applicable).
(District*) (County*)

I understand that campaign finance activities in Colorado are governed by Article XXVIII of the Colorado Constitution, Article 45, Title 1 of the Colorado Revised Statutes (C.R.S.) (also known as the Fair Campaign Practices Act (FCPA)), and the Secretary of State's Rules Concerning Campaign and Political Finance.

I further certify that I am familiar with the provisions of the Colorado Fair Campaign Practices Act (FCPA) as required in §1-45-110 of the Colorado Revised Statutes.

Signature of Candidate* _____ Date*: _____

Physical / Residential Address of Candidate*:

Address 1*: _____

Address 2: _____

City*: _____ State*: _____ Zip*: _____

Phone*: _____ Email address*: _____

Website address: _____

Mailing Address of Candidate*:

Address 1*: _____

Address 2: _____

City*: _____ State*: _____ Zip*: _____

Fields marked with * are required unless they do not apply to the race for which you are submitting this affidavit. The notary section below must be completed in full.

STATE OF COLORADO

COUNTY OF _____

Before me, _____, a notary/officer duly authorized to administer oaths, in and for said State, personally appeared _____, whose name is subscribed to the foregoing Candidate Affidavit, and who affirms, that said statements are 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)

Title (Notary Public, Clerk, etc.)

CANDIDATE AFFIDAVIT INSTRUCTIONS

Purpose of form: This form is to be used by municipal candidates seeking an elected office. Please note that this form and the information contained within are considered public information.

Is this form required for all candidates? Yes.

When should this form be filed? Form must be filed with the appropriate election official within 10 days of becoming a candidate.

When does an individual become a candidate? When the individual publicly announces an intent to seek public office and thereafter receives a contribution or makes an expenditure in support of the candidacy.

What is the definition of Public announcement? Campaign and Political Finance Rule 1.32 states, ‘Publicly announced an intention to seek election to public office...’ means

- registering a candidate committee; or
- announcing an intention to seek public office through:
 - a speech, advertisement, or other communication reported or appearing in public media; or
 - a statement made in any place accessible to the public; or
 - a statement made in a manner that a reasonable person would expect to become public.

COMPLETING THE FORM

- Print or type the name of candidate on the first line.
- Print or type the political affiliation of the candidate, only if seeking a partisan office (one which has a party identification on the ballot). No applicable for school district, special district or municipal candidates.
- Print or type the year the office is up for election and the office being sought.
- Indicate the district number of the office being sought, if applicable.
- The candidate must sign and date the form in front of a notary. **Signature must be notarized.**
- Print or type the physical address of the candidate. Include street, city, state and Zip Code (all are required).
- Print or type the mailing address of the candidate if different than physical address.
- Print or type the candidate’s residential or business telephone number.
- Print or type the candidate’s E-Mail address.
- **The remainder of the form must be completed by a Notary Public.**