Colorado Secretary of State

**Elections Division** 

1700 Broadway, Ste. 550

Denver, CO 80290

Ph: (303) 894-2200

www.coloradosos.gov



Space Below For Office Use Only

EERK'S OFFICE REC

## **CANDIDATE AFFIDAVIT**

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

- Municipal candidates file with the Municipal or Town Clerk
- State, County, and School District candidates must file online using the TRACER website
- Special District candidates, in lieu of this form, file a Self-Nomination and Acceptance form with their Designated Election Official (DEO). The DEO and/or the candidate is required to file a copy of the Self-nomination and Acceptance form with the Secretary of State's office (Campaign and Political Finance Rule 16.1)

This affidavit certifies that I, Tiffany S	immons	, a member of the
	(Name*)	
	political party/organization	n (if applicable), am a candidate
(Political Party*)		
for the 2025 election, [Art. XX	VIII, Sec. 2(2)] for the office of	City of Greeley Mayor
(Year*)		(Office*)
District (if a	applicable), County Weld	(if applicable).
(District*)	((	County*)
Finance.  I further certify that I am familiar with to (FCPA) as required in §1-45-110 of the	Colorado Revised Statutes.	
Signature of Candidate*		Date*:
Physical / Residential Address of Can	)	
Address 1*: 1626 27th Avenue Ct	# 1	
Address 2:		
City*: Greeley	State*: CO	Zip*: 80634
City*: Greeley Phone*: 970-978-8730 Ema	il address*: tm.simmons11@	gmail.com
Website address:		

Form: CPF 1 Re

Revised 03/2025

Mailing Address of Candidate*:		
Address 1*: Same as above		
Address 2:		
City*:State	e*: Zip*: _	
Fields marked with * are required unless they do not apply to affidavit. The notary section below must be completed in full.		omitting this
STATE OF COLORADO		
COUNTY OF Weld		
Before me, Vaylee M. Williams, a notar oaths, in and for said State, personally appeared T. Han whose name is subscribed to the foregoing Candidate Affidav true and that he/she acknowledges the execution of said instruvoluntary deed for the uses and purposes therein set forth.	vit, and who affirms, that said a	statements are
Subscribed and affirmed to before me this day of	July	_, 20
Turn		(Seal)
(Notary/Official Signature)		
Member Services Notary Public Title (Notary Public, Clerk, etc.)	KAYLEE M WILLIAM NOTARY PUBLIC STATE OF COLORAD NOTARY ID 2024402532 MY COMMISSION EXPIRES JULY 8	O 21

Form: CPF 1 Revised 03/2025

Colorado Secretary of State Form CPF - 6, Rev. 5/2016

Colorado Secretary of State Elections Division 1700 Broadway, Suite 200 Denver, CO 80290 Ph: (303) 894-2200 Fax: (303) 869-4861 Email: cpfhelp@sos.state.co.us Website: www.sos.state.co.us



## NEW COMMITTEE REGISTRATION FORM

(1-45-108, C.R.S.)

Please use this form if you are registering a new committee for Colorado campaign finance purposes.

Independent Expenditure Committees Use Secretary of State Form CPF-37

Or register online at: tracer.sos.colorado.gov **Select Only One Committee Type:** Small Donor Committee Political Party Candidate Committee State Political Committee 527 Political Organization Issue Committee Small-Scale Issue Committee Committee Name: Simmons for Greeley Name should be descriptive. Include office, organization name, etc. Note: Colorado does not have PACs, only Political Committees. Committee Address (physical): 1626 27th Avenue Ct, Greeley, CO 80634 Committee Address (mailing): same as above Fax Number: 970-239-2198 Alternate Phone Number: Phone Number: (970) 978-8730 Web Address: **Check Only One Jurisdiction:** COUNTY State Enter Applicable Special District Counties School District ----( ) Municipal (file with Municipality) Purpose/Office Sought (include party, office, district & election year, if applicable): City of Greeley Mayor 2025 **Financial Institution Information:** Institution Name: Canvas Credit Union 3532 W 10th St Unit B, Greeley, CO 80634 Institution Address: **Authorized Agents Contact Information: Designated Filing Agent:** (Optional) **Registered Agent:** Name: Tiffany Simmons Name: Phone Number: 970-978-8730 Phone Number:\_\_\_\_ E-mail Address: tm.simmons11@gmail.com E-mail Address: \_\_\_\_\_ Alternate E-mail 1: \_\_\_ Alternate E-mail 1: \_\_\_ \_\_\_\_\_ Alternate E-mail 2: \_\_\_ Alternate E-mail 2: \_\_\_ Designated Filing Agent's Signature: Registered Agent's Signature: 7/24/25 Date: \_ Date: Candidate Committee Complete the following: Print Candidate Name: Tiffany Simmons 1626 27th Avenue Ct, Greeley, CO 80634 Candidate Address (include mailing): Candidate Signature: 7/24/25 Date: