

# CAMPAIGN FINANCE COMPLAINT FORM

\* indicates required field

Complainant Information (complainant must be a resident of Commerce City, Colorado.) If represented by counsel, please use counsels information below.		
*Name:		
*Signature:		
*Home Address:		
*City:	*State:	*Zip:
*Email:	*Phone:	

**A complaint alleging a violation of campaign laws, in accordance with the Colorado Constitution and/or Fair Campaign Practices Act, must be filed with the City Clerk no later than thirty (30) days after the complainant knew or should have known of the violation.**

<b>Complaint</b>	
*Name of alleged violator(s) (include committee names if applicable):	
*Date(s) of alleged violation(s):	
*Description of alleged violations and the basis for the complaint. Please include specific citations to the Colorado Constitution, Revised Statutes, and/or the Fair Campaign Practices Act:	
*Date submitted to City Clerk by email, online form, fax, or in-person: ___/___/_____	
Please attach to this form any documents or evidence of the alleged violation.	

**A separate form must be completed for each complaint.**

Please submit this form and any evidence by email, fax, or deliver in-person to:

City Clerk's Office, 7887 E. 60<sup>th</sup> Avenue, Commerce City, CO 80022

Or Fax: 303-227-8798

Or Email: dgibson@c3gov.com