

City Clerk's Office Lakewood Civic Center 480 S. Allison Parkway Lakewood, CO 80226-3127 Phone: 303-987-7080

Fax: 303-987-7088 TDD: 303-987-7057

AFFIRMATION STATEMENT FOR LIMITED LIABILITY COMPANY (LLC) CONTRIBUTIONS

Full Name of Committee/Pe	erson:					
Date of Contribution:		Contribu	Contribution Amount:			
Name of LLC making the C	ontribution:					
Address:		City:		State:	Zip:	
I(print individu	ual name)	, individual acting on behalf of	f the above named Lim	ited Liability Company, a	affirm that the	
LLC Members are as listed l	below.					
Signature of Individual Acti	ng on behalf of the LLC	· · · · · · · · · · · · · · · · · · ·				
	NAMES AND	ADDRESSES OF ALL IND	IVIDUAL LLC MEM	BERS		
LLC Member(s)	Address	City	State	Zip	Percentage Interest	