

STATE OF COLORADO

Division of Local Government
 1313 Sherman Street, Suite 521
 Denver, Colorado 80203
 Phone: (303) 864-7720
 TDD: (303) 866-5300



LOCAL GOVERNMENT CONTACT UPDATE

				Date		
Local Government Information	Official Name				LGID	
	Principal Address					
	Mailing Address (if not same as above)					
	City		State		Zip	
	Website					

Official Contact ¹	Contact Name					
	Contact Title					
	Contact Address (if not same as above)					
	Contact Alt. Address					
	City		State		Zip	
	Phone		Fax			
	E-Mail				E-Filing ID Needed - <input type="checkbox"/> (check here)	

*If E-filing ID is necessary (checked) you will be contacted regarding changes to your Local Government E-Filing Portal Login Information. E-filing accounts are available for Chief Administrative contact and for Budget Officer contact types **except in the case of Title 32-1 special districts the Official Contact pursuant to 32-1-104 (2) will be the only available e-filing user.**

Other Contact	Contact Name					
	Contact Title					
	Contact Address Same As Local Government <input type="checkbox"/>					
	Contact Alt. Address					
	City		State		Zip	
	Phone		Fax			
	E-Mail					

This Form can be submitted to our address listed above, dola_dlg_helpdesk@state.co.us, or faxed to (303) 864-7759

¹ All correspondence from the Division of Local Government will be addressed to the Official Contact on record. For Title 32-1 Special Districts the Official Contact is pursuant to 32-1- 104 (2) C.R.S.

LOCAL GOVERNMENT CONTACT UPDATE

Other Contact <input type="checkbox"/> Board Chair <input type="checkbox"/> Other: _____	Contact Name			
	Contact Title			
	Contact Address Same As Local Government <input type="checkbox"/>			
	Contact Alt. Address			
	City	State	Zip	
	Phone	Fax		
	E-Mail			

Other Contact <input type="checkbox"/> Board Chair <input type="checkbox"/> Other: _____	Contact Name			
	Contact Title			
	Contact Address Same As Local Government <input type="checkbox"/>			
	Contact Alt. Address			
	City	State	Zip	
	Phone	Fax		
	E-Mail			

Other Contact <input type="checkbox"/> Board Chair <input type="checkbox"/> Other: _____	Contact Name			
	Contact Title			
	Contact Address Same As Local Government <input type="checkbox"/>			
	Contact Alt. Address			
	City	State	Zip	
	Phone	Fax		
	E-Mail			

Other Contact <input type="checkbox"/> Board Chair <input type="checkbox"/> Other: _____	Contact Name			
	Contact Title			
	Contact Address Same As Local Government <input type="checkbox"/>			
	Contact Alt. Address			
	City	State	Zip	
	Phone	Fax		
	E-Mail			