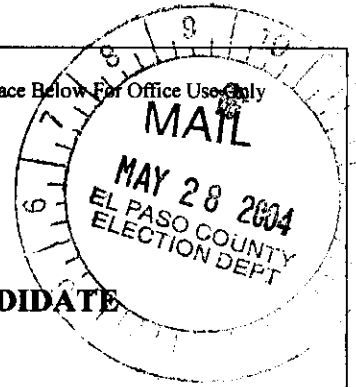


Colorado Secretary of State
Elections Division
1560 Broadway, Ste. 200
Denver, CO 80202
Ph: (303) 894-2200 x 3
Fax: (303) 869-4861
www.sos.state.co.us



POSTMARK
DATE: 5/26 Space Below For Office Use Only



STATEMENT OF PERSONAL EXPENDITURES BY A CANDIDATE
[C.R.S. 1-45-108(1) & C.R.S. 1-45-109]

(For use by a candidate who has not received any contributions, but has made expenditures of personal funds.)

Name of Candidate: Bobby E. Phillips
Address of Candidate: 617 Del Norte
City, State, and Zip Code: Fountain, CO 80817
Office: Fountain Sanitation Board of Directors District No.: _____ Elec./Yr.: 2004
Reporting Period: Beginning Date 5/6/04 Ending Date 6/3/04

1. <u>Date Expended</u> <u>5/7/04</u>	3. Name: <u>Shopper Press</u>
2. <u>Amount</u> \$ <u>10.00</u>	4. Address: <u>PO East Ohio</u>
	5. City, State, Zip: <u>Fountain, CO 80817</u>
	6. Purpose of Expense: <u>Political Ad (Thank you)</u>

1. <u>Date Expended</u>	3. Name: _____
2. <u>Amount</u> \$ _____	4. Address: _____
	5. City, State, Zip: _____
	6. Purpose of Expense: _____

1. <u>Date Expended</u>	3. Name: _____
2. <u>Amount</u> \$ _____	4. Address: _____
	5. City, State, Zip: _____
	6. Purpose of Expense: _____

I certify to the best of my knowledge this Statement of Expenditures is true and correct.

Candidate Signature: Bobby E. Phillips Date: 5/26/04