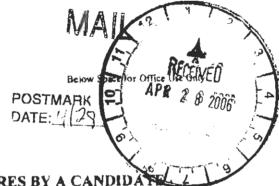
Colorado Secretary of State Elections Division 1560 Broadway, Ste 200 Denver, CO 80202

(303) 894-2260 x 3 (303) 869-4861 Fax: www.sos.state.co.us





STATEMENT OF PERSONAL EXPENDITURES BY A CANDIDA [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: CONNIE M. HAYS	
Address of Candidate: 5815 CHAPS VIEW	
Office: Board of Directors District No.: Protection District Elec./Yr.: 2006	
Office: Beard	of Directors District No.: Protection DetrictElec./Yr.: 2006
Reporting Period: Beginning Date April 7, 2006 Ending Date	
1. Date Expended	3 Name: / / ^
	3 Name: 4. Address:
2. Amount	5. City, State, Zip:
s /	
[ Y ]	6. Purpose of Expense:
I. Date Expended	3. Name:
	4. Address:
2. Amount	5. City, State, Zip:
s	
0	6. Purpose of Expense:
1. Date Expended	3 Name :
	3. Name:
2 Amount	
s	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: Connie m. They Date: 4-27-06	