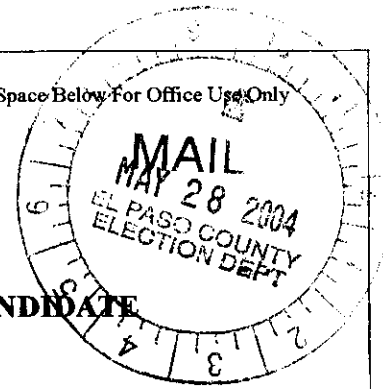


Colorado Secretary of State  
Elections Division  
1560 Broadway, Ste. 200  
Denver, CO 80202  
Ph: (303) 894-2200 x 3  
Fax: (303) 869-4861  
www.sos.state.co.us



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: Harold D. Thompson

Address of Candidate: 509 Crest Street

City, State, and Zip Code: Fountain, CO 80817

Office: Board Director District No.: \_\_\_\_\_ Elec./Yr.: 2004

Reporting Period: Beginning Date 5/6/04 Ending Date 4/3/04

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>120 E. Ohio</u>
	5. City, State, Zip: <u>Fountain, CO 80817</u>
	6. Purpose of Expense: <u>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: Harold D. Thompson Date: 5/26/04