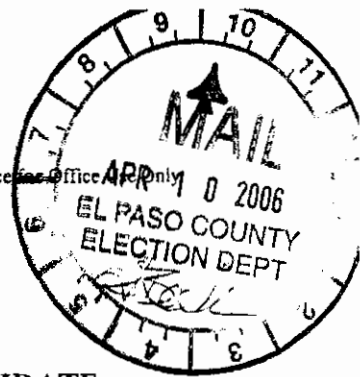


Colorado Secretary of State  
 Elections Division  
 1560 Broadway, Ste. 200  
 Denver, CO 80202  
 Ph: (303) 894-2200 x 3  
 Fax: (303) 869-4861  
 www.sos.state.co.us



Below Space for Office

POSTMARK  
 DATE: 4/8



**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: Calvin Pollard

Address of Candidate: 9815 LIBERTY GROVE DR

City, State, and Zip Code: PEYTON CO 80831

Office: BOARD OF DIRECTORS District No.: \_\_\_\_\_ Elec./Yr.: 06  
PBHMWD

Reporting Period: Beginning Date 2-21-06 Ending Date 4-7-06

1. <u>Date Expended</u>	3. Name: _____
2. <u>Amount</u>	4. Address: _____
\$ <u>0</u>	5. City, State, Zip: _____
	6. Purpose of Expense: _____

1. <u>Date Expended</u>	3. Name: _____
2. <u>Amount</u>	4. Address: _____
\$ <u>0</u>	5. City, State, Zip: _____
	6. Purpose of Expense: _____

1. <u>Date Expended</u>	3. Name: _____
2. <u>Amount</u>	4. Address: _____
\$ <u>0</u>	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: Calvin Pollard Date: 4-7-06

\* NO EXPENSES OF ANY KIND DURING THIS PERIOD.