

Fax: 520-7327

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 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: THOMAS J. CONROY

Address of Candidate: 19615 DOEWOOD DRIVE

City, State, and Zip Code: MONUMENT, COLORADO 80132

Office: N/MFPD BOARD OF DIRECTORS District No.: N/MFPD Elec. Yr.: MAY '04

Reporting Period: Beginning Date _____ Ending Date 4/19/04

1. Date Expended <u>4/8/04</u>	3. Name: <u>OFFICE MAX</u>
2. Amount <u>\$ 256.⁶⁷</u>	4. Address: <u>7645 N. ACADEMY BLVD.</u>
	5. City, State, Zip: <u>COLORADO SPRINGS, CO 80920</u>
	6. Purpose of Expense: <u>PRINTING CAMPAIGN BROCHURE</u>

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

1. Date Expended	3. Name: _____
2. Amount \$	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: [Signature] Date: 4/26/04