

Attn: Marilyn Johnson

C-2 Rev. 11/03



CAMPAIGN FINANCIAL DISCLOSURE REPORT SUMMARY PAGE (Please Print or Type)

POSTED

Section I

Form with fields for Name of Candidate or Political Committee and Chairperson, Office Sought, District, Mailing Address, City and Zip, Home Phone, Work Phone, Name of Political Treasurer, etc.

Section II

TYPE OF REPORT

Directions: To indicate the type of report being filed, fill in the appropriate dates and check the appropriate box(es). See the instructional manual for reporting periods and due dates.

This report is for the period from 11/13/04 through 12/31/04

- Checkboxes for 7 Day Pre-Primary Report, 7 Day Pre-General Report, 30 Day Post-Primary Report, 30 Day Post-General Report, October 10 Pre-General Report, Annual Report.

Is this Report an amendment? Yes No Is this a Termination Report? Yes No

Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Directions: If you had no contributions or expenditures during this reporting period, check the box next to the statement below, fill in the appropriate dates and sign this report.

I hereby certify that I have received no contributions and have made no expenditures during this reporting period from through

Section IV

SUMMARY

To reach your Calendar Year to Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).

Table with 3 columns: Line Item, COLUMN I This Period, COLUMN II Calendar Year to Date. Rows include Cash on Hand, Total Contributions, Total Expenditures, and Cash Balance.

*This same figure should be entered on line 1 of all reports filed this calendar year. **You must report the cash on hand at both the beginning of the reporting period and the close of the reporting period.

Section V

CONTRIBUTIONS PLEDGED - INCURRED EXPENDITURES

Contributions Pledged during this reporting period but not yet received: None \$ Incurred Expenditures during this reporting period but not yet paid: None \$

Return This Report To: Ben Ysursa Secretary of State PO Box 83720 Boise ID 83720-0080 Fax: (208) 334-2282

Section VI

CERTIFICATION

I Marilyn Sweetkind hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee <div style="font-size: 1.2em; font-family: cursive;">David B Larsen</div>	Report Covering the Period From <u>11/13/04</u> to <u>12/31/04</u>
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Revised

UNITEMIZED CONTRIBUTIONS	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u>0</u>	Total Amount \$ <u>0</u>

UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number _____	Total Amount \$ <u>0</u>

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 0
Itemized Contributions (total all Schedule A sheets)	\$ 420.70
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 420.70
____ Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 3069.97
Itemized Expenditures (total all Schedule B sheets)	\$ 2,899.00
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$
____ Number of Schedule C-2B pages Attached	
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$ 2,000
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$ 0
Subtotal	= \$ 2,000
Payment this Period (Total all C-2Bs - Payment this Period)	- \$ 2,000
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$ 0
____ Number of Schedule C-2A pages Attached	
Pledged Contributions	
Amount Pledged this Period	\$ 0

SCHEDULE B
ITEMIZED EXPENDITURES
of Twenty-Five Dollars (\$25.00) or more this period

Page 1 of 1

Name of Candidate or Committee David B. Larsen 11/13/04-12/31/04

Column A Column B

Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
11/26/04	1. Vote for outdoor Idaho PO Box 283 Boise 83701	\$ _____	\$ 170.70
Purpose of Above Expenditure: <u>Advertising materials</u>			
/ /	2.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	3.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	4.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	5.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	6.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	7.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	8.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	9.	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ _____	\$ 170.70
Total This Page (add columns A & B)		\$ 170.70	