



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

Section I

Name of Candidate or Political Committee and Chairperson <i>Marla Lawson</i>		Office Sought (if candidate) <i>St. Senator</i>	District (if any) <i>22</i>
Mailing Address <i>7655 Hwy 21</i> <input type="checkbox"/> Check if address change.	City and Zip <i>Lowman 83637</i>	Home Phone <i>208-259-3344</i>	Work Phone <i>11</i>
Name of Political Treasurer <i>Fred Lawson</i>			
Mailing Address <i>7655 Hwy 21</i> <input type="checkbox"/> Check if address change.	City and Zip <i>Lowman 83637</i>	Home Phone <i>259-3344</i>	Work Phone <i>11</i>

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 3/1/04 through 5/18/04

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> 7 Day Pre-Primary Report | <input type="checkbox"/> 7 Day Pre-General Report | <input type="checkbox"/> Quarterly (April 30)
(only filed by ballot measure committees) |
| <input type="checkbox"/> 30 Day Post-Primary Report | <input type="checkbox"/> 30 Day Post-General Report | <input type="checkbox"/> Quarterly (July 30)
(only filed by ballot measure committees) |
| <input type="checkbox"/> October 10 Pre-General Report | <input type="checkbox"/> 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. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV.

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).

	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Year*	\$ XXXXXX	\$ <u> </u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>0</u>	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>1729.05</u>	\$ <u>1729.05</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>1729.05</u>	\$ <u>1729.05</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>1242.95</u>	\$ <u>1242.95</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>486.10</u>	\$ <u>486.10</u>

*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. Note that the closing cash balance for the current reporting period appears on the next report as beginning cash on hand.

Section V

CONTRIBUTIONS PLEDGED - INCURRED EXPENDITURES

Contributions Pledged during this reporting period but not yet received: None \$ _____ (see attached Schedule C-2A)
Incurred Expenditures during this reporting period but not yet paid: None \$ _____ (see attached Schedule C-2B)

Return This Report To:
Pete T. Cenarrusa
Secretary of State
PO Box 83720
Boise ID 83720-0080
fax: (208) 334-2282

Section VI

CERTIFICATION

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

Fred Lawson
Signature of Political Treasurer

RECEIVED
 SECRETARY OF STATE
 BOISE, IDAHO
 MAY 18 11:12 AM '04

DETAILED SUMMARY PAGE

Name of Candidate or Committee	Report Covering the Period From 5/17/04 to <u>5/18/04</u>
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3-19-04

UNITEMIZED CONTRIBUTIONS

Contributions of Fifty Dollars (\$50.00) or Less This Period

Total Number 4 Total Amount: \$ 150.00

UNITEMIZED EXPENDITURES

Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period

Total Number 30 Total Amount \$ ~~1179.05~~ 0

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>150.00</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>1579.05</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 1729.05 <u>1729.05</u> 17
<u>1</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$
Itemized Expenditures (total all Schedule B sheets)	\$ <u>1242.95</u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>1242.95</u>

SCHEDULE A
ITEMIZED CONTRIBUTIONS
of more than Fifty Dollars (\$50.00) this period

Name of Candidate or Committee
Marla LAWSON

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A	Column B	Column C
		Cash or Check	In-Kind (non-monetary)	Loans
<u>5/7/04</u>	1. JAMES D BRANSON 52 CANYON V. 24 DR, Lowman ID 83637	\$ <u>100.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>100.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>5/18/04</u>	2. SANDY Donley 10 HANKS CR, LN GARSON VALLEY, ID 83622	\$ <u>300.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>300.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>4/14/04</u>	3. MARLA LAWSON 7655 HWY 21 LOWMAN ID 83677	\$ _____	\$ _____	\$ <u>1179.05</u>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ <u>1179.05</u> Calendar Year to Date
<u> / / </u>	4.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	5.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	6.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	7.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	10.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
Subtotals of Columns A, B & C		\$ <u>400.00</u>	\$ <u>0</u>	\$ <u>1179.05</u>
Total This Page (add columns A, B & C)				\$ <u>1579.05</u>

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

Name of Candidate or Committee
MARLA LAWSON

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
<u>3, 19, 04</u>	<u>1. IDAHO SECT. OF STATE 700 West Jefferson PO Box 83720 Boise Boise 83720-0020</u>	<u>\$ 30.00</u>	\$ _____
Purpose of Above Expenditure: <u>REGISTRATION</u>			
<u>7, 18, 04</u>	<u>2. office DEPOT 3545 FAIRVIEW AVE. MERIDIAN ID 83642</u>	<u>\$ 33.90</u>	\$ _____
Purpose of Above Expenditure: <u>BUSINESS CARDS</u>			
<u>4, 9, 04</u>	<u>3. CROSS ROBERTLIE 916 BYRD AVE. Neenah WI 54956-3998</u>	<u>\$ 568.67</u>	\$ _____
Purpose of Above Expenditure: <u>CAMPAIGN SIGNS</u>			
<u>4, 14, 04</u>	<u>4. CROSS ROBERTLIE 916 BYRD AVE Neenah WI 54956-3998</u>	<u>\$ 585.40</u>	\$ _____
Purpose of Above Expenditure: _____			
<u>4, 14, 04</u>	<u>5. STAPLES 8059 N. Preece Dr. Boise ID 83724</u>	<u>\$ 24.98</u>	\$ _____
Purpose of Above Expenditure: <u>Paper Products</u>			
<u>1, 1, 1</u>	<u>6.</u>	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
<u>1, 1, 1</u>	<u>7.</u>	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
<u>1, 1, 1</u>	<u>8.</u>	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
<u>1, 1, 1</u>	<u>9.</u>	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
Subtotals of Columns A & B		<u>\$ 1242.95</u>	<u>\$ 0</u>
Total This Page (add columns A & B)		<u>\$ 1242.95</u>	