



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

Section I

| | | | |
|--|---------------------------------------|---|---|
| Name of Candidate or Political Committee and Chairperson LARRY C. BRAEFORD | | Office Sought (if candidate) STATE REPRESENTATIVE | District (if any) 04 FEB 14 PM 2:02 |
| Mailing Address <input type="checkbox"/> Check if address change. 3208 E. CUB RIVER RD | City and Zip FRANKLIN 83237 | Home Phone 646-2409 | Work Phone 646-2409 |
| Name of Political Treasurer ELWITT LARSEN | | STATE OF IDAHO | |
| Mailing Address <input type="checkbox"/> Check if address change. 3704 S, STATE | City and Zip PRESTON 83263 | Home Phone 852-2328 | Work Phone 852-1090 |

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 1/01/03 through 12/31/03

- | | | |
|--|---|--|
| <input 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 checked="" 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 | \$ 1,871.58 |
| Line 2: Enter Cash Balance at Close of Last Reporting Period** | \$ 1,871.58 | \$ XXXXXX |
| Line 3: Total Contributions (Enter amount from page 2) | \$ 350.46 | \$ 350.46 |
| Line 4: Subtotal (Add lines 1, 2 and 3) | \$ 2,222.04 | \$ 2,222.04 |
| Line 5: Total Expenditures (Enter amount from page 2) | \$ 564.54 | \$ 564.54 |
| Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)** | \$ 1,657.50 | \$ 1,657.50 |

*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)

Section VI

CERTIFICATION

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

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

V. Elwitt Larsen
Signature of Political Treasurer

DETAILED SUMMARY PAGE

| | |
|--|---|
| Name of Candidate or Committee <u>LARRY C. BRADFORD</u> | Report Covering the Period From <u>11/103</u> to <u>12/31/03</u> |
|--|---|

| | |
|--|----------------------------|
| UNITEMIZED CONTRIBUTIONS | |
| Contributions of Fifty Dollars (\$50.00) or Less This Period | |
| Total Number <u>6</u> | Total Amount \$ <u>.46</u> |

| | |
|---|------------------------------|
| UNITEMIZED EXPENDITURES | |
| Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period | |
| Total Number <u>4</u> | Total Amount \$ <u>46.87</u> |

| | Total This Period |
|--|-------------------|
| <u>1</u> Number of Schedule A pages Attached | |
| Contributions | |
| Unitemized Contributions (\$50 and less) from top of page | \$ <u>.46</u> |
| Itemized Contributions (total all Schedule A sheets) | \$ <u>350.00</u> |
| Total Contributions (also enter this figure on page 1, Section IV, line 3) | \$ <u>350.46</u> |
| | |
| <u>2</u> Number of Schedule B pages Attached | |
| Expenditures | |
| Unitemized Expenditures (less than \$25) from top of page | \$ <u>46.87</u> |
| Itemized Expenditures (total all Schedule B sheets) | \$ <u>517.67</u> |
| Total Expenditures (also enter this figure on page 1, Section IV, line 5) | \$ <u>564.54</u> |

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

Name of Candidate or Committee
LARRY C. BRADFORD

| | | Column A | Column B | Column C |
|--|--|-----------------------------------|-----------------------------------|-----------------------------------|
| Date/ Receipt For | Full Name, Mailing Address and Zip Code of Contributor/Lender | Cash or Check | In-Kind (non-monetary) | Loans |
| <u>12/3/02</u> | 1. SEPT <u>SEPT ZERO CANDIDLY</u> <u>ALTAPIS CORP SERVICES INC</u> <u>134 S. 5th</u> <u>BOISE, IDAHO 83702</u> | \$ <u>350.00</u> | \$ _____ | \$ _____ |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date |
| <u> / / </u> | 2. | \$ _____ | \$ _____ | \$ _____ |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date |
| <u> / / </u> | 3. | \$ _____ | \$ _____ | \$ _____ |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ 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>350.00</u> | \$ _____ | \$ _____ |
| Total This Page (add columns A, B & C) | | | | \$ <u>350.00</u> |

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

Name of Candidate or Committee
LARRY C. BRADFORD

| | | Column A | Column B |
|---|--|----------------------|------------------------|
| Date | Full Name, Mailing Address and Zip Code of Recipient | Cash or Check | In-Kind (non-monetary) |
| <u>1/29/03</u> | ^{1.} REPUBLICANS FUNDS RAISING BOISE, IDAHO 83202 83706 | \$ <u>100.00</u> | \$ _____ |
| Purpose of Above Expenditure: <u>DONATION #326</u> | | | |
| <u>4/7/03</u> | ^{2.} ANDRAGE'S RESTAURANT 2137 BROADWAY AVE BOISE, IDAHO 83206 | \$ <u>41.59</u> | \$ _____ |
| Purpose of Above Expenditure: <u>ENTERTAINMENT</u> | | | |
| <u>5/2/03</u> | ^{3.} PUBLIC EDUCATION | \$ 100.00 | \$ _____ |
| Purpose of Above Expenditure: <u>DONATION #327 - CHECK LOST</u> | | | |
| <u>5/30/03</u> | ^{4.} IDAHO REPUBLIC PARTY BOISE, IDAHO 83206 | \$ <u>100.00</u> | \$ _____ |
| Purpose of Above Expenditure: <u>DONATION #328</u> | | | |
| <u>7/17/03</u> | ^{5.} NATIONAL RIFLE ASSOCIATION OF AMERICA | \$ <u>35.00</u> | \$ _____ |
| Purpose of Above Expenditure: <u>DONATION #329 - MEMBERSHIP</u> | | | |
| <u>7/24/03</u> | ^{6.} SUPER 8 MOTEL 133 STATE BRIGGS, IDAHO 83422 | \$ <u>79.71</u> | \$ _____ |
| Purpose of Above Expenditure: | | | |
| <u>8/14/03</u> | ^{7.} GYSER'S RESTAURANT SONA SPRINGS, IDAHO 83276 | \$ <u>52.91</u> | \$ _____ |
| Purpose of Above Expenditure: | | | |
| <u>8/16/03</u> | ^{8.} BOUNEVILLE CO. REPUBLICAN PARTY IDAHO FALLS, IDAHO | \$ <u>30.00</u> | \$ _____ |
| Purpose of Above Expenditure: <u>DINNER #330</u> | | | |
| <u>10/13/03</u> | ^{9.} CARIBOU COUNTY SUN P.O. BOX 815 SONA SPRINGS IDAHO 83276 | \$ <u>25.00</u> | \$ _____ |
| Purpose of Above Expenditure: <u>ADVERTISING #331</u> | | | |
| Subtotals of Columns A & B | | \$ _____ | \$ <u>464.21</u> |
| Total This Page (add columns A & B) | | | \$ <u>464.21</u> |

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

Name of Candidate or Committee
LARRY C. BRADFORD

| | | Column A | Column B |
|--|--|---------------|------------------------|
| Date | Full Name, Mailing Address and Zip Code of Recipient | Cash or Check | In-Kind (non-monetary) |
| 10/22/03 | 1. SUPER 8 MOTEL 133 STAR DRiggs, IDAHO 83422 | \$53.46 | \$ _____ |
| Purpose of Above Expenditure: <u>lodging</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 | | \$53.46 | \$ _____ |
| Total This Page (add columns A & B) | | | \$53.46 |