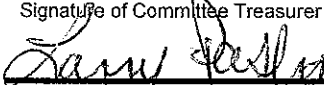


Campaign Finance Report Short Form EB-2a State Elections Board	W.S.E.B ID Number
---	-------------------

<input type="checkbox"/> Spring <input type="checkbox"/> Fall <input type="checkbox"/> Special Pre-Primary _____	<input checked="" type="checkbox"/> Continuing Report due Jan 31 <u>2009</u>
<input type="checkbox"/> Spring <input type="checkbox"/> Fall <input type="checkbox"/> Special Pre-Election _____	<input type="checkbox"/> Continuing Report due July 20, _____

Friends of Larry Pasha
 Name of Candidate or Committee (in full)
201 North High Point Road
 Address (number and street)
Madison, WI 53717
 City, State, Zip

I certify that the above named committee or candidate did not receive contributions or other income make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported This report fulfills filing requirements under Sec. 11.06(9), Stats.

Signature of Committee Treasurer or Candidate 	Date <u>2-2-09</u>	Daytime Phone <u>608-213-1234</u>
--	-----------------------	--------------------------------------

EB-2a (Rev 9/95) (Reformatted 3/98) (Y2K 9/99)

