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March 07, 2011

ROBIN KELLY  
SENIOR CAMPAIGN FINANCE ANALYST  
FEDERAL ELECTIONS COMMISSION  
999 E. STREET N.W.  
WASHINGTON DC 20463

IDENTIFICATION NUMBER: C00492199

Dear Robin Kelly,

This letter and enclosed FEC Form 1 is in response to your letter dated February 04, 2011 which was prompted by a deficiency in the FEC Form 1 originally submitted. Please find the enclosed FEC Form 1 which includes the necessary electronic e-mail address data that was absent from the previously submitted form.

If this response is deficient in any way, please notify us so the appropriate corrections may be made. Thank you.

Respectfully,



David A. Larson  
People for David A. Larson  
1377 Tahoe Ave  
Yucca Valley CA 92284  
760-793-8653

ENCLOSURE: FEC FORM 1

11030582308

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FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

PEOPLE FOR DAVID A. LARSON

ADDRESS (number and street)

1377 TAHOE AVE.

(Check if address is changed)

YUCCA VALLEY CA 92284-4874

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

X (Check if address is changed)

ELECTLARSON@YAHOO.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

X (Check if address is changed)

WWW.ELECTLARSON.COM

2. DATE 03 ' 07 ' 2011

3. FEC IDENTIFICATION NUMBER C00492199

4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer KAY I. LARSON

Signature of Treasurer Kay I. Larson

Date 03 ' 07 ' 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2009)

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5. TYPE OF COMMITTEE

Candidate Committee:

- (a)  This committee is a principal campaign committee. (Complete the candidate information below.)
- (b)  This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate DAVID A. LARSON

Candidate Party Affiliation AIP Office Sought: House Senate  President State District

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

Party Committee:

- (d)  This committee is a \_\_\_\_\_ (National, State or subordinate) committee of the \_\_\_\_\_ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
  - Corporation
  - Corporation w/o Capital Stock
  - Labor Organization
  - Membership Organization
  - Trade Association
  - Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. \_\_\_\_\_ FEC ID number C
2. \_\_\_\_\_ FEC ID number C
3. \_\_\_\_\_ FEC ID number C
4. \_\_\_\_\_ FEC ID number C

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Write or Type Committee Name

PEOPLE FOR DAVID A. LARSON

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name KAY I. LARSON

Mailing Address 1377 TAHOE AVE.

YUCCA VALLEY CA 92284-14874

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number 760-364-3632

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer KAY I. LARSON

Mailing Address 1377 TAHOE AVE.

YUCCA VALLEY CA 92284-14874

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number [Empty]

11030582311

Full Name of Designated Agent

KAY, I. LARSON

Mailing Address

1377 TAHOE AVE

YUCCA VALLEY

CA

92284-4874

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

760-364-3632

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

UNION BANK

Mailing Address

57500 TWENTYNINE PALMS HWY

YUCCA VALLEY

CA

92284-2934

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

11030582312

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
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USPS Express Mail Postmarked  
3/8/11

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*Amo*  
 PREPARER  
 (3/2005)

3/9/11  
 DATE PREPARED

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