UNITED STATES SENATE FINANCIAL DISCLOSURE REPORT
FOR ANNUAL AND TERMINATION REPORTS

Last Name: Snowe
First Name and Middle Initial: Olympia J.
Address: 154 Russell Senate Office Building, Washington, DC 20510

Senate Office Address Number: 202-224-5344
Senate Office Telephone Number: 202-224-5344

Calendar Year Covered by Report: 2004
Annual Report: Yes

Senate Office/Agency in which Employed:

Prior Office/Agency in which Employed:

After Reading the Instructions - Answer Each of These Questions and Attach the Relevant Part

Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? 
Yes: Complete and Attach PART I.
No: X

Did you or your spouse have earned income (e.g., salaries or fees) or non-investment income of more than $200 from any reportable source in the reporting period? 
Yes: Complete and Attach PART II
No: X

Did you, your spouse, or dependent child receive unearned or investment income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? 
Yes, Complete & Attach PART III (a) and/or III(b)
No: X

Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? 
Yes: Complete and Attach PART IV
No: X

Did you, your spouse, or dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $305 and not otherwise exempt)? 
Yes: Complete and Attach PART V
No: X

Did you, your spouse, or dependent child receive any reportable travel or reimbursements for travel in the reporting period (i.e., worth more than $305 from one source)? 
Yes: Complete and Attach PART VI
No: X

Did you, your spouse, or dependent child have any reportable liability (more than $10,000) during the reporting period? 
Yes: Complete and Attach PART VII
No: X

Did you hold any reportable positions on or before the date of filing in the current calendar year? 
Yes: Complete and Attach PART VIII
No: X

Do you have any reportable agreement or arrangement with an outside entity? 
Yes: Complete and Attach PART IX
No: X

If this is your FIRST Report: Did you receive compensation of more than $5,000 from a single source in the two prior years? 
Yes: Complete and Attach PART X
No: X

Each question must be answered and the appropriate PART attached for each "YES" response.

Signature of Reporting Individual: Olympia J. Snowe
Date (Month, Day, Year): May 12, 2005

Certification: I certify that the statements I have made on this form and all attached schedules are true, complete, and correct to the best of my knowledge and belief.

For Official Use Only - Do Not Write Below This Line

Signature of Reviewing Official: Date (Month, Day, Year):