

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)						PAGE 2 OF 2			
<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30a

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NAME OF COMMITTEE (in Full): **Employers Mutual Casualty Company Political Action Committee for Responsible Federal Government**

Full Name (Last, First, Middle Initial) A. Grassley Committee, Inc.		Date of Disbursement 03 01 2004
Mailing Address 701 E Court Ave P. O. Box 1000		Amount of Each Disbursement this Period 1,000.00
City Des Moines	State IA	
Purpose of Disbursement Contribution		Category/Type 011
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District:	

Full Name (Last, First, Middle Initial) B. Poolman for Commissioner		Date of Disbursement 03 16 2004
Mailing Address c/o Susan E. Voss 323 E 5th St		Amount of Each Disbursement this Period 200.00
City Des Moines	State IA	
Purpose of Disbursement Contribution		Category/Type 011
Candidate Name Jim Poolman		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Commissioner of Insurance	
State:	District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	1,200.00
TOTAL This Period (last page this line number only)	1,750.00