

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

Latham For Congress

ADDRESS (number and street)

P.O. Box 71

Check if different than previously reported. (ACC)

Clarion

IA

50525

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00287045

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

IA

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

07

01

2006

through

09

30

2006

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

Type or Print Name of Treasurer Robert W. Brinton

Signature of Treasurer Electronically Filed by Robert W. Brinton

Date

02

08

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Latham For Congress

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	188715.18	972386.85
(b) Total Contribution Refunds (from Line 20(d)).....	1500.00	1650.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	187215.18	970736.85
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	270749.23	611368.36
(b) Total Offsets to Operating Expenditures (from Line 14).....	250.00	16484.14
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	270499.23	594884.22
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	521653.72	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name  
Latham For Congress

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

62768.66

348848.48

(ii) Unitemized.....

15183.00

132326.00

(iii) TOTAL of contributions

77951.66

481174.48

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

110763.52

491212.37

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

188715.18

972386.85

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

250.00

16484.14

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

7025.43

21821.92

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)..... ▶

195990.61

1010692.91

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	270749.23	611368.36
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1500.00	1650.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1500.00	1650.00
21. OTHER DISBURSEMENTS.....	0.00	16100.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	272249.23	629118.36

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	597912.34
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	195990.61
25. SUBTOTAL (add Line 23 and Line 24).....	793902.95
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	272249.23
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	521653.72

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Steven Ackerson

Mailing Address 1634 NW 131st St

City State Zip Code  
Clive IA 50325-7448

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Iowa Health Care Association Upper Management

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

500.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2006

Transaction ID: 61012.C17370

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Samuel Adams

Mailing Address 2108 N Dakota Ave

City State Zip Code  
Ames IA 50014-9016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Professor

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

200.00

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2006

Transaction ID: 61012.C17569

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Dale Andres

Mailing Address 1160 Glen Oaks Dr

City State Zip Code  
West Des Moines IA 50266-6634

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mercy Medical Center Pathologist

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

3075.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

Transaction ID: 61012.C17937

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1125.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Joan Ballantyne

Mailing Address PO Box 734  
P.O. Box 734

City Cherokee State IA Zip Code 51012-0734

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Real Estate

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 09 / 2006

Transaction ID: 61012.C17372

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Roger Bang

Mailing Address 56 River Heights Drive

City Mason City State IA Zip Code 50401-4032

FEC ID number of contributing federal political committee. **C**

Name of Employer First Insurance Occupation Upper Management

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 24 / 2006

Transaction ID: 61012.C17743

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Bruce Baumgard

Mailing Address 4813 78th St

City Urbandale State IA Zip Code 50322-1068

FEC ID number of contributing federal political committee. **C**

Name of Employer Mail Services, Inc. Occupation President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: 61012.C17880

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **450.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 7 / 154
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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A.</b> Jeff Becker		Date of Receipt M M / D D / Y Y Y Y Y 09 / 08 / 2006	
Mailing Address 265 W Riverside Rd		Transaction ID: 61012.C17871	
City State Zip Code Ames IA 50010-9502	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Becker Underwood	Occupation Upper Management		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Kathleen Beddow		Date of Receipt M M / D D / Y Y Y Y Y 08 / 01 / 2006	
Mailing Address 19 Edinburgh Ln		Transaction ID: 61012.C17461	
City State Zip Code Pinehurst NC 28374-6714	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer No Employer		Occupation Homemaker	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> James Bernstein		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 940 Spyglass Cir		Transaction ID: 60715.C17358	
City State Zip Code N Sioux City SD 57049-5101	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer State Steele Supply		Occupation Owner	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	.....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
David Bieging

Mailing Address 7613 Range Rd

City State Zip Code  
Alexandria VA 22306-2425

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Olsson Frank and Weeda Upper Management

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
1750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2006

Transaction ID: 61012.C17952

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Carey Bligard

Mailing Address 1736 River Forest Dr

City State Zip Code  
Fort Dodge IA 50501-7012

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wolfe Clinic/ Fort Dodge Medi Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2006

Transaction ID: 61012.C17996

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Robert Bocken

Mailing Address PO Box 1313

City State Zip Code  
Fort Dodge IA 50501-1313

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Farner-Bocken Company Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 09 / 2006

Transaction ID: 61012.C17373

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **825.00**

**TOTAL** This Period (last page this line number only) ..... ►



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Jill Bockorny

Mailing Address 7765 Fisher Island Dr.

City State Zip Code  
Miami Beach FL 33109

FEC ID number of contributing federal political committee. **C**

Name of Employer  
No Employer

Occupation  
Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2006

Transaction ID: 61012.C18034

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Bruce Bradshaw

Mailing Address 13699 Bay Hill Dr

City State Zip Code  
Clive IA 50325-8565

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Team Effort, Inc.

Occupation  
Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
2025.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2006

Transaction ID: 61012.C17426

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Donald Brandt

Mailing Address 1809 Country Club Rd

City State Zip Code  
Indianola IA 50125-1137

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Claim Technologies Inc

Occupation  
President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2006

Transaction ID: 61012.C17903

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **725.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Donald Broadbent

Mailing Address 8308 Colby Pkwy Suite 228

City Windsor Heights State IA Zip Code 50322-7008

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 29 / 2006

Transaction ID: 61012.C17406

Amount of Each Receipt this Period  
 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
William Brown

Mailing Address 4577 280th St

City Graettinger State IA Zip Code 51342-8519

FEC ID number of contributing federal political committee. **C**

Name of Employer Energy Panel Structures Occupation V.P.

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 23 / 2006

Transaction ID: 61012.C17693

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mary Bruce

Mailing Address 2223 4th St

City Perry State IA Zip Code 50220-1175

FEC ID number of contributing federal political committee. **C**

Name of Employer Osmundson Mfg Co. Occupation Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 625.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 14 / 2006

Transaction ID: 61012.C17612

Amount of Each Receipt this Period  
 125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1225.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Duane Bruening

Mailing Address PO Box 127

City State Zip Code  
Decorah IA 52101-0127

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed  
Occupation Construction

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 23 / 2006

**Transaction ID:** 61012.C17698

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Keith Bruening

Mailing Address 702 Day St

City State Zip Code  
Decorah IA 52101-2225

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed  
Occupation Construction

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
1875.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 29 / 2006

**Transaction ID:** 61012.C17719

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Jean Brumm

Mailing Address 606 Poplar St

City State Zip Code  
Osage IA 50461-1316

FEC ID number of contributing federal political committee. **C**

Name of Employer Home Trust and Savings Bank  
Occupation Bank Loan Officer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
1025.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 08 / 2006

**Transaction ID:** 61012.C17560

Amount of Each Receipt this Period  
150.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **650.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
William Burke

Mailing Address 57113 250th Street

City State Zip Code  
Ames IA 50010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2006

Transaction ID: 61012.C17822

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Dolores Byerly

Mailing Address 1725 S Delaware Ave

City State Zip Code  
Mason City IA 50401-6036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Consultant

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

650.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 12 / 2006

Transaction ID: 61012.C17594

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mary Cady

Mailing Address 102 1st Ave SE # 456  
Box 456

City State Zip Code  
Hampton IA 50441-2202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
No Employer Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

475.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2006

Transaction ID: 61012.C17541

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Anne Cameron

Mailing Address 56 Country Cir

City State Zip Code  
Mason City IA 50401-1642

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006 470.00

Date of Receipt  
08 / 12 / 2006

Transaction ID: 61012.C17591

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Charles Carey

Mailing Address 5210 Howard Ave

City State Zip Code  
Western Springs IL 60558-2049

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Chicago Mercantile & Exchange Trader

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006 2000.00

Date of Receipt  
09 / 13 / 2006

Transaction ID: 61012.C17855

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
David Carlson

Mailing Address 110 Western St

City State Zip Code  
Decorah IA 52101-1528

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Carlson Construction President

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006 2500.00

Date of Receipt  
08 / 31 / 2006

Transaction ID: 61012.C17748

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1550.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Alan Carstens

Mailing Address 11636 Lark Ave

City State Zip Code  
Rockwell IA 50469-8730

FEC ID number of contributing federal political committee. **C**

Name of Employer  
No Employer

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
900.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 1 2 / 2 0 0 6

Transaction ID: 61012.C17589

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Alan Carstens

Mailing Address 11636 Lark Ave

City State Zip Code  
Rockwell IA 50469-8730

FEC ID number of contributing federal political committee. **C**

Name of Employer  
No Employer

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
1025.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 2 3 / 2 0 0 6

Transaction ID: 61012.C17686

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Alan Carstens

Mailing Address 11636 Lark Ave

City State Zip Code  
Rockwell IA 50469-8730

FEC ID number of contributing federal political committee. **C**

Name of Employer  
No Employer

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
1075.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 1 3 / 2 0 0 6

Transaction ID: 61012.C17826

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **275.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Norma Casperson</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2006
Mailing Address PO Box 632 601 S Akir		Transaction ID: 61012.C17830
City State Zip Code Latimer IA 50452-0632	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Occupation Retired Election Cycle-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>B. Dean Caudle</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2006
Mailing Address 5516 Meredith Dr Apt 4		Transaction ID: 61012.C17828
City State Zip Code Des Moines IA 50310-2341	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Ziegler, Inc. Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Occupation truck driver Election Cycle-to-Date ▼ 285.00	

Full Name (Last, First, Middle Initial) <b>C. Norman Chambers</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2006
Mailing Address 1409 230th Ave		Transaction ID: 61012.C17701
City State Zip Code Corwith IA 50430-8520	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self-Employed Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Occupation Farmer Election Cycle-to-Date ▼ 475.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	225.00
<b>TOTAL</b> This Period (last page this line number only) .....	_____

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Eugene Christianson

Mailing Address PO Box 148

City Thornton State IA Zip Code 50479-0148

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 10 / 2006

**Transaction ID:** 61012.C17628

Amount of Each Receipt this Period  
 150.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Conrad Clement

Mailing Address PO Box 154  
11969 Valley Ave

City Cresco State IA Zip Code 52136-0154

FEC ID number of contributing federal political committee. **C**

Name of Employer Featherlite Trailers Occupation CEO

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 19 / 2006

**Transaction ID:** 61012.C17383

Amount of Each Receipt this Period  
 2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Marcia Connell

Mailing Address 527 N Shore Dr

City Clear Lake State IA Zip Code 50428-1342

FEC ID number of contributing federal political committee. **C**

Name of Employer Clear Lake Telephone Occupation Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 875.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 31 / 2006

**Transaction ID:** 61012.C17424

Amount of Each Receipt this Period  
 125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2275.00**

**TOTAL** This Period (last page this line number only) ..... ►



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Marcia Connell

Mailing Address 527 N Shore Dr

City State Zip Code  
Clear Lake IA 50428-1342

FEC ID number of contributing federal political committee. **C**

Name of Employer Clear Lake Telephone Occupation Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
1125.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 31 / 2006

Transaction ID: 61012.C17761

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Cornelius Conover

Mailing Address 1215 Grand Ave

City State Zip Code  
Spencer IA 51301

FEC ID number of contributing federal political committee. **C**

Name of Employer Northwest Federal Savings Bank Occupation Banker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2006

Transaction ID: 60715.C17346

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth Cowie

Mailing Address 1103 Skyline Dr

City State Zip Code  
Decorah IA 52101-2513

FEC ID number of contributing federal political committee. **C**

Name of Employer Miller Law Firm Occupation Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 31 / 2006

Transaction ID: 61012.C17750

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	625.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 18 / 154
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NAME OF COMMITTEE (In Full)  
Latham For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Craigmile		Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2006	
Mailing Address PO Box 355 1405 Park St.		<b>Transaction ID:</b> 61012.C17479	
City State Zip Code Gowrie IA 50543-0355		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation retired Retired			
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006		Election Cycle-to-Date ▼ 197.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Robert Craigmile		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2006	
Mailing Address PO Box 355 1405 Park St.		<b>Transaction ID:</b> 61012.C17853	
City State Zip Code Gowrie IA 50543-0355		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation retired Retired			
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006		Election Cycle-to-Date ▼ 247.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Donald Decker		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006	
Mailing Address PO Box 15 2244 Lakewood Trail		<b>Transaction ID:</b> 61012.C17994	
City State Zip Code Fort Dodge IA 50501		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Decker Trucking Owner			
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006		Election Cycle-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Donna Doran Mailing Address 427 Aspen Ridge Rd City Ames State IA Zip Code 50010-8028 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61012.C17699 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	2		2	0	0	6	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		2	2		2	0	0	6														
250.00																							
Name of Employer No Employer Occupation Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006 Election Cycle-to-Date ▼ <table border="1"> <tr> <td>475.00</td> </tr> </table>		475.00																					
475.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) D. Robert Downing Mailing Address 8489 Highway 65/69 City Indianola State IA Zip Code 50125 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61012.C17811 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	6	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	1		2	0	0	6														
100.00																							
Name of Employer Self-Employed Occupation Construction Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006 Election Cycle-to-Date ▼ <table border="1"> <tr> <td>550.00</td> </tr> </table>		550.00																					
550.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) Tom Ebeling Mailing Address 100 4th Ave N City Clear Lake State IA Zip Code 50428-1647 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61012.C17549 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	7		2	0	0	6	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	7		2	0	0	6														
100.00																							
Name of Employer Edwards-Brandt & Assoc Occupation Insurance Agent Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006 Election Cycle-to-Date ▼ <table border="1"> <tr> <td>225.00</td> </tr> </table>		225.00																					
225.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>450.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Tom Ebeling</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 18 / 2006	
Mailing Address 100 4th Ave N		Transaction ID: 61012.C17905	
City State Zip Code Clear Lake IA 50428-1647		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Edwards-Brandt & Assoc	Occupation Insurance Agent		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>B. William Egleston</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 29 / 2006	
Mailing Address 509 Brentwood Rd		Transaction ID: 61012.C18002	
City State Zip Code Marshalltown IA 50158-3727		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) <b>C. Wayne Emerson</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 28 / 2006	
Mailing Address 1013 W Broadway St		Transaction ID: 61012.C17970	
City State Zip Code Eagle Grove IA 50533-1618		Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer retired	Occupation Retired		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 725.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	325.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Wesley Fiala

Mailing Address 16954 200th St

City State Zip Code  
Mason City IA 50401-9019

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
 General 2006

775.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 29 / 2006

Transaction ID: 61012.C17412

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Wesley Fiala

Mailing Address 16954 200th St

City State Zip Code  
Mason City IA 50401-9019

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
 General 2006

900.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006

Transaction ID: 61012.C17832

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
James Fitzpatrick

Mailing Address 11 Hackberry Rd

City State Zip Code  
Mason City IA 50401-2505

FEC ID number of contributing federal political committee. **C**

Name of Employer Mercy Medical Center Occupation CEO

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
 General 2006

625.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2006

Transaction ID: 61012.C17542

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **350.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
M. Jane Foley

Mailing Address 49 Winnebago Way

City State Zip Code  
Mason City IA 50401-1635

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2006

Transaction ID: 61012.C17902

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Thomas Foley

Mailing Address PO Box 2935

City State Zip Code  
Saint Paul MN 55102-0935

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 01 / 2006

Transaction ID: 61012.C17463

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Craig Frana

Mailing Address 2360 175th St

City State Zip Code  
Calmar IA 52132-7507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Premium Beverage Salesman

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006

Transaction ID: 61012.C17925

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Dennis Freeman

Mailing Address 2749 Cleveland Dr

City State Zip Code  
Ames IA 50010-4407

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Financial Planner

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

675.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2006

Transaction ID: 61012.C17455

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
James Frevert

Mailing Address 539 Oak Ln

City State Zip Code  
Nevada IA 50201-2245

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation  
Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

525.00

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2006

Transaction ID: 61012.C17563

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mark Friedow

Mailing Address PO Box 110  
1213 Rushridge Rd.

City State Zip Code  
Jefferson IA 50129-0110

FEC ID number of contributing federal political committee. **C**

Name of Employer Sparboe Companies Occupation  
Administrator

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

825.00

Date of Receipt  
MM / DD / YYYY  
08 / 11 / 2006

Transaction ID: 61012.C17609

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>375.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Elwyn Thurman Gaskill

Mailing Address 1320 Birch Ave

City State Zip Code  
Corwith IA 50430-8045

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Farming

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2006

Transaction ID: 61012.C17425

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
David Gehling

Mailing Address 608 Crescent Ave

City State Zip Code  
Decorah IA 52101-1076

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Chiropractor

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 29 / 2006

Transaction ID: 61012.C17722

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Charles Gipp

Mailing Address 212 High St

City State Zip Code  
Decorah IA 52101-1048

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Farmer

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 07 / 2006

Transaction ID: 61012.C17771

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **625.00**

**TOTAL** This Period (last page this line number only) ..... ►



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 25 / 154</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) John Griswell</p> <p>Mailing Address 605 Grand Oaks Dr</p> <p>City State Zip Code West Des Moines IA 50265-5581</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Principal Financial Group Executive</p> <p>Receipt For: 2006  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼                  General 2006</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt                  M M / D D / Y Y Y Y Y                  08 / 12 / 2006</p> <p><b>Transaction ID:</b> 61012.C17599</p> <p>Amount of Each Receipt this Period                  2100.00</p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Lowell Grunwald</p> <p>Mailing Address 507 W Orchard Ave</p> <p>City State Zip Code Indianola IA 50125-1155</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Jerico Services Owner</p> <p>Receipt For: 2006  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼                  General 2006</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt                  M M / D D / Y Y Y Y Y                  07 / 29 / 2006</p> <p><b>Transaction ID:</b> 61012.C17400</p> <p>Amount of Each Receipt this Period                  50.00</p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) John Hagie</p> <p>Mailing Address 1001 8th Ave NW</p> <p>City State Zip Code Clarion IA 50525-8501</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Hagie Mfg. Owner</p> <p>Receipt For: 2006  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼                  General 2006</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt                  M M / D D / Y Y Y Y Y                  07 / 09 / 2006</p> <p><b>Transaction ID:</b> 61012.C17375</p> <p>Amount of Each Receipt this Period                  250.00</p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<p><b>2400.00</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
John Hagie

Mailing Address 1001 8th Ave NW

City Clarion State IA Zip Code 50525-8501

FEC ID number of contributing federal political committee. **C**

Name of Employer Hagie Mfg. Occupation Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2006

Transaction ID: 61012.C17947

Amount of Each Receipt this Period  
 250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Ray Hagie

Mailing Address 1200 2nd St. SW #118

City Clarion State IA Zip Code 50525

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2006

Transaction ID: 61012.C17932

Amount of Each Receipt this Period  
 250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Willis Hansen

Mailing Address 2050 Woodland Dr

City New Hampton State IA Zip Code 50659-9225

FEC ID number of contributing federal political committee. **C**

Name of Employer State Bank of Lawler Occupation Banker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 07 / 2006

Transaction ID: 60715.C17351

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
David Hanson

Mailing Address 1803 Springview Dr

City State Zip Code  
Mason City IA 50401-4761

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mercy Medical Center Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
08 / 19 / 2006

Transaction ID: 61012.C17678

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
John Hanson

Mailing Address 4444 Dodges Pt

City State Zip Code  
Clear Lake IA 50428-8776

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
08 / 19 / 2006

Transaction ID: 61012.C17673

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Al Hart

Mailing Address 115 Central Ave

City State Zip Code  
Charles City IA 50616-3104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
375.00

Date of Receipt  
09 / 13 / 2006

Transaction ID: 61012.C17825

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Ronald Heck

Mailing Address 437 290th St

City State Zip Code  
Perry IA 50220-7508

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ General 2006 650.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2006

Transaction ID: 61012.C17450

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Edward Hendrickson

Mailing Address 1920 Paulson Dr

City State Zip Code  
Ames IA 50010

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Upper Management

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ General 2006 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2006

Transaction ID: 60711.C17333

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Jeff Henning

Mailing Address PO Box 394  
8008 Tiboron Place

City State Zip Code  
Johnston IA 50131-0394

FEC ID number of contributing federal political committee. **C**

Name of Employer Henning Construction Occupation Contractor

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ General 2006 2000.00

Date of Receipt  
MM / DD / YYYY  
07 / 31 / 2006

Transaction ID: 61012.C17443

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **875.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A.</b> J. Richard Herbrechtsmeyer		Date of Receipt M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6	
Mailing Address 812 9th St		Transaction ID: 61012.C17752	
City Charles City	State IA	Amount of Each Receipt this Period 500.00	
Zip Code 50616-3418		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer First Security Bank	Occupation President		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Alan Hermanson		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 0 6	
Mailing Address 12621 Hillcrest Dr		Transaction ID: 61012.C17592	
City Story City	State IA	Amount of Each Receipt this Period 250.00	
Zip Code 50248-8602		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Farmer		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 850.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Peter Hermanson		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 522 Story St Unit 101		Transaction ID: 61012.C17605	
City Story City	State IA	Amount of Each Receipt this Period 250.00	
Zip Code 50248-1102		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Woodland Farms, Inc.	Occupation Agriculture		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 650.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Amy Hewitt

Mailing Address 413 S Shore Dr

City State Zip Code  
Clear Lake IA 50428-2542

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Clear Lake Bank & Trust

Occupation  
Banker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
475.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 02 / 2006

Transaction ID: 61012.C17488

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Michelle Hill

Mailing Address 3472 Orchid Ave

City State Zip Code  
Manly IA 50456-8005

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 01 / 2006

Transaction ID: 61012.C17449

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Harlan Hockenberg

Mailing Address 6601 Westown Pkwy Ste 200

City State Zip Code  
West Des Moines IA 50266-7731

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Sullivan & Ward

Occupation  
Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 08 / 2006

Transaction ID: 61012.C17564

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Sandra Hoenig

Mailing Address 1216 25th Street

City State Zip Code  
Ames IA 50010

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Journalism

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

350.00

Date of Receipt  
MM / DD / YYYY  
08 / 07 / 2006

Transaction ID: 61012.C17544

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Royal Holz

Mailing Address 702 12th St S

City State Zip Code  
Grand Junction IA 50107-9534

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation  
Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

250.00

Date of Receipt  
MM / DD / YYYY  
08 / 02 / 2006

Transaction ID: 61012.C17471

Amount of Each Receipt this Period  
25.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Dale Howard

Mailing Address 2113 Briardale Dr

City State Zip Code  
Iowa Falls IA 50126-1617

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Auto Dealer

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 07 / 2006

Transaction ID: 60715.C17356

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1150.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Marilyn Howard

Mailing Address 2113 Briardale Dr

City Iowa Falls State IA Zip Code 50126-1617

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Auto Dealer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 07 / 2006

**Transaction ID:** 61012.C17546

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Steve Howard

Mailing Address 1327 Siloam Ave

City Iowa Falls State IA Zip Code 50126-1040

FEC ID number of contributing federal political committee. **C**

Name of Employer Dale Howard Inc Occupation Car Dealer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 1125.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 05 / 2006

**Transaction ID:** 60715.C17355

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Larry Hughes

Mailing Address 208 E 1st St PO Box 305  
501 North Ave

City Norwalk State IA Zip Code 50211

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Business Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 475.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 07 / 2006

**Transaction ID:** 61012.C17545

Amount of Each Receipt this Period  
 125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2125.00**

**TOTAL** This Period (last page this line number only) ..... ►



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Verle Hunt

Mailing Address 101 New Castle Rd

City Marshalltown State IA Zip Code 50158-5241

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 0 7 / 2 0 0 6

**Transaction ID:** 61012.C17523

Amount of Each Receipt this Period  
 50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Deborah Hunt-Repp

Mailing Address 2025 H Ave

City Perry State IA Zip Code 50220-8087

FEC ID number of contributing federal political committee. **C**

Name of Employer No Employer Occupation Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 0 8 / 2 0 0 6

**Transaction ID:** 61012.C17562

Amount of Each Receipt this Period  
 250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Donald Hunter

Mailing Address 610 Barnard St Box Aa

City Sloan State IA Zip Code 51055

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 2 9 / 2 0 0 6

**Transaction ID:** 61012.C17745

Amount of Each Receipt this Period  
 50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **350.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Donald Hunter

Mailing Address 610 Barnard St Box Aa

City State Zip Code  
Sloan IA 51055

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

650.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006

Transaction ID: 61012.C17829

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Erben Hunziker

Mailing Address 2619 Lindenwood Cir

City State Zip Code  
Ames IA 50014-4567

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Realtor

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

2400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 08 / 2006

Transaction ID: 61012.C17566

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Robins Jackson

Mailing Address 4909 Lake Shore Dr

City State Zip Code  
Okoboji IA 51355-2594

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Consultant

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

625.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 13 / 2006

Transaction ID: 60715.C17360

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **300.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Jacobson Mailing Address 34924 320th St City Ruthven State IA Zip Code 51358-8574 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61012.C17508 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	6	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	3		2	0	0	6														
50.00																							
Name of Employer Self-Employed Occupation Retired Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006 Election Cycle-to-Date ▼ <table border="1"> <tr> <td>175.00</td> </tr> </table>		175.00																					
175.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Robert Jacobson Mailing Address 34924 320th St City Ruthven State IA Zip Code 51358-8574 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61012.C17885 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	6	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	6														
50.00																							
Name of Employer Self-Employed Occupation Retired Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006 Election Cycle-to-Date ▼ <table border="1"> <tr> <td>225.00</td> </tr> </table>		225.00																					
225.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) David Jamison Mailing Address 3308 Cameron School Rd City Ames State IA Zip Code 50014-9395 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61012.C17706 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	0		2	0	0	6	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		2	0		2	0	0	6														
50.00																							
Name of Employer Government Occupation Treasurer Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006 Election Cycle-to-Date ▼ <table border="1"> <tr> <td>250.00</td> </tr> </table>		250.00																					
250.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>150.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Iris Jenney Mailing Address 2613 Duff Ave. City State Zip Code Ames IA 50010-4728 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2006 <b>Transaction ID:</b> 61012.C17468 Amount of Each Receipt this Period 20.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Homemaker Homemaker Receipt For: 2006 Election Cycle-to-Date <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006 210.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Iris Jenney Mailing Address 2613 Duff Ave. City State Zip Code Ames IA 50010-4728 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2006 <b>Transaction ID:</b> 61012.C17898 Amount of Each Receipt this Period 25.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Homemaker Homemaker Receipt For: 2006 Election Cycle-to-Date <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006 235.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Colin Jensen Mailing Address 2404 Manhattan Blvd City State Zip Code Spirit Lake IA 51360 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2006 <b>Transaction ID:</b> 61012.C17376 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation CM Jenson Comp Executive Receipt For: 2006 Election Cycle-to-Date <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>545.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
George Jessen

Mailing Address 2 Field Rd

City State Zip Code  
Mason City IA 50401-2554

FEC ID number of contributing federal political committee. **C**

Name of Employer Heartland Asphalt Occupation Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
08 / 15 / 2006

Transaction ID: 61012.C17639

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
George Jessen

Mailing Address 2 Field Rd

City State Zip Code  
Mason City IA 50401-2554

FEC ID number of contributing federal political committee. **C**

Name of Employer Heartland Asphalt Occupation Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
325.00

Date of Receipt  
MM / DD / YYYY  
08 / 19 / 2006

Transaction ID: 61012.C17668

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Garnita Johnson

Mailing Address 1814 8th Ave N

City State Zip Code  
Fort Dodge IA 50501-3349

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
175.00

Date of Receipt  
MM / DD / YYYY  
08 / 07 / 2006

Transaction ID: 61012.C17509

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **275.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Garnita Johnson

Mailing Address 1814 8th Ave N

City State Zip Code  
Fort Dodge IA 50501-3349

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
 General 2006

200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2006

Transaction ID: 61012.C17973

Amount of Each Receipt this Period  
25.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
James Johnson

Mailing Address 2419 Fairbanks Ave

City State Zip Code  
Moorland IA 50566-7558

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
 General 2006

300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: 61012.C17882

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
James Johnson

Mailing Address 2419 Fairbanks Ave

City State Zip Code  
Moorland IA 50566-7558

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
 General 2006

400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2006

Transaction ID: 61012.C17975

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **175.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Paul Johnson

Mailing Address 309 W Pinehurst Trl

City North Sioux City State SD Zip Code 57049-5234

FEC ID number of contributing federal political committee. **C**

Name of Employer Midlands Clinic Occupation Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 23 / 2006

Transaction ID: 61012.C17696

Amount of Each Receipt this Period  
 500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Richard Johnson

Mailing Address 3412 Jewel Dr

City Ames State IA Zip Code 50010-8457

FEC ID number of contributing federal political committee. **C**

Name of Employer Story Construction Occupation CEO

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 2625.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 31 / 2006

Transaction ID: 61012.C17442

Amount of Each Receipt this Period  
 250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
James Jorgensen

Mailing Address 1012 Lark Ave

City Hampton State IA Zip Code 50441-9776

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Farmer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 11 / 2006

Transaction ID: 61012.C17803

Amount of Each Receipt this Period  
 50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Phyllis Kelly

Mailing Address 126 Cedar Cir

City State Zip Code  
Charles City IA 50616-1604

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Owner

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
 General 2006

1300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 01 / 2006

Transaction ID: 61012.C17453

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Kevin Kimle

Mailing Address 2525 N Dakota Ave

City State Zip Code  
Ames IA 50014-9020

FEC ID number of contributing federal political committee. **C**

Name of Employer E-markets Occupation  
Teacher/Educator

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
 General 2006

275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 01 / 2006

Transaction ID: 61012.C17451

Amount of Each Receipt this Period  
25.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Yvonne Kinzler

Mailing Address 2369 170th St

City State Zip Code  
Ames IA 50014-2635

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Construction

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
 General 2006

350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 14 / 2006

Transaction ID: 61012.C17613

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **200.00**

**TOTAL** This Period (last page this line number only) ..... ►



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Gerald Kirke

Mailing Address 5465 Mills Civic Pkwy Ste 400

City State Zip Code  
West Des Moines IA 50266-5303

FEC ID number of contributing federal political committee. **C**

Name of Employer Kirke-Van Orsdel Occupation Insurance

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 06 / 2006

Transaction ID: 60711.C17338

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Lori Kittleson

Mailing Address 330 Meadow Ln

City State Zip Code  
Mason City IA 50401-1717

FEC ID number of contributing federal political committee. **C**

Name of Employer Henkel Construction Co. Occupation Management

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 23 / 2006

Transaction ID: 61012.C17687

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Margaret Kleinwort

Mailing Address PO Box 370

City State Zip Code  
Saint Ansgar IA 50472-0370

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 29 / 2006

Transaction ID: 61012.C17419

Amount of Each Receipt this Period  
75.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1200.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
George Kraus

Mailing Address 3810 Quebec St

City State Zip Code  
Ames IA 50014-3863

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Iowa State University Professor

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 19 / 2006

Transaction ID: 61012.C17680

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Sharon Krieger

Mailing Address 3310 Bayberry Cir

City State Zip Code  
Ames IA 50014-4602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
No Employer Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2006

Transaction ID: 61012.C17452

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Margaret Kundel

Mailing Address 318 Ford Rd

City State Zip Code  
Emmetsburg IA 50536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Doctor

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
1225.00

Date of Receipt  
MM / DD / YYYY  
07 / 12 / 2006

Transaction ID: 60715.C17349

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **500.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Jeffrey Lamberti

Mailing Address 2621 NW 17th St

City Ankeny State IA Zip Code 50023-1087

FEC ID number of contributing federal political committee. **C**

Name of Employer State of Iowa Occupation State legislature

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 07 / 2006

Transaction ID: 61012.C17785

Amount of Each Receipt this Period  
 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Clarence Landen

Mailing Address 8436 Woolworth Ave

City Omaha State NE Zip Code 68124-1363

FEC ID number of contributing federal political committee. **C**

Name of Employer Security National Bank Occupation Chairman of Board

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 19 / 2006

Transaction ID: 61012.C17388

Amount of Each Receipt this Period  
 250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Charles Lanphier

Mailing Address 4035 Country Club Blvd

City Sioux City State IA Zip Code 51104-1305

FEC ID number of contributing federal political committee. **C**

Name of Employer L & L Dist. Co. Occupation President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2006

Transaction ID: 61012.C17907

Amount of Each Receipt this Period  
 250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Palmer Larson

Mailing Address 3269 250th St

City State Zip Code  
Eagle Grove IA 50533-8712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Farmer

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006

Transaction ID: 61012.C17831

Amount of Each Receipt this Period  
25.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Thomas Larson

Mailing Address 62 Smith Cir

City State Zip Code  
Algona IA 50511-5004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Iowa State Bank President

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2006

Transaction ID: 61012.C17543

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Steven Lasky

Mailing Address 3020 SW 24th Ct

City State Zip Code  
Ankeny IA 50021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Advanced Analytical Tech Professional

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2006

Transaction ID: 61012.C17441

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **650.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Evelyn Latham

Mailing Address PO Box 73  
205 State St.

City Alexander State IA Zip Code 50420-0073

FEC ID number of contributing federal political committee. **C**

Name of Employer No Employer Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
09 / 11 / 2006

Transaction ID: 61012.C17802

Amount of Each Receipt this Period  
25.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Linda Latham

Mailing Address 137 180th St

City Alexander State IA Zip Code 50420-8028

FEC ID number of contributing federal political committee. **C**

Name of Employer St Lukes Health System Occupation Nurse/Case Mgr

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
625.00

Date of Receipt  
MM / DD / YYYY  
08 / 12 / 2006

Transaction ID: 61012.C17590

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Robert Latham

Mailing Address 356 Park Ter SE

City Cedar Rapids State IA Zip Code 52403-2820

FEC ID number of contributing federal political committee. **C**

Name of Employer Latham & Associates Occupation Economist

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2006

Transaction ID: 61012.C17457

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Phillip Lee		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2006	
Mailing Address 20778 Poplar Ave		<b>Transaction ID:</b> 61012.C17861	
City State Zip Code Mason City IA 50401-9355	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Mason City Clinic	Occupation Physician		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 250.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Glenn LeMunyon		Date of Receipt M M / D D / Y Y Y Y 07 / 13 / 2006	
Mailing Address 1210 Suffield Dr.		<b>Transaction ID:</b> 61015.C18186	
City State Zip Code Mc Lean VA 22101	Amount of Each Receipt this Period 1464.33		
FEC ID number of contributing federal political committee. C		In-Kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self-Employed		Occupation Consultant	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 2603.29		
food & beverages for fund-raise			

<b>C.</b> Full Name (Last, First, Middle Initial) Joanne LeMunyon		Date of Receipt M M / D D / Y Y Y Y 07 / 13 / 2006	
Mailing Address 1210 Suffield Dr.		<b>Transaction ID:</b> 61015.C18187	
City State Zip Code Mclean VA 22101	Amount of Each Receipt this Period 1464.33		
FEC ID number of contributing federal political committee. C		In-Kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer No Employer		Occupation Homemaker	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 2603.29		
food & beverage for fundr-aiser			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3053.66
<b>TOTAL</b> This Period (last page this line number only) .....	(Empty box)

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Mary Lensing

Mailing Address 4450 4th St SW

City State Zip Code  
Mason City IA 50401-1576

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Business Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 12 / 2006

**Transaction ID:** 61012.C17889

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Linda Livingston

Mailing Address 3108 Roxboro Dr

City State Zip Code  
Ames IA 50010-1117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Friedrich Realty Real Estate

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 12 / 2006

**Transaction ID:** 61012.C17572

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Linda Livingston

Mailing Address 3108 Roxboro Dr

City State Zip Code  
Ames IA 50010-1117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Friedrich Realty Real Estate

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
475.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 12 / 2006

**Transaction ID:** 61012.C17585

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>725.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Charles MacNider

Mailing Address 441 N Shore Dr

City State Zip Code  
Clear Lake IA 50428-1374

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Piper Jaffray, Inc. Investor

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2006

Transaction ID: 61012.C17459

Amount of Each Receipt this Period  
2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Adel Makar

Mailing Address 1000 Briarstone Dr

City State Zip Code  
Mason City IA 50401-4640

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mercy Medical Center Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2006

Transaction ID: 61012.C17910

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Robert Mandsager

Mailing Address 503 New Salem Rd

City State Zip Code  
Marshalltown IA 50158-2343

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Doctor

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
425.00

Date of Receipt  
MM / DD / YYYY  
09 / 20 / 2006

Transaction ID: 61012.C17913

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2200.00**

**TOTAL** This Period (last page this line number only) ..... ►



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Jean Marinos

Mailing Address 120 S Carolina Ave

City State Zip Code  
Mason City IA 50401-4111

FEC ID number of contributing federal political committee. **C**

Name of Employer American Realty & Mgmt  
Occupation Office Manager

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 29 / 2006

Transaction ID: 61012.C17728

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Clarence Martin

Mailing Address 218 7th St

City State Zip Code  
Ames IA 50010-6261

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed  
Occupation Business Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2006

Transaction ID: 61012.C17979

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
K. Wendell Mayes

Mailing Address 1909 Sandy Beach Rd

City State Zip Code  
Clarion IA 50525-7608

FEC ID number of contributing federal political committee. **C**

Name of Employer retired  
Occupation Operations Manager

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 02 / 2006

Transaction ID: 61012.C17475

Amount of Each Receipt this Period  
25.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1075.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Steven McCullough

Mailing Address 843 26th St

City State Zip Code  
West Des Moines IA 50265-3262

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Iowa Student Loan Corp CEO

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 13 / 2006

Transaction ID: 61012.C17927

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
George Mcdaniel

Mailing Address 2733 NW 161st St

City State Zip Code  
Clive IA 50325-4634

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Care Initiatives Chief Financial Officer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2006

Transaction ID: 61012.C17369

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Jana McKeag

Mailing Address 315 Queen St

City State Zip Code  
Alexandria VA 22314-2614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Venture Catalysts, Inc Management

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 01 / 2006

Transaction ID: 61012.C17462

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Lannie Miller

Mailing Address PO Box 462  
4990 570th Ave

City State Zip Code  
West Bend IA 50597-0462

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Farmer

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

525.00

Date of Receipt  
MM / DD / YYYY  
08 / 12 / 2006

Transaction ID: 61012.C17576

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Michael Moffitt

Mailing Address 1136 270th St

City State Zip Code  
Eagle Grove IA 50533-8116

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Dentist

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

450.00

Date of Receipt  
MM / DD / YYYY  
09 / 28 / 2006

Transaction ID: 61012.C17978

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mary Mosiman

Mailing Address 3727 Pleasant View Rd

City State Zip Code  
Ames IA 50014-9386

FEC ID number of contributing federal political committee. **C**

Name of Employer Government Occupation  
Auditor

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

394.90

Date of Receipt  
MM / DD / YYYY  
08 / 20 / 2006

Transaction ID: 61012.C17709

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Erik Munn

Mailing Address 2928 Ross Rd

City State Zip Code  
Ames IA 50014-4032

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Munn Lumber Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 07 / 2006

Transaction ID: 61012.C17538

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Alice Murray

Mailing Address 2200 Hamilton Dr Apt 406

City State Zip Code  
Ames IA 50014-8274

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Farmer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 13 / 2006

Transaction ID: 61012.C17860

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Diane Neal

Mailing Address 2216 Hamilton Dr

City State Zip Code  
Ames IA 50014-8287

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 02 / 2006

Transaction ID: 61012.C17481

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **325.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Leon Neva

Mailing Address 1404 Fairway Dr

City Marshalltown State IA Zip Code 50158-3824

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Sales

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: 61012.C17895

Amount of Each Receipt this Period  
 50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
John (Jack) Nordyke

Mailing Address 5667 Arrasmith Trl

City Ames State IA Zip Code 50010-9233

FEC ID number of contributing federal political committee. **C**

Name of Employer Hunziker Property Management Occupation Realtor

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 14 / 2006

Transaction ID: 61012.C17618

Amount of Each Receipt this Period  
 125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Socrates Pappajohn

Mailing Address 9 Beaumont Dr

City Mason City State IA Zip Code 50401-2952

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 24 / 2006

Transaction ID: 61012.C17738

Amount of Each Receipt this Period  
 125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Monte Parrish

Mailing Address 1511 Stone Brooke Rd.

City State Zip Code  
Ames IA 50010-4191

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Business Owner

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

375.00

Date of Receipt  
MM / DD / YYYY  
08 / 20 / 2006

Transaction ID: 61012.C17711

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Janet Payer

Mailing Address 1809 Waterbury Cir

City State Zip Code  
Ames IA 50010-4172

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Attorney

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

200.00

Date of Receipt  
MM / DD / YYYY  
08 / 15 / 2006

Transaction ID: 61012.C17652

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Thomas Pohlman

Mailing Address PO Box 607  
3117 Bayberry Rd.

City State Zip Code  
Ames IA 50010-0607

FEC ID number of contributing federal political committee. **C**

Name of Employer First National Bank Occupation  
Banker

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

575.00

Date of Receipt  
MM / DD / YYYY  
08 / 07 / 2006

Transaction ID: 61012.C17547

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>475.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Charles Price

Mailing Address 1423 N. Shore Dr.

City State Zip Code  
Clear Lake IA 50428

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 23 / 2006

Transaction ID: 61012.C17688

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Richard Pump

Mailing Address 602 1st Ave. NW

City State Zip Code  
Rockford IA 50468-1110

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation  
Business Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 19 / 2006

Transaction ID: 61012.C17671

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Marilyn Raine

Mailing Address 2602 15th Ave N

City State Zip Code  
Fort Dodge IA 50501-2124

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation  
Teacher/Educator

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 13 / 2006

Transaction ID: 61012.C17854

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **300.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Richard Randall

Mailing Address PO Box 145

City Dunlap State IA Zip Code 51529-0145

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 11 / 2006

Transaction ID: 61012.C17808

Amount of Each Receipt this Period  
 60.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Scott Randall

Mailing Address 3724 Cameron School Rd

City Ames State IA Zip Code 50014-9303

FEC ID number of contributing federal political committee. **C**

Name of Employer Randall Corporation Occupation Management

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 12 / 2006

Transaction ID: 61012.C17584

Amount of Each Receipt this Period  
 250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ken Rasch

Mailing Address 1834 Johnson Ave

City Fort Dodge State IA Zip Code 50501-8572

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 305.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 20 / 2006

Transaction ID: 61012.C17712

Amount of Each Receipt this Period  
 25.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **335.00**

**TOTAL** This Period (last page this line number only) ..... ►



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Brent Rastetter

Mailing Address 3013 Almond Rd.

City State Zip Code  
Ames IA 50014-4623

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Self-Employed

Occupation  
Construction

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
850.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 15 / 2006

Transaction ID: 61012.C17651

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Clifford Riccio

Mailing Address 2402A S Walter Reed Dr

City State Zip Code  
Arlington VA 22206-1150

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Natl Cable/Telcomm Assn

Occupation  
Upper Management

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 01 / 2006

Transaction ID: 61012.C17460

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Nancy Richard

Mailing Address 14266 Wildwood Dr

City State Zip Code  
Clive IA 50325-7702

FEC ID number of contributing federal political committee. **C**

Name of Employer  
No Employer

Occupation  
Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 14 / 2006

Transaction ID: 61012.C17620

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Stephen Richards

Mailing Address 2621 Francis Sites Dr

City State Zip Code  
Spirit Lake IA 51360-1882

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
North Iowa Mercy Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2006

**Transaction ID:** 60715.C17357

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Herman Richter

Mailing Address PO Box 301

City State Zip Code  
Milford IA 51351-0301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Three Sons Retail Clothing

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
375.00

Date of Receipt  
MM / DD / YYYY  
07 / 09 / 2006

**Transaction ID:** 61012.C17377

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Martha Rodamaker

Mailing Address 225 Pebble Creek Dr

City State Zip Code  
Mason City IA 50401-8920

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
First Citizens National Bank Banker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
2250.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2006

**Transaction ID:** 61012.C17739

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>875.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Beulah Rodecap

Mailing Address 1501 Thompson Ave

City State Zip Code  
Des Moines IA 50316-1625

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 31 2006

Transaction ID: 61012.C17444

Amount of Each Receipt this Period  
25.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
James Rodenborn

Mailing Address PO Box 411  
2053 Dana Ave.

City State Zip Code  
Fort Dodge IA 50501-0411

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hawkeye Glove Manufacturing Upper Management

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006 1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 29 2006

Transaction ID: 61012.C17995

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
G Gress Rogers

Mailing Address 2104 Douglas Ave

City State Zip Code  
Ames IA 50010-4912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006 360.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 15 2006

Transaction ID: 61012.C17881

Amount of Each Receipt this Period  
140.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>415.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Wilbur Royer

Mailing Address 2767 195th St

City State Zip Code  
Dallas Center IA 50063-8116

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
 General 2006

242.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2006

Transaction ID: 61012.C17990

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Dixie Ruble

Mailing Address 1901 Fairway Dr

City State Zip Code  
Indianola IA 50125-1070

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
 General 2006

375.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 12 / 2006

Transaction ID: 61012.C17571

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Kim Rueter

Mailing Address PO Box 51  
121 Sunset Dr

City State Zip Code  
Grand Junction IA 50107-0051

FEC ID number of contributing federal political committee. **C**

Name of Employer Rueters Red Power Occupation Implement Dealer

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
 General 2006

1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 08 / 2006

Transaction ID: 61012.C17568

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **675.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Daniel Rupprecht

Mailing Address 900 48th St

City State Zip Code  
West Des Moines IA 50265-7106

FEC ID number of contributing federal political committee. **C**

Name of Employer  
R&R Realty

Occupation  
President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
1250.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2006

Transaction ID: 60711.C17337

Amount of Each Receipt this Period  
1250.00

Reattribution Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
split donation w/ wife

**B.** Full Name (Last, First, Middle Initial)  
Phyllis Rupprecht

Mailing Address 900 48th St.

City State Zip Code  
West Des Moines IA 50265

FEC ID number of contributing federal political committee. **C**

Name of Employer  
No Employer

Occupation  
Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2006

Transaction ID: 60711.C17335

Amount of Each Receipt this Period  
2500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Phyllis Rupprecht

Mailing Address 900 48th St.

City State Zip Code  
West Des Moines IA 50265

FEC ID number of contributing federal political committee. **C**

Name of Employer  
No Employer

Occupation  
Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
1250.00

Date of Receipt  
MM / DD / YYYY  
07 / 07 / 2006

Transaction ID: 60711.C17336

Amount of Each Receipt this Period  
-1250.00

Reattribution Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
split donation w/ husband

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Gary Sandquist</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006	
Mailing Address 8009 Heather Bow		<b>Transaction ID: 61012.C17980</b>	
City State Zip Code Johnston IA 50131-8733		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer United Contractors	Occupation President		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 3000.00		

Full Name (Last, First, Middle Initial) <b>B. Sherry Sargent</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 03 / 2006	
Mailing Address 1932 Buchanan Dr		<b>Transaction ID: 61012.C17501</b>	
City State Zip Code Ames IA 50010-4351		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self-Employed	Occupation Engineer		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C. Sherry Sargent</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2006	
Mailing Address 1932 Buchanan Dr		<b>Transaction ID: 61012.C17617</b>	
City State Zip Code Ames IA 50010-4351		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self-Employed	Occupation Engineer		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 275.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1150.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Thomas Schaefer

Mailing Address 7 Briarstone Ct

City State Zip Code  
Mason City IA 50401-4647

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Henkel Construction Co. President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 19 / 2006

Transaction ID: 61012.C17382

Amount of Each Receipt this Period  
1500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Thomas Schaefer

Mailing Address 7 Briarstone Ct

City State Zip Code  
Mason City IA 50401-4647

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Henkel Construction Co. President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 19 / 2006

Transaction ID: 61012.C17669

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Charles Schafer

Mailing Address 1462 340th St # 458

City State Zip Code  
Adair IA 50002-8578

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Agri Drain Corp. President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2006

Transaction ID: 61012.C17981

Amount of Each Receipt this Period  
150.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1850.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Loren Schipull

Mailing Address 516 SE 5th St Apt 11

City State Zip Code  
Eagle Grove IA 50533-2471

FEC ID number of contributing federal political committee. **C**

Name of Employer  
No Employer

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2006

Transaction ID: 61012.C17515

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Lyle Schlader

Mailing Address 601 Freeman St

City State Zip Code  
Charles City IA 50616-3617

FEC ID number of contributing federal political committee. **C**

Name of Employer  
retired

Occupation  
Executive Administrator

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
360.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 14 / 2006

Transaction ID: 61012.C17610

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ralph Schlenker

Mailing Address 12841 Fulton St

City State Zip Code  
Indianola IA 50125-8921

FEC ID number of contributing federal political committee. **C**

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
575.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 06 / 2006

Transaction ID: 61012.C17780

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **400.00**

**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Thomas Schnurr

Mailing Address 1631 Jonathan Dr

City State Zip Code  
Fort Dodge IA 50501-7600

FEC ID number of contributing federal political committee. **C**

Name of Employer First American Bank Occupation CEO

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 15 / 2006

Transaction ID: 61012.C17654

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Calvin Schulte

Mailing Address 477 A 220th St

City State Zip Code  
Alexander IA 50420-8050

FEC ID number of contributing federal political committee. **C**

Name of Employer No Employer Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006

Transaction ID: 61012.C17834

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Thomas Scott

Mailing Address 415 Westwood Dr

City State Zip Code  
Ames IA 50014-3563

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Business Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 12 / 2006

Transaction ID: 61012.C17595

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Robert Shaffer

Mailing Address 1712 E Lincoln Way

City State Zip Code  
Ames IA 50010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 31 / 2006

Transaction ID: 61012.C17765

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Toby Shine

Mailing Address 2312 Lakeside Ave

City State Zip Code  
West Okoboji IA 51351-7234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Shine Brothers Corp. President and CEO

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 09 / 2006

Transaction ID: 61012.C17378

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Merna Sietsema

Mailing Address 1622 Club View Dr

City State Zip Code  
Hampton IA 50441-7463

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
No Employer Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 18 / 2006

Transaction ID: 61012.C17367

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1300.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
DeAnn Sindergard

Mailing Address 401 Grant St

City State Zip Code  
Rolfe IA 50581-1136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Public School System Teacher

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
08 / 15 / 2006

Transaction ID: 61012.C17653

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Waldo Smeby

Mailing Address 2315 Country Club Dr.

City State Zip Code  
Mason City IA 50401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Upper Management

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2006

Transaction ID: 61012.C17734

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Barry Smith

Mailing Address 14983 Holcomb Ave

City State Zip Code  
Clive IA 50325-4517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
People Trust & Savings Bank President and CEO

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
MM / DD / YYYY  
08 / 19 / 2006

Transaction ID: 61012.C17681

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **375.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Cynthia Snell

Mailing Address 1528 Indiana Ave

City State Zip Code  
Ames IA 50014-3033

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Public School System Teacher

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 12 / 2006

Transaction ID: 61012.C17597

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Ruth E. Sponheim

Mailing Address PO Box 333

City State Zip Code  
Osage IA 50461-0333

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
330.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2006

Transaction ID: 61012.C17440

Amount of Each Receipt this Period  
20.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Robert Stafford

Mailing Address 2406 Grand Ave

City State Zip Code  
Ames IA 50010-4602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 06 / 2006

Transaction ID: 61012.C17776

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>395.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Darlene Stanton

Mailing Address 775 Southbranch Dr

City State Zip Code  
Waukee IA 50263-9560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
City of Waukee Council Member

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006 1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 15 / 2006

Transaction ID: 61012.C17649

Amount of Each Receipt this Period  
250.00

Reattribution Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
Gerard Stanton

Mailing Address 775 Southbranch Dr

City State Zip Code  
Waukee IA 50263

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ignition Interlock Owner

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006 4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 15 / 2006

Transaction ID: 61012.C17647

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Gerard Stanton

Mailing Address 775 Southbranch Dr

City State Zip Code  
Waukee IA 50263

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ignition Interlock Owner

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006 3750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 15 / 2006

Transaction ID: 61012.C17648

Amount of Each Receipt this Period  
-250.00

Reattribution Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Chelon Stanzel

Mailing Address 3314 Foxley Dr

City State Zip Code  
Ames IA 50010-1110

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Farming

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 14 / 2006

Transaction ID: 61012.C17614

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Thomas Stark

Mailing Address 2115 Hughes St

City State Zip Code  
Ames IA 50014-7022

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Orthodontist

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

625.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 14 / 2006

Transaction ID: 61012.C17615

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
David Steffens

Mailing Address 602 S Western St

City State Zip Code  
Lake Mills IA 50450-1733

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Executive

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 19 / 2006

Transaction ID: 61012.C17683

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **725.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
John Stevenson

Mailing Address 1811 330th St

City State Zip Code  
Sloan IA 51055-8021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Farmer

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 08 / 2006

Transaction ID: 61012.C17561

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Randall Stoecker

Mailing Address 2948 Cypress Cir

City State Zip Code  
Ames IA 50014-4519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Murphy Brown LLC Management

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

375.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 15 / 2006

Transaction ID: 61012.C17650

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Robert Sturgeon

Mailing Address 3004 Elm St

City State Zip Code  
West Des Moines IA 50265-6218

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Barr Nunn Transportation Chairman

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 12 / 2006

Transaction ID: 61012.C17593

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **425.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Steven Sukup

Mailing Address 1405 N Shore Dr

City State Zip Code  
Clear Lake IA 50428-1237

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Sales Management

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 19 / 2006

Transaction ID: 61012.C17666

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
James Tanner

Mailing Address 3917 Fletcher Ct

City State Zip Code  
Ames IA 50010-4184

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
USDA Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2006

Transaction ID: 61012.C17818

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
James Thompson

Mailing Address 1214 Tulip Tree Ln

City State Zip Code  
West Des Moines IA 50266-6666

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Management

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2006

Transaction ID: 61012.C17434

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **400.00**

**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
John H. Thomson

Mailing Address 824 Crescent Dr

City State Zip Code  
Cresco IA 52136-1044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
C US Bank Banker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
625.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 29 / 2006

Transaction ID: 61012.C17720

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Thomas Thornton

Mailing Address 489 N Ave # P29

City State Zip Code  
Churdan IA 50050-8586

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Farmer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
425.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2006

Transaction ID: 61012.C17537

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ollie Tomson

Mailing Address 12 Briarstone Ct

City State Zip Code  
Mason City IA 50401-4647

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
First Citizens National Bank Banker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
1125.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 24 / 2006

Transaction ID: 61012.C17733

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	625.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Charles Tweeten

Mailing Address 316 W K St

City State Zip Code  
Forest City IA 50436-1529

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Winnebago Inds. Administrator

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2006

Transaction ID: 61012.C17906

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Connie Underwood

Mailing Address 801 Dayton Ave

City State Zip Code  
Ames IA 50010-6406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Becker Underwood Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
2800.00

Date of Receipt  
MM / DD / YYYY  
07 / 21 / 2006

Transaction ID: 61012.C17391

Amount of Each Receipt this Period  
2800.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Connie Underwood

Mailing Address 801 Dayton Ave

City State Zip Code  
Ames IA 50010-6406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Becker Underwood Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
2800.00

Date of Receipt  
MM / DD / YYYY  
07 / 21 / 2006

Transaction ID: 61012.C17390

Amount of Each Receipt this Period  
-700.00

Redesignation TO Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
from joint ck

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2850.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Roger Underwood

Mailing Address 801 Dayton Rd.

City State Zip Code  
Ames IA 50010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Becker Underwood CEO

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 21 / 2006

Transaction ID: 61012.C17389

Amount of Each Receipt this Period  
700.00

Redesignation FROM Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
from joint ck

**B.** Full Name (Last, First, Middle Initial)  
William VanOrsdel

Mailing Address 443 SW 6th St.

City State Zip Code  
Des Moines IA 50309-4607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Kirke-Van Orsdel Insurance

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
625.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 05 / 2006

Transaction ID: 60711.C17328

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Robert Vohs

Mailing Address 1601 Woodhaven Cir

City State Zip Code  
Ames IA 50010-4170

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
150.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 02 / 2006

Transaction ID: 61012.C17474

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **175.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Robert Vohs

Mailing Address 1601 Woodhaven Cir

City State Zip Code  
Ames IA 50010-4170

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2006

Transaction ID: 61012.C17809

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mike Voltmer

Mailing Address 408 W Broadway St

City State Zip Code  
Decorah IA 52101-1742

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Voltmer Electric President

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 61012.C17869

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Maurice Vosburg

Mailing Address PO Box 270  
1439 Beeds Lake Dr

City State Zip Code  
Hampton IA 50441-0270

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
General 2006

450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 02 / 2006

Transaction ID: 61012.C17489

Amount of Each Receipt this Period  
25.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **575.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Charles Walker

Mailing Address 1905 N Shore Dr

City State Zip Code  
Clear Lake IA 50428-1256

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 19 / 2006

Transaction ID: 61012.C17667

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Wayne Walter

Mailing Address 2575 Madison Rd

City State Zip Code  
Decorah IA 52101-7839

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 61012.C17864

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Cheryl Wells

Mailing Address 366 16th St SE

City State Zip Code  
Le Mars IA 51031-2761

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wells Dairy Inc. Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2006

Transaction ID: 61012.C17521

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **675.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Donald White

Mailing Address 2046 Grandview Rd

City State Zip Code  
Decorah IA 52101-9570

FEC ID number of contributing federal political committee. **C**

Name of Employer  
No Employer

Occupation  
Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 08 / 2006

Transaction ID: 61012.C17556

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Lynn White

Mailing Address 1901 Polk Dr

City State Zip Code  
Ames IA 50010-4314

FEC ID number of contributing federal political committee. **C**

Name of Employer  
George White Chevrolet

Occupation  
President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 12 / 2006

Transaction ID: 61012.C17596

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Harold Winston

Mailing Address 118 Linden Dr

City State Zip Code  
Mason City IA 50401-2972

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Self-Employed

Occupation  
Lawyer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 24 / 2006

Transaction ID: 61012.C17742

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>325.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
James Woodroffe

Mailing Address 2805 Samara Dr

City Tampa State FL Zip Code 33618

FEC ID number of contributing federal political committee. **C**

Name of Employer Alcalde & Fay Occupation Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
09 / 26 / 2006

Transaction ID: 61012.C18016

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Georganne Woodruff

Mailing Address 5841 Sandy Point Road

City Rockwell City State IA Zip Code 50579-7567

FEC ID number of contributing federal political committee. **C**

Name of Employer Woodruff Construction Occupation Contractor

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
875.00

Date of Receipt  
08 / 07 / 2006

Transaction ID: 61012.C17539

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
P. Sumner Worth

Mailing Address 2449 Jordan Trl

City West Des Moines State IA Zip Code 50265-5549

FEC ID number of contributing federal political committee. **C**

Name of Employer Gilcrest/Jewett Lumber Occupation President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
09 / 28 / 2006

Transaction ID: 61012.C17985

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **875.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
William Yohn

Mailing Address P.O. Box 246

City State Zip Code  
Clear Lake IA 50428-0246

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Self-Employed

Occupation  
Contractor

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 30 / 2006

Transaction ID: 61012.C17746

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
David Young

Mailing Address 617 7th St SW

City State Zip Code  
Washington DC 20024-2406

FEC ID number of contributing federal political committee. **C**

Name of Employer  
U.S. Senator Grassley

Occupation  
Congressional Aid

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 13 / 2006

Transaction ID: 61012.C17926

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Jamie Zanos

Mailing Address 317 2nd St SE

City State Zip Code  
Mason City IA 50401-3925

FEC ID number of contributing federal political committee. **C**

Name of Employer  
North Iowa Area Comm College

Occupation  
Director

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2006

Transaction ID: 61012.C17689

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>875.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>62768.66</b>



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Action Committee - Rural Electrification

Mailing Address 4301 Wilson Blvd

City State Zip Code  
Arlington VA 22203-1867

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 07 / 2 0 0 6

**Transaction ID:** 60711.C17340

Amount of Each Receipt this Period  
1500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
AG PAC / Ag Processing, Inc

Mailing Address PO Box 2047  
12700 W Dodge Rd

City State Zip Code  
Omaha NE 68103-2047

FEC ID number of contributing federal political committee. **C** C00207308

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 30 / 2 0 0 6

**Transaction ID:** 61012.C18035

Amount of Each Receipt this Period  
1500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Agricultural Retailers Assoc. PAC

Mailing Address 1156 15th St NW Ste 302

City State Zip Code  
Washington DC 20005-1745

FEC ID number of contributing federal political committee. **C** C00264770

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 21 / 2 0 0 6

**Transaction ID:** 61012.C17956

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Altria Group PAC  
Mailing Address 120 Park Avenue  
City State Zip Code  
New York NY 10017  
FEC ID number of contributing federal political committee. **C** C00089136  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006  
Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 29 / 2006  
**Transaction ID:** 61012.C17732  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Am. Council of Engineering Companies PAC  
Mailing Address 1015 15th St NW FI 8  
City State Zip Code  
Washington DC 20005-2605  
FEC ID number of contributing federal political committee. **C** C00010868  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006  
Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2006  
**Transaction ID:** 61012.C17961  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American Crystal Sugar Company PAC  
Mailing Address 101 3rd St N  
City State Zip Code  
Moorhead MN 56560-1952  
FEC ID number of contributing federal political committee. **C** C00110338  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006  
Election Cycle-to-Date ▼  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 18 / 2006  
**Transaction ID:** 61012.C17371  
Amount of Each Receipt this Period  
3000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5000.00**  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
American Health Care Association PAC  
Mailing Address 1201 L St NW  
City Washington State DC Zip Code 20005-4024  
FEC ID number of contributing federal political committee. **C** C00006080  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 18 / 2006  
**Transaction ID:** 61012.C17368  
 Amount of Each Receipt this Period  
 1000.00  
**Receipt**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
American Hospital Assoc. PAC  
Mailing Address 325 7th St NW  
City Washington State DC Zip Code 20004  
FEC ID number of contributing federal political committee. **C** C00106146  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006  
 Election Cycle-to-Date ▼  
 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 21 / 2006  
**Transaction ID:** 61012.C17959  
 Amount of Each Receipt this Period  
 1000.00  
**Receipt**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American Podiatric Med. Association  
Mailing Address 9312 Old Georgetown Rd  
City Bethesda State MD Zip Code 20814-1646  
FEC ID number of contributing federal political committee. **C** C00008839  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006  
 Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 11 / 2006  
**Transaction ID:** 61012.C17891  
 Amount of Each Receipt this Period  
 1000.00  
**Receipt**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 / 154
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. American Society of Anesthesiologists</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 01 / 2006	
Mailing Address 520 N Northwest Highway		<b>Transaction ID: 61012.C17458</b>	
City State Zip Code Park Ridge IL 60068-2573		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00255752		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006		Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>B. American Soybean Association</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 12125 Woodcrest Executive Dr Ste 1 SOY PAC Account		<b>Transaction ID: 61012.C17888</b>	
City State Zip Code Saint Louis MO 63141-5009		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00408468		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006		Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Arent Fox Civic Participation Fund</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 01 / 2006	
Mailing Address 1050 Connecticut Ave NW		<b>Transaction ID: 61012.C17464</b>	
City State Zip Code Washington DC 20036-5308		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00241380		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006		Election Cycle-to-Date ▼ 4000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 85 / 154
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Associated Builders & Contractor PAC

Mailing Address 4250 North Fairfax Dr.  
Ninth Floor

City Arlington State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 20 / 2006

**Transaction ID:** 61012.C17700

Amount of Each Receipt this Period  
 5000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Associated Milk Producers, Inc. PAC

Mailing Address PO Box 455

City New Ulm State MN Zip Code 56073-0455

FEC ID number of contributing federal political committee. **C** C00330696

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 21 / 2006

**Transaction ID:** 61012.C17966

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
AT&T Inc. Federal PAC

Mailing Address 175 E Houston St Rm 7-A-50

City San Antonio State TX Zip Code 78205-2255

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 31 / 2006

**Transaction ID:** 61012.C17428

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 86 / 154
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Bachus For Congress</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2006	
Mailing Address PO Box 131134		Transaction ID: 70110.C18527	
City Birmingham	State AL	Amount of Each Receipt this Period 150.00	
Zip Code 35213-6134		In-Kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b>		fundraising fee	
Name of Employer	Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	
Election Cycle-to-Date ▼ 150.00			

Full Name (Last, First, Middle Initial) <b>B. Bank of the West PAC</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 180 Montgomery St		Transaction ID: 61012.C17944	
City San Francisco	State CA	Amount of Each Receipt this Period 1500.00	
Zip Code 94104-4202		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00418764			
Name of Employer	Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	
Election Cycle-to-Date ▼ 1500.00			

Full Name (Last, First, Middle Initial) <b>C. Basin Electric Power Coop PAC</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2006	
Mailing Address 1717 E Interstate Ave		Transaction ID: 61012.C17911	
City Bismarck	State ND	Amount of Each Receipt this Period 1000.00	
Zip Code 58503-0542		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00220269			
Name of Employer	Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	
Election Cycle-to-Date ▼ 1000.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2650.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 87 / 154
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Buchanan Ingersoll, PC

Mailing Address 301 Grant St Ste 20

City State Zip Code  
Pittsburgh PA 15219-1408

FEC ID number of contributing federal political committee. **C** C00195388

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2006

**Transaction ID:** 61012.C17950

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Cargill Incorporated PAC

Mailing Address PO Box 9300

City State Zip Code  
Minneapolis MN 55440-9300

FEC ID number of contributing federal political committee. **C** C00067884

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2006

**Transaction ID:** 61012.C17924

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
CF Ind. Employees Good Govt. Fund

Mailing Address 1 Salem Lake Dr

City State Zip Code  
Lake Zurich IL 60047-8402

FEC ID number of contributing federal political committee. **C** C00076588

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** 61012.C17943

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
CH2M Hill Companies Ltd. PAC

Mailing Address 9191 S Jamaica St

City State Zip Code  
Englewood CO 80112-5946

FEC ID number of contributing federal political committee. **C** C00143305

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 21 / 2006

**Transaction ID:** 61012.C17955

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Crop Insurance Research Bureau Inc-PAC

Mailing Address 10800 Farley St Ste 330  
Paul Horel

City State Zip Code  
Overland Park KS 66210-1418

FEC ID number of contributing federal political committee. **C** C00150805

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 10 / 2006

**Transaction ID:** 61012.C17635

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Dealers Election Action Committee of

Mailing Address The National Automobile Dealers As  
8400 Westpark Drive

City State Zip Code  
Mc Lean VA 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 07 / 2006

**Transaction ID:** 60715.C17354

Amount of Each Receipt this Period  
4000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6000.00**

**TOTAL** This Period (last page this line number only) ..... ►



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 154
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Deloitte & Touche Federal PAC Mailing Address P.O. Box 365 City Washington State DC Zip Code 20044-0365 FEC ID number of contributing federal political committee. <b>C</b> C00211318 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006 Election Cycle-to-Date ▼ 7500.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61012.C17767 Amount of Each Receipt this Period 2500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	3	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	8	/	3	1	/	2	0	0	6													

<b>B.</b> Full Name (Last, First, Middle Initial) DUPONT Good Govt. Fund Mailing Address Julie Manes, Govt Relations Mgr 1007 Market Street City Wilmington State DE Zip Code 19898 FEC ID number of contributing federal political committee. <b>C</b> C00171926 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006 Election Cycle-to-Date ▼ 2000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61012.C17789 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	0	7	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9	/	0	7	/	2	0	0	6													

<b>C.</b> Full Name (Last, First, Middle Initial) Eli Lilly & Co PAC Mailing Address Lilly Corporate Center City Indianapolis State IN Zip Code 46285 FEC ID number of contributing federal political committee. <b>C</b> C00082792 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006 Election Cycle-to-Date ▼ 5000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61012.C17967 Amount of Each Receipt this Period 2500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9	/	2	1	/	2	0	0	6													

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Exelon Corp. PAC

Mailing Address PO Box 805379

City State Zip Code  
Chicago IL 60680-4115

FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 28 / 2006

**Transaction ID:** 61012.C17982

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Farm Credit PAC

Mailing Address 50 F St NW Ste 900

City State Zip Code  
Washington DC 20001-1530

FEC ID number of contributing federal political committee. **C** C00193631

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 31 / 2006

**Transaction ID:** 61012.C17766

Amount of Each Receipt this Period  
1500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Farmers Mutual Hail PAC

Mailing Address 2323 Grand Ave  
Oscar Deardorff

City State Zip Code  
Des Moines IA 50312

FEC ID number of contributing federal political committee. **C** C00117614

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
3250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 10 / 2006

**Transaction ID:** 61012.C17634

Amount of Each Receipt this Period  
2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4500.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 91 / 154
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A.</b> General Dynamics Voluntary Pol.Cont.Plan		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address 2941 Fairview Park Dr Ste 100		Transaction ID: 61012.C18036
City State Zip Code Falls Church VA 22042-4541	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00078451		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> GlaxoSmithKline PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2006
Mailing Address 5 Moore Dr Research Triangle Park		Transaction ID: 61012.C17954
City State Zip Code Durham NC 27709	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00199703		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Golden Grain Energy PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006
Mailing Address 1822 43rd St. SW		Transaction ID: 61012.C18000
City State Zip Code Mason City IA 50401	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b> C00414490		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 92 / 154
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
International Assoc. of Fire Fighters

Mailing Address 1750 New York Ave NW

City Washington State DC Zip Code 20006-5301

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2006

Transaction ID: 61012.C18001

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Iowa Corn Growers Association PAC

Mailing Address 5505 NW 88th St Ste 100

City Johnston State IA Zip Code 50131-2948

FEC ID number of contributing federal political committee. **C** C00371856

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 61012.C17870

Amount of Each Receipt this Period  
1500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Iowans For Nussle

Mailing Address 4015 Ashby Ave

City Des Moines State IA Zip Code 50310-4109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006

Transaction ID: 61012.C17873

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2750.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 / 154
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A.</b> John Deere PAC		Date of Receipt M M / D D / Y Y Y Y Y 08 / 01 / 2006	
Mailing Address 1 John Deere PI		Transaction ID: 61012.C17465	
City Moline	State IL	Amount of Each Receipt this Period 1000.00	
Zip Code 61265-8010		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00204099			
Name of Employer	Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 7000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> John Deere PAC		Date of Receipt M M / D D / Y Y Y Y Y 09 / 11 / 2006	
Mailing Address 1 John Deere PI		Transaction ID: 61012.C17892	
City Moline	State IL	Amount of Each Receipt this Period 1000.00	
Zip Code 61265-8010		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00204099			
Name of Employer	Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 8000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> John Deere PAC		Date of Receipt M M / D D / Y Y Y Y Y 09 / 21 / 2006	
Mailing Address 1 John Deere PI		Transaction ID: 61012.C17962	
City Moline	State IL	Amount of Each Receipt this Period 2000.00	
Zip Code 61265-8010		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00204099			
Name of Employer	Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Election Cycle-to-Date ▼ 10000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 / 154
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Leadership PAC 2006</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 26 / 2006		
Mailing Address 675 N Washington St Ste 410		<b>Transaction ID: 61012.C18019</b>		
City State Zip Code Alexandria VA 22314-1939	Amount of Each Receipt this Period 5000.00		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00314641				
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Occupation Election Cycle-to-Date ▼ 5000.00			

Full Name (Last, First, Middle Initial) <b>B. MidAmerican Energy Executive PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 29 / 2006		
Mailing Address 666 Grand Ave P.O. Box 657		<b>Transaction ID: 61012.C17731</b>		
City State Zip Code Des Moines IA 50303-0657	Amount of Each Receipt this Period 1000.00		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00324483				
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Occupation Election Cycle-to-Date ▼ 3000.00			

Full Name (Last, First, Middle Initial) <b>C. MidAmerican Energy Executive PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 07 / 2006		
Mailing Address 666 Grand Ave P.O. Box 657		<b>Transaction ID: 61012.C17788</b>		
City State Zip Code Des Moines IA 50303-0657	Amount of Each Receipt this Period 2000.00		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00324483				
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Occupation Election Cycle-to-Date ▼ 5000.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Morgan Stanley PAC

Mailing Address 401 9th St NW Ste 650

City State Zip Code  
Washington DC 20004-2151

FEC ID number of contributing federal political committee. C C00337626

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 21 / 2006

**Transaction ID:** 61012.C17960

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
National Association of Realtors PAC

Mailing Address 430 N Michigan Ave

City State Zip Code  
Chicago IL 60611-4011

FEC ID number of contributing federal political committee. C C00030718

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 12 / 2006

**Transaction ID:** 61012.C17929

Amount of Each Receipt this Period  
2500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
National Beer Wholesalers Assc PAC

Mailing Address 1101 King St Ste 600

City State Zip Code  
Alexandria VA 22314-2965

FEC ID number of contributing federal political committee. C C00144766

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

**Transaction ID:** 61012.C17930

Amount of Each Receipt this Period  
5000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 8500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Natl Resturant Assn PAC  
Mailing Address 1200 17th ST NW  
City Washington State DC Zip Code 20036-3097  
FEC ID number of contributing federal political committee. **C** C00003764  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006  
Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 18 / 2006  
Transaction ID: 61012.C17366  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
PAC of Chicago Board of Trade  
Mailing Address 141 W Jackson Blvd  
City Chicago State IL Zip Code 60604-3139  
FEC ID number of contributing federal political committee. **C** C00059832  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006  
Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2006  
Transaction ID: 61012.C17963  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Physical Therapy PAC  
Mailing Address 1111 N Fairfax St  
City Alexandria State VA Zip Code 22314-1484  
FEC ID number of contributing federal political committee. **C** C00012880  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006  
Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2006  
Transaction ID: 61012.C17965  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00  
**TOTAL** This Period (last page this line number only) ..... ►



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Professionals PAC

Mailing Address HDR, Inc.  
8404 Indian Hills Drive

City State Zip Code  
Omaha NE 68114

FEC ID number of contributing federal political committee. **C** C00103903

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 6 / 2 0 0 6

**Transaction ID:** 61012.C18018

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Rain & Hail Insurance Society PAC

Mailing Address 9200 Northpark Dr Ste 300

City State Zip Code  
Johnston IA 50131-3006

FEC ID number of contributing federal political committee. **C** C00279505

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 1 0 / 2 0 0 6

**Transaction ID:** 61012.C17624

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Republican Majority Fund

Mailing Address 1155 21st St NW Ste 300

City State Zip Code  
Washington DC 20036-3312

FEC ID number of contributing federal political committee. **C** C00296640

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 9 / 2 0 0 6

**Transaction ID:** 61012.C18020

Amount of Each Receipt this Period  
5000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **7000.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 / 154
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. RJReynolds PAC</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2006	
Mailing Address PO Box 718 401 N Main St.		<b>Transaction ID: 61012.C17603</b>	
City State Zip Code Winston Salem NC 27102-0718		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C C00042002</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006		Election Cycle-to-Date ▼ 7500.00	

Full Name (Last, First, Middle Initial) <b>B. Road to Victory PAC</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006	
Mailing Address 1155 21st St NW Ste 300		<b>Transaction ID: 61012.C17445</b>	
City State Zip Code Washington DC 20036-3312		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C C00385377</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006		Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Rockwell Collins Good Government</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2006	
Mailing Address 1300 Wilson Blvd Ste 200		<b>Transaction ID: 61012.C17604</b>	
City State Zip Code Arlington VA 22209-2307		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C C00365684</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006		Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
SMAC PAC /Sheet Metal & Air Conditioning

Mailing Address PO Box 221230

City State Zip Code  
Fairfax VA 20153-1230

FEC ID number of contributing federal political committee. **C** C00013961

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 07 / 2006

**Transaction ID:** 60715.C17353

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Smithfield Foods PAC

Mailing Address 499 Park Ave Ste 600

City State Zip Code  
New York NY 10022-1240

FEC ID number of contributing federal political committee. **C** C00359075

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2006

**Transaction ID:** 61012.C17964

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Solutions America PAC

Mailing Address 575 8th Ave Fl 24

City State Zip Code  
New York NY 10018-3011

FEC ID number of contributing federal political committee. **C** C00335448

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2006

**Transaction ID:** 61012.C17427

Amount of Each Receipt this Period  
2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 100 / 154
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Southern Company Employees PAC

Mailing Address 601 Pennsylvania Ave NW Ste 800

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 15 / 2006

**Transaction ID:** 61012.C17656

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Stanley Consultants Inc. PAC

Mailing Address 225 Iowa Ave

City Muscatine State IA Zip Code 52761-3701

FEC ID number of contributing federal political committee. **C** C00415224

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 13 / 2006

**Transaction ID:** 60715.C17361

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Swift & Company PAC

Mailing Address 1770 Promontory Cir

City Greeley State CO Zip Code 80634-9039

FEC ID number of contributing federal political committee. **C** C00394650

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 13 / 2006

**Transaction ID:** 61012.C17928

Amount of Each Receipt this Period  
 1500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 101 / 154
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
The Freedom Project

Mailing Address Cong. John Boehner, Honorary Chr  
111 C St SE Lower Unit

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 163.52

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 2 0 / 2 0 0 6

**Transaction ID:** 70110.C18525

Amount of Each Receipt this Period  
 163.52

In-Kind  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

hotel

**B.** Full Name (Last, First, Middle Initial)  
Trucking PAC of the American Trucking

Mailing Address 430 1st St SE

City Washington State DC Zip Code 20003-1826

FEC ID number of contributing federal political committee. **C** C00002881

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 1 / 2 0 0 6

**Transaction ID:** 61012.C17958

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Tyson Foods PAC

Mailing Address PO Box 2020

City Springdale State AR Zip Code 72765

FEC ID number of contributing federal political committee. **C** C00169821

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 1 / 2 0 0 6

**Transaction ID:** 61012.C17957

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2163.52</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
UPSPAC-United Parcel Service PAC

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 7000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 08 / 2006

**Transaction ID:** 61012.C17602

Amount of Each Receipt this Period  
 4000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
US Oncology, Inc. Good Govt Comm

Mailing Address 16825 Northchase Dr Ste 1300

City Houston State TX Zip Code 77060-6005

FEC ID number of contributing federal political committee. **C** C00339655

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 21 / 2006

**Transaction ID:** 61012.C17953

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Victory PAC

Mailing Address P.O. Box 525

City Saint Petersburg State FL Zip Code 33731

FEC ID number of contributing federal political committee. **C** C00344374

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2006

**Transaction ID:** 61012.C18017

Amount of Each Receipt this Period  
 2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 / 154
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Water Well PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 21 / 2006
Mailing Address 1101 30th St NW Ste 500		<b>Transaction ID:</b> 61012.C17951
City Washington State DC Zip Code 20007-3772	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2006	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date	1000.00	

Full Name (Last, First, Middle Initial) <b>B. WELLPAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 10 / 2006
Mailing Address 636 Grand Ave		<b>Transaction ID:</b> 61012.C17625
City Des Moines State IA Zip Code 50309-2502	FEC ID number of contributing federal political committee. <b>C C00342022</b>	Amount of Each Receipt this Period 500.00
Name of Employer Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2006	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date	2500.00	

Full Name (Last, First, Middle Initial) <b>C. West Central PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006
Mailing Address PO Box 68		<b>Transaction ID:</b> 61012.C17945
City Ralston State IA Zip Code 51459-0068	FEC ID number of contributing federal political committee. <b>C C00395244</b>	Amount of Each Receipt this Period 2000.00
Name of Employer Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2006	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date	3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>110763.52</b>

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 / 154
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input checked="" type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Citizens to Elect Griswold

Mailing Address 211 N Market St

City State Zip Code  
Madrid IA 50156-1017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006  
 Primary    General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2006

**Transaction ID:** 61012.C17949

Amount of Each Receipt this Period  
250.00

Offsets to Operating Expenditure  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	250.00



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 / 154
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A.</b> First Citizens National Bank Mailing Address P.O. Box 268 City State Zip Code Clarion IA 50525-		Date of Receipt M M / D D / Y Y Y Y Y 07 31 / 2006 <b>Transaction ID:</b> 61012.C17685 Amount of Each Receipt this Period 103.06 Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Occupation Election Cycle-to-Date ▼ 14899.55	

Full Name (Last, First, Middle Initial) <b>B.</b> First Citizens National Bank Mailing Address P.O. Box 268 City State Zip Code Clarion IA 50525-		Date of Receipt M M / D D / Y Y Y Y Y 08 31 / 2006 <b>Transaction ID:</b> 61012.C17790 Amount of Each Receipt this Period 181.06 Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Occupation Election Cycle-to-Date ▼ 15080.61	

Full Name (Last, First, Middle Initial) <b>C.</b> First Citizens National Bank Mailing Address P.O. Box 268 City State Zip Code Clarion IA 50525-		Date of Receipt M M / D D / Y Y Y Y Y 09 30 / 2006 <b>Transaction ID:</b> 61012.C18031 Amount of Each Receipt this Period 186.14 Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2006	Occupation Election Cycle-to-Date ▼ 15266.75	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>470.26</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 106 / 154
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
First Citizens National Bank

Mailing Address P.O. Box 268

City State Zip Code  
Clarion IA 50525-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼  
21821.92

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2006

Transaction ID: 61012.C18032

Amount of Each Receipt this Period  
6555.17

Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6555.17
<b>TOTAL</b> This Period (last page this line number only) .....	▶	7025.43

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. American Cancer Society</b>		<b>Transaction ID:</b> 61012.E3813 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 22718		Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Oklahoma City      State OK      Zip Code 73123-1718	CONTRIBUTION	
Purpose of Disbursement CONTRIBUTION Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:		

Full Name (Last, First, Middle Initial) <b>B. American Pest Control</b>		<b>Transaction ID:</b> 61012.E3740 Date of Disbursement 08 / 02 / 2006
Mailing Address P.O. Box 105		Amount of Each Disbursement this Period 372.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Mason City      State IA      Zip Code 50401-	SPRAY FOR BUGS - PICNIC	
Purpose of Disbursement SPRAY FOR BUGS - PICNIC Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:		

Full Name (Last, First, Middle Initial) <b>C. Jessica Anderson</b>		<b>Transaction ID:</b> 60715.E3716 Date of Disbursement 07 / 14 / 2006
Mailing Address 1206 NW 4th St		Amount of Each Disbursement this Period 357.07 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Ankeny      State IA      Zip Code 50023-2331	PAYROLL CAMPAIGN STAFF	
Purpose of Disbursement PAYROLL CAMPAIGN STAFF Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3729.82
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Jessica Anderson</b>		<b>Transaction ID: 61012.E3734</b> Date of Disbursement 07 / 21 / 2006	
Mailing Address 1206 NW 4th St		Amount of Each Disbursement this Period 314.36	
City Ankeny State IA Zip Code 50023-2331	Purpose of Disbursement SEE BELOW	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE BELOW	

Full Name (Last, First, Middle Initial) <b>B. Jessica Anderson</b>		<b>Transaction ID: 61012.E3760</b> Date of Disbursement 07 / 21 / 2006	
Mailing Address 1206 NW 4th St		Amount of Each Disbursement this Period 57.12	
City Ankeny State IA Zip Code 50023-2331	Purpose of Disbursement MILEAGE REIMBURSEMENT	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: MILEAGE REIMBURSEMENT	

Full Name (Last, First, Middle Initial) <b>C. Staples</b>		<b>Transaction ID: 61012.E3759</b> Date of Disbursement 07 / 21 / 2006	
Mailing Address 1333 Buckeye Road		Amount of Each Disbursement this Period 83.17	
City Ames State IA Zip Code 50010-	Purpose of Disbursement BOXES/TAPE FOR SHIPMENTS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: BOXES/TAPE FOR SHIPMENTS	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	314.36
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. US Post Office</b>		<b>Transaction ID:</b> 61012.E3758 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 6
Mailing Address 525 Kellogg Ave		Amount of Each Disbursement this Period 2.00
City Ames State IA Zip Code 50010-9998	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POSTAGE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jessica Anderson</b>		<b>Transaction ID:</b> 61012.E3736 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address 1206 NW 4th St		Amount of Each Disbursement this Period 714.15
City Ankeny State IA Zip Code 50023-2331	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL CAMPAIGN STAFF	Candidate Name	PAYROLL CAMPAIGN STAFF
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jessica Anderson</b>		<b>Transaction ID:</b> 61012.E3747 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address 1206 NW 4th St		Amount of Each Disbursement this Period 714.15
City Ankeny State IA Zip Code 50023-2331	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL CAMPAIGN STAFF	Candidate Name	PAYROLL CAMPAIGN STAFF
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1428.30
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Jessica Anderson</b>		Transaction ID: 61012.E3763 Date of Disbursement 08 / 21 / 2006	
Mailing Address 1206 NW 4th St		Amount of Each Disbursement this Period 597.04	
City Ankeny State IA Zip Code 50023-2331	Purpose of Disbursement SEE BELOW	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE BELOW	

Full Name (Last, First, Middle Initial) <b>B. Jessica Anderson</b>		Transaction ID: 61015.E3855 Date of Disbursement 08 / 21 / 2006	
Mailing Address 1206 NW 4th St		Amount of Each Disbursement this Period 362.76	
City Ankeny State IA Zip Code 50023-2331	Purpose of Disbursement MILEAGE/MEALS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: MILEAGE/MEALS	

Full Name (Last, First, Middle Initial) <b>C. Copyworks</b>		Transaction ID: 61015.E3858 Date of Disbursement 08 / 21 / 2006	
Mailing Address 2502 Lincoln Way		Amount of Each Disbursement this Period 8.03	
City Ames State IA Zip Code 50014-7076	Purpose of Disbursement OFFICE EXPENSE- CUTTING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: OFFICE EXPENSE- CUTTING	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	597.04
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Hy-Vee Ames</b>		Transaction ID: 61015.E3856 Date of Disbursement 08 / 21 / 2006	
Mailing Address 640 Lincoln Way		Amount of Each Disbursement this Period 177.63	
City Ames State IA Zip Code 50010-	Purpose of Disbursement OFFICE SUPPLIES FOR GRAND OPENING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES FOR GRAND OPENING	

Full Name (Last, First, Middle Initial) <b>B. US Post Office</b>		Transaction ID: 61015.E3857 Date of Disbursement 08 / 21 / 2006	
Mailing Address 525 Kellogg Ave		Amount of Each Disbursement this Period 48.62	
City Ames State IA Zip Code 50010-9998	Purpose of Disbursement POSTAGE FOR CAMPAIGN PROMO ITEMS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: POSTAGE FOR CAMPAIGN PROMO ITEMS	

Full Name (Last, First, Middle Initial) <b>C. Jessica Anderson</b>		Transaction ID: 61012.E3780 Date of Disbursement 08 / 31 / 2006	
Mailing Address 1206 NW 4th St		Amount of Each Disbursement this Period 714.15	
City Ankeny State IA Zip Code 50023-2331	Purpose of Disbursement PAYROLL - CAMPAIGN STAFF	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL - CAMPAIGN STAFF	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	714.15
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Jessica Anderson</b>		Transaction ID: 61012.E3797 Date of Disbursement 09 / 14 / 2006	
Mailing Address 1206 NW 4th St		Amount of Each Disbursement this Period 317.25	
City Ankeny State IA Zip Code 50023-2331	Purpose of Disbursement SEE BELOW	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE BELOW	

Full Name (Last, First, Middle Initial) <b>B. Jessica Anderson</b>		Transaction ID: 61015.E3875 Date of Disbursement 09 / 14 / 2006	
Mailing Address 1206 NW 4th St		Amount of Each Disbursement this Period 154.42	
City Ankeny State IA Zip Code 50023-2331	Purpose of Disbursement MILEAGE/MEALS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: MILEAGE/MEALS	

Full Name (Last, First, Middle Initial) <b>C. Jessica Anderson</b>		Transaction ID: 61015.E3876 Date of Disbursement 09 / 14 / 2006	
Mailing Address 1206 NW 4th St		Amount of Each Disbursement this Period 25.00	
City Ankeny State IA Zip Code 50023-2331	Purpose of Disbursement PARADE FEES	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: PARADE FEES	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	317.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Transaction ID: 61015.E3879 Date of Disbursement 09 / 14 / 2006
Mailing Address 1333 Buckeye Road		Amount of Each Disbursement this Period 45.99
City Ames State IA Zip Code 50010-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement INK CARTRIDGES	Candidate Name	<b>[MEMO ITEM]</b> MEMO: INK CARTRIDGES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. US Post Office</b>		Transaction ID: 61015.E3880 Date of Disbursement 09 / 14 / 2006
Mailing Address 525 Kellogg Ave		Amount of Each Disbursement this Period 1.35
City Ames State IA Zip Code 50010-9998	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POSTAGE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Walmart</b>		Transaction ID: 61015.E3877 Date of Disbursement 09 / 14 / 2006
Mailing Address Hwy 69 N		Amount of Each Disbursement this Period 18.62
City Ames State IA Zip Code 50010-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PARADE SUPPLIES	Candidate Name	<b>[MEMO ITEM]</b> MEMO: PARADE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Jessica Anderson</b>		<b>Transaction ID: 61012.E3799</b> Date of Disbursement 09 / 15 / 2006
Mailing Address 1206 NW 4th St		Amount of Each Disbursement this Period 714.15
City Ankeny State IA Zip Code 50023-2331	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL - CAMPAIGN STAFF	Candidate Name	PAYROLL - CAMPAIGN STAFF
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jessica Anderson</b>		<b>Transaction ID: 61012.E3811</b> Date of Disbursement 09 / 27 / 2006
Mailing Address 1206 NW 4th St		Amount of Each Disbursement this Period 755.25
City Ankeny State IA Zip Code 50023-2331	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW	Candidate Name	SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jessica Anderson</b>		<b>Transaction ID: 61015.E3886</b> Date of Disbursement 09 / 27 / 2006
Mailing Address 1206 NW 4th St		Amount of Each Disbursement this Period 291.72
City Ankeny State IA Zip Code 50023-2331	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MILEAGE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: MILEAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1469.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Bauer Built Tire Center</b>		Transaction ID: 61015.E3885 Date of Disbursement 09 / 27 / 2006	
Mailing Address 109 N 6th St		Amount of Each Disbursement this Period 207.05	
City Sac City State IA Zip Code 50583-1714	Purpose of Disbursement 2 NEW TIRES FOR CAMPAIGN VEHICLE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: 2 NEW TIRES FOR CAMPAIGN VEHICLE	

Full Name (Last, First, Middle Initial) <b>B. Kum &amp; Go</b>		Transaction ID: 61015.E3884 Date of Disbursement 09 / 27 / 2006	
Mailing Address 810 North Ankeny Blvd		Amount of Each Disbursement this Period 44.73	
City Ankeny State IA Zip Code 50021-	Purpose of Disbursement GAS FOR CAMPAIGN VEHICLE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: GAS FOR CAMPAIGN VEHICLE	

Full Name (Last, First, Middle Initial) <b>C. US Post Office</b>		Transaction ID: 61015.E3881 Date of Disbursement 09 / 27 / 2006	
Mailing Address 525 Kellogg Ave		Amount of Each Disbursement this Period 14.82	
City Ames State IA Zip Code 50010-9998	Purpose of Disbursement POSTAGE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: POSTAGE	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

<b>A. Walmart</b> Full Name (Last, First, Middle Initial) Mailing Address Hwy 69 N City Ames State IA Zip Code 50010- Purpose of Disbursement PARADE CANDY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 61015.E3883</b> Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 32.15 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: PARADE CANDY
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<b>B. Jessica Anderson</b> Full Name (Last, First, Middle Initial) Mailing Address 1206 NW 4th St City Ankeny State IA Zip Code 50023-2331 Purpose of Disbursement PAYROLL - CAMPAIGN STAFF Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 61012.E3817</b> Date of Disbursement 09 / 29 / 2006 Amount of Each Disbursement this Period 714.15 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL - CAMPAIGN STAFF
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<b>C. Bogart Associates</b> Full Name (Last, First, Middle Initial) Mailing Address 1200 Trinity Drive City Alexandria State VA Zip Code 22314- Purpose of Disbursement MAILING COSTS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 61012.E3739</b> Date of Disbursement 08 / 02 / 2006 Amount of Each Disbursement this Period 73.52 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 MAILING COSTS
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	787.67
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Bogart Associates</b>		<b>Transaction ID:</b> 61012.E3775 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 6
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 517.82
City Alexandria State VA Zip Code 22314-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW	Candidate Name	SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Bogart Associates</b>		<b>Transaction ID:</b> 61012.E3776 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 6
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 450.00
City Alexandria State VA Zip Code 22314-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING COMMISSIONS	Candidate Name	<b>[MEMO ITEM]</b> MEMO: FUNDRAISING COMMISSIONS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Bogart Associates</b>		<b>Transaction ID:</b> 61012.E3812 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 800.00
City Alexandria State VA Zip Code 22314-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING COMMISSIONS	Candidate Name	FUNDRAISING COMMISSIONS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1317.82
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 118 / 154

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Capitol Resources</b>		<b>Transaction ID:</b> 60715.E3719 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 6861.27
City Brooklyn State IA Zip Code 52211-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE BELOW

Full Name (Last, First, Middle Initial) <b>B. Capitol Resources</b>		<b>Transaction ID:</b> 60715.E3720 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 5268.70
City Brooklyn State IA Zip Code 52211-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISER COMMISSIONS Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: FUNDRAISER COMMISSIONS

Full Name (Last, First, Middle Initial) <b>C. Capitol Resources</b>		<b>Transaction ID:</b> 60715.E3721 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 106.40
City Brooklyn State IA Zip Code 52211-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MILEAGE TO EVENTS Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: MILEAGE TO EVENTS

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6861.27
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Capitol Resources</b>		Transaction ID: 60715.E3722 Date of Disbursement 07 / 14 / 2006
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 356.37
City Brooklyn State IA Zip Code 52211-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PRINTING COSTS FOR EVENTS		<b>[MEMO ITEM]</b> MEMO: PRINTING COSTS FOR EVENTS
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. US Postal Service</b>		Transaction ID: 60715.E3724 Date of Disbursement 07 / 14 / 2006
Mailing Address Main Post Office		Amount of Each Disbursement this Period 1129.80
City Brooklyn State IA Zip Code 52211-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POSTAGE FOR EVENT INVITATIONS		<b>[MEMO ITEM]</b> MEMO: POSTAGE FOR EVENT INVITATIONS
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Capitol Resources</b>		Transaction ID: 61012.E3768 Date of Disbursement 08 / 21 / 2006
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 6054.25
City Brooklyn State IA Zip Code 52211-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW		SEE BELOW
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6054.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Capitol Resources</b>		<b>Transaction ID:</b> 61012.E3770 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 6
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 735.90
City Brooklyn State IA Zip Code 52211-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PRINTING COSTS/MATERIAL FOR EVENTS	Candidate Name	<b>[MEMO ITEM]</b> MEMO: PRINTING COSTS/MATERIAL FOR EVENTS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Capitol Resources</b>		<b>Transaction ID:</b> 61012.E3769 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 6
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 3070.00
City Brooklyn State IA Zip Code 52211-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING COMMISSIONS	Candidate Name	<b>[MEMO ITEM]</b> MEMO: FUNDRAISING COMMISSIONS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. US Postal Service</b>		<b>Transaction ID:</b> 61012.E3771 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 6
Mailing Address Main Post Office		Amount of Each Disbursement this Period 2248.35
City Brooklyn State IA Zip Code 52211-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POSTAGE FOR EVENTS	Candidate Name	<b>[MEMO ITEM]</b> MEMO: POSTAGE FOR EVENTS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Capitol Resources</b>		<b>Transaction ID:</b> 61012.E3786 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 6355.12
City Brooklyn State IA Zip Code 52211-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW Candidate Name		SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Capitol Resources</b>		<b>Transaction ID:</b> 61012.E3788 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 303.50
City Brooklyn State IA Zip Code 52211-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PRINTING EXPENSE FOR EVENTS Candidate Name		<b>[MEMO ITEM]</b> MEMO: PRINTING EXPENSE FOR EVENTS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Capitol Resources</b>		<b>Transaction ID:</b> 61012.E3787 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 4682.60
City Brooklyn State IA Zip Code 52211-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING COMMISSIONS Candidate Name		<b>[MEMO ITEM]</b> MEMO: FUNDRAISING COMMISSIONS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6355.12
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Capitol Resources</b>		Transaction ID: 61012.E3789 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 141.75
City Brooklyn State IA Zip Code 52211-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MILEAGE EXPENSE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: MILEAGE EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. US Postal Service</b>		Transaction ID: 61012.E3790 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address Main Post Office		Amount of Each Disbursement this Period 1227.27
City Brooklyn State IA Zip Code 52211-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POSTAGE FOR EVENT INVITES	Candidate Name	<b>[MEMO ITEM]</b> MEMO: POSTAGE FOR EVENT INVITES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Christian Printers, Inc.</b>		Transaction ID: 61012.E3753 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 1411 21st Street		Amount of Each Disbursement this Period 1608.96
City Des Moines State IA Zip Code 50311-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement BBQ INVITES/MISC PRINTING ITEMS	Candidate Name	BBQ INVITES/MISC PRINTING ITEMS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1608.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Kayla Clark		<b>Transaction ID:</b> 61012.E3784 <b>Date of Disbursement</b> 08 / 31 / 2006
Mailing Address 3130 280th St		Amount of Each Disbursement this Period 265.31
City Dickens State IA Zip Code 51333-7514	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL - CAMPAIGN STAFF		PAYROLL - CAMPAIGN STAFF
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>B.</b> Full Name (Last, First, Middle Initial) Kayla Clark		<b>Transaction ID:</b> 61012.E3800 <b>Date of Disbursement</b> 09 / 14 / 2006
Mailing Address 3130 280th St		Amount of Each Disbursement this Period 380.75
City Dickens State IA Zip Code 51333-7514	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL - CAMPAIGN STAFF		PAYROLL - CAMPAIGN STAFF
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>C.</b> Full Name (Last, First, Middle Initial) Kayla Clark		<b>Transaction ID:</b> 61012.E3818 <b>Date of Disbursement</b> 09 / 29 / 2006
Mailing Address 3130 280th St		Amount of Each Disbursement this Period 380.75
City Dickens State IA Zip Code 51333-7514	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL - CAMPAIGN STAFF		PAYROLL - CAMPAIGN STAFF
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1026.81

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

<b>A. Competitive Edge</b> Full Name (Last, First, Middle Initial) Mailing Address 3500 109th Street City Urbandale State IA Zip Code 50322- Purpose of Disbursement BUMPER STICKERS/LABELS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 61012.E3751 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Amount of Each Disbursement this Period 988.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>BUMPER STICKERS/LABELS</b>
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<b>B. Competitive Edge</b> Full Name (Last, First, Middle Initial) Mailing Address 3500 109th Street City Urbandale State IA Zip Code 50322- Purpose of Disbursement YARD SIGNS PER CAMPAIGN MGR Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 61012.E3794 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 1240.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>YARD SIGNS PER CAMPAIGN MGR</b>
--	--	---

<b>C. Jennifer Crall</b> Full Name (Last, First, Middle Initial) Mailing Address 8343 Colby Pkwy, #214 City Urbandale State IA Zip Code 50322- Purpose of Disbursement PAYROLL - CAMPAIGN MGR Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60715.E3717 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 1452.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>PAYROLL - CAMPAIGN MGR</b>
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3681.15</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Jennifer Crall</b>		<b>Transaction ID: 61012.E3737</b> Date of Disbursement MM / DD / YYYY 07 / 31 / 2006
Mailing Address 8343 Colby Pkwy, #214		Amount of Each Disbursement this Period 1452.00
City Urbandale State IA Zip Code 50322-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL CAMPAIGN MGR	Candidate Name	PAYROLL CAMPAIGN MGR
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jennifer Crall</b>		<b>Transaction ID: 61012.E3748</b> Date of Disbursement MM / DD / YYYY 08 / 15 / 2006
Mailing Address 8343 Colby Pkwy, #214		Amount of Each Disbursement this Period 1452.00
City Urbandale State IA Zip Code 50322-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL CAMPAIGN MGR	Candidate Name	PAYROLL CAMPAIGN MGR
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jennifer Crall</b>		<b>Transaction ID: 61012.E3772</b> Date of Disbursement MM / DD / YYYY 08 / 21 / 2006
Mailing Address 8343 Colby Pkwy, #214		Amount of Each Disbursement this Period 176.12
City Urbandale State IA Zip Code 50322-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW	Candidate Name	SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3080.12</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. KUM &amp; GO</b>		Transaction ID: 61012.E3773 Date of Disbursement 08 / 21 / 2006	
Mailing Address 1025 E 1st St		Amount of Each Disbursement this Period 153.70	
City Ankeny State IA Zip Code 50021-2043	Purpose of Disbursement GAS FOR CAMPAIGN VEHICLE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: GAS FOR CAMPAIGN VEHICLE	

Full Name (Last, First, Middle Initial) <b>B. Jennifer Crall</b>		Transaction ID: 61012.E3781 Date of Disbursement 08 / 31 / 2006	
Mailing Address 8343 Colby Pkwy, #214		Amount of Each Disbursement this Period 1452.00	
City Urbandale State IA Zip Code 50322-	Purpose of Disbursement PAYROLL CAMPAIGN MGR	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL CAMPAIGN MGR	

Full Name (Last, First, Middle Initial) <b>C. Jennifer Crall</b>		Transaction ID: 61012.E3801 Date of Disbursement 09 / 15 / 2006	
Mailing Address 8343 Colby Pkwy, #214		Amount of Each Disbursement this Period 1452.00	
City Urbandale State IA Zip Code 50322-	Purpose of Disbursement PAYROLL - CAMPAIGN MGR	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL - CAMPAIGN MGR	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2904.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

<b>A. Jennifer Crall</b> Full Name (Last, First, Middle Initial) Mailing Address 8343 Colby Pkwy, #214 City Urbandale State IA Zip Code 50322- Purpose of Disbursement SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 61012.E3808</b> Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 117.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SEE BELOW
--	--	---

<b>B. US Post Office</b> Full Name (Last, First, Middle Initial) Mailing Address 525 Kelllogg Ave City Ames State IA Zip Code 50010-9998 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 61012.E3809</b> Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 117.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: POSTAGE
--	--	---

<b>C. Jennifer Crall</b> Full Name (Last, First, Middle Initial) Mailing Address 8343 Colby Pkwy, #214 City Urbandale State IA Zip Code 50322- Purpose of Disbursement PAYROLL - CAMPAIGN STAFF Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 61012.E3819</b> Date of Disbursement 09 / 29 / 2006 Amount of Each Disbursement this Period 1452.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL - CAMPAIGN STAFF
---	--	---

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1569.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. First Bankcard</b>		<b>Transaction ID:</b> 60715.E3725 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address P.O. Box 2814		Amount of Each Disbursement this Period 2526.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Omaha State NE Zip Code 68103-2814	SEE BELOW	
Purpose of Disbursement SEE BELOW	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Elys Lockup Storage</b>		<b>Transaction ID:</b> 60715.E3730 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address 3034 Bayberry Rd.		Amount of Each Disbursement this Period 85.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Ames State IA Zip Code 50010-	MEMO ITEM MEMO: MONTHLY STORAGE	
Purpose of Disbursement MONTHLY STORAGE	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Republican National Committee</b>		<b>Transaction ID:</b> 60715.E3729 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address 310 First St SE		Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20003-	MEMO ITEM MEMO: CONTRIBUTION	
Purpose of Disbursement CONTRIBUTION	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2526.73
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. United States Cellular</b>		Transaction ID: 60715.E3728 Date of Disbursement 07 / 14 / 2006	
Mailing Address PO Box 7835		Amount of Each Disbursement this Period 429.34	
City Madison State WI Zip Code 53707-7835	Purpose of Disbursement BLACKBERRY - CAMPAIGN MGR	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: BLACKBERRY - CAMPAIGN MGR	

Full Name (Last, First, Middle Initial) <b>B. United States Post Office</b>		Transaction ID: 60715.E3727 Date of Disbursement 07 / 14 / 2006	
Mailing Address 115 1st ST NE		Amount of Each Disbursement this Period 48.00	
City Clarion State IA Zip Code 50525-	Purpose of Disbursement POSTAGE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: POSTAGE	

Full Name (Last, First, Middle Initial) <b>C. VictoryStore.com</b>		Transaction ID: 60715.E3726 Date of Disbursement 07 / 14 / 2006	
Mailing Address 5200 S.W. 30th St.		Amount of Each Disbursement this Period 1827.98	
City Davenport State IA Zip Code 52802-	Purpose of Disbursement RALLY FANS FOR PARADES	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: RALLY FANS FOR PARADES	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 130 / 154

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. First Bankcard</b>		<b>Transaction ID:</b> 61012.E3754	
Mailing Address P.O. Box 2814		Date of Disbursement 08 / 11 / 2006	
City Omaha	State NE	Zip Code 68103-2814	Amount of Each Disbursement this Period 3297.23
Purpose of Disbursement SEE BELOW		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		SEE BELOW
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Arrowwood Resort and Conference Ctr</b>		<b>Transaction ID:</b> 61015.E3846	
Mailing Address PO Box 499		Date of Disbursement 08 / 11 / 2006	
City Okoboji	State IA	Zip Code 51355-0499	Amount of Each Disbursement this Period 299.75
Purpose of Disbursement HOTEL/MEALS FOR FUNDRAISER		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		<b>[MEMO ITEM]</b> MEMO: HOTEL/MEALS FOR FUN- DRAISER
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Best Buy</b>		<b>Transaction ID:</b> 61015.E3841	
Mailing Address 4100 University Avenue		Date of Disbursement 08 / 11 / 2006	
City West Des Moines	State IA	Zip Code 50265-	Amount of Each Disbursement this Period 891.12
Purpose of Disbursement OFFICE COMPUTERS PER JENN		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		<b>[MEMO ITEM]</b> MEMO: OFFICE COMPUTERS PER JENN
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3297.23</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Caseys General</b>		<b>Transaction ID:</b> 61015.E3851 <b>Date of Disbursement</b> 08 / 11 / 2006
Mailing Address East Lincolnway		Amount of Each Disbursement this Period 90.32
City Ames State IA Zip Code 50010-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement GAS MISC	Candidate Name	<b>[MEMO ITEM]</b> MEMO: GAS MISC
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Copyworks</b>		<b>Transaction ID:</b> 61015.E3854 <b>Date of Disbursement</b> 08 / 11 / 2006
Mailing Address 2502 Lincoln Way		Amount of Each Disbursement this Period 74.85
City Ames State IA Zip Code 50014-7076	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PRINTING - BUSINESS CARDS	Candidate Name	<b>[MEMO ITEM]</b> MEMO: PRINTING - BUSINESS CARDS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Elys Lockup Storage</b>		<b>Transaction ID:</b> 61015.E3847 <b>Date of Disbursement</b> 08 / 11 / 2006
Mailing Address 3034 Bayberry Rd.		Amount of Each Disbursement this Period 85.60
City Ames State IA Zip Code 50010-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MONTHLY STORAGE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: MONTHLY STORAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 132 / 154

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. First Bankcard</b>		Transaction ID: 61015.E3843 Date of Disbursement 08 / 11 / 2006
Mailing Address P.O. Box 2814		Amount of Each Disbursement this Period 140.00
City Omaha State NE Zip Code 68103-2814	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement ANNUAL CARD MEMBERSHIP FEES	Candidate Name	<b>[MEMO ITEM]</b> MEMO: ANNUAL CARD MEMBERSHIP FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. KUM &amp; GO</b>		Transaction ID: 61015.E3853 Date of Disbursement 08 / 11 / 2006
Mailing Address 1025 E 1st St		Amount of Each Disbursement this Period 48.59
City Ankeny State IA Zip Code 50021-2043	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement GAS FOR CAMPAIGN VEHICLE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: GAS FOR CAMPAIGN VEHICLE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Qwest Communications</b>		Transaction ID: 61015.E3840 Date of Disbursement 08 / 11 / 2006
Mailing Address Political Accounts 70 West 4th St., 1st Floor		Amount of Each Disbursement this Period 600.00
City Saint Paul State MN Zip Code 55102-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement DEPOSIT ON PHONE LINES	Candidate Name	<b>[MEMO ITEM]</b> MEMO: DEPOSIT ON PHONE LINES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 133 / 154

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial)

**A. Qwest Communications**

Mailing Address Political Accounts  
70 West 4th St., 1st Floor

City Saint Paul State MN Zip Code 55102-

Purpose of Disbursement  
ADVANCE PYMT ON CAMPAIGN PHONE LINE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 61015.E3839

Date of Disbursement

08 / 11 / 2006

Amount of Each Disbursement this Period

347.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: ADVANCE PYMT ON CAM-  
PAIGN PHONE LINE

**B. Staples**

Full Name (Last, First, Middle Initial)

Mailing Address 1333 Buckeye Road

City Ames State IA Zip Code 50010-

Purpose of Disbursement  
COMPUTER/OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 61015.E3845

Date of Disbursement

08 / 11 / 2006

Amount of Each Disbursement this Period

151.43

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: COMPUTER/OFFICE SUP-  
PLIES

**C. US Post Office**

Full Name (Last, First, Middle Initial)

Mailing Address 525 Kellogg Ave

City Ames State IA Zip Code 50010-9998

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 61015.E3848

Date of Disbursement

08 / 11 / 2006

Amount of Each Disbursement this Period

49.14

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: POSTAGE

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 134 / 154

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. United States Post Office</b>		Transaction ID: 61015.E3844 Date of Disbursement 08 / 11 / 2006	
Mailing Address 115 1st ST NE		Amount of Each Disbursement this Period 42.72	
City Clarion State IA Zip Code 50525-	Purpose of Disbursement POSTAGE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: POSTAGE	

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>		Transaction ID: 61015.E3849 Date of Disbursement 08 / 11 / 2006	
Mailing Address Hwy 69 N		Amount of Each Disbursement this Period 230.65	
City Ames State IA Zip Code 50010-	Purpose of Disbursement REFRIGERATOR OFFICE SUPPLIES ETC	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: REFRIGERATOR OFFICE SUPPLIES ETC	

Full Name (Last, First, Middle Initial) <b>C. First Bankcard</b>		Transaction ID: 61012.E3796 Date of Disbursement 09 / 14 / 2006	
Mailing Address P.O. Box 2814		Amount of Each Disbursement this Period 3684.70	
City Omaha State NE Zip Code 68103-2814	Purpose of Disbursement SEE BELOW	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE BELOW	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3684.70
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Alpha Copies, Inc.</b>		<b>Transaction ID:</b> 61015.E3866 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 2310 Lincoln Way		Amount of Each Disbursement this Period 710.24 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Ames State IA Zip Code 50014-7113	Purpose of Disbursement FLYERS PROMO MATERIAL Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: FLYERS PROMO MATERIAL

Full Name (Last, First, Middle Initial) <b>B. Caseys General</b>		<b>Transaction ID:</b> 61015.E3874 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address East Lincolnway		Amount of Each Disbursement this Period 92.53 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Ames State IA Zip Code 50010-	Purpose of Disbursement GAS Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: GAS

Full Name (Last, First, Middle Initial) <b>C. CompUSA</b>		<b>Transaction ID:</b> 61015.E3867 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 10201 University Avenue		Amount of Each Disbursement this Period 233.18 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Clive State IA Zip Code 50325-	Purpose of Disbursement COMPUTER/NETWORK ITEMS Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: COMPUTER/NETWORK ITEMS

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Elys Lockup Storage</b>		Transaction ID: 61015.E3862 Date of Disbursement 09 / 15 / 2006	
Mailing Address 3034 Bayberry Rd.		Amount of Each Disbursement this Period 85.60	
City Ames State IA Zip Code 50010-	Purpose of Disbursement MONTHLY STORAGE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: MONTHLY STORAGE	

Full Name (Last, First, Middle Initial) <b>B. Glen Oaks Country Club</b>		Transaction ID: 61015.E3860 Date of Disbursement 09 / 15 / 2006	
Mailing Address 1401 Glen Oaks Dr		Amount of Each Disbursement this Period 616.92	
City West Des Moines State IA Zip Code 50266-6630	Purpose of Disbursement GOLF EVENT FUNDRAISER	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: GOLF EVENT FUNDRAISER	

Full Name (Last, First, Middle Initial) <b>C. Glen Oaks Country Club</b>		Transaction ID: 61015.E3865 Date of Disbursement 09 / 15 / 2006	
Mailing Address 1401 Glen Oaks Dr		Amount of Each Disbursement this Period 60.42	
City West Des Moines State IA Zip Code 50266-6630	Purpose of Disbursement FUNDRAISER PROMO MATERIAL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: FUNDRAISER PROMO MATERIAL	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Hy-Vee Ames</b>		Transaction ID: 61015.E3873 Date of Disbursement 09 / 15 / 2006	
Mailing Address 640 Lincoln Way		Amount of Each Disbursement this Period 30.54	
City Ames State IA Zip Code 50010-	Purpose of Disbursement OFFICE ITEMS Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: OFFICE ITEMS	

Full Name (Last, First, Middle Initial) <b>B. Kum &amp; Go</b>		Transaction ID: 61015.E3872 Date of Disbursement 09 / 15 / 2006	
Mailing Address 810 North Ankeny Blvd		Amount of Each Disbursement this Period 59.35	
City Ankeny State IA Zip Code 50021-	Purpose of Disbursement GAS Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: GAS	

Full Name (Last, First, Middle Initial) <b>C. Qwest Communications</b>		Transaction ID: 61015.E3863 Date of Disbursement 09 / 15 / 2006	
Mailing Address Political Accounts 70 West 4th St., 1st Floor		Amount of Each Disbursement this Period 900.00	
City Saint Paul State MN Zip Code 55102-	Purpose of Disbursement DEPOSIT ON PHONE LINES Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: DEPOSIT ON PHONE LI- NES	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Transaction ID: 61015.E3868 Date of Disbursement 09 / 15 / 2006
Mailing Address 1333 Buckeye Road		Amount of Each Disbursement this Period 55.60
City Ames State IA Zip Code 50010-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	<b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. US Post Office</b>		Transaction ID: 61015.E3869 Date of Disbursement 09 / 15 / 2006
Mailing Address 525 Kellogg Ave		Amount of Each Disbursement this Period 480.00
City Ames State IA Zip Code 50010-9998	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POSTAGE FOR OPEN HOUSE INVITES	Candidate Name	<b>[MEMO ITEM]</b> MEMO: POSTAGE FOR OPEN HO-USE INVITES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. United States Post Office</b>		Transaction ID: 61015.E3861 Date of Disbursement 09 / 15 / 2006
Mailing Address 115 1st ST NE		Amount of Each Disbursement this Period 39.00
City Clarion State IA Zip Code 50525-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement ONE ROLL STAMPS	Candidate Name	<b>[MEMO ITEM]</b> MEMO: ONE ROLL STAMPS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. First Citizens National Bank</b>		<b>Transaction ID:</b> 60715.E3731 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address P.O. Box 268		Amount of Each Disbursement this Period 1598.45
City Clarion State IA Zip Code 50525-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement 2ND QTR - 941 DEPOSIT Candidate Name	Category/ Type	2ND QTR - 941 DEPOSIT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. First Citizens National Bank</b>		<b>Transaction ID:</b> 61012.E3762 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address P.O. Box 268		Amount of Each Disbursement this Period 67.99
City Clarion State IA Zip Code 50525-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MONTHLY SERVICE CHG Candidate Name	Category/ Type	MONTHLY SERVICE CHG
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. First Citizens National Bank</b>		<b>Transaction ID:</b> 61012.E3756 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address P.O. Box 268		Amount of Each Disbursement this Period 2708.96
City Clarion State IA Zip Code 50525-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement 941 DEPOSIT Candidate Name	Category/ Type	941 DEPOSIT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4375.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. First Citizens National Bank</b>		<b>Transaction ID:</b> 61012.E3785 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address P.O. Box 268		Amount of Each Disbursement this Period 37.47
City Clarion State IA Zip Code 50525-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MONTHLY SERVICE CHGS	Candidate Name	MONTHLY SERVICE CHGS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) <b>B. First Citizens National Bank</b>		<b>Transaction ID:</b> 61012.E3802 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address P.O. Box 268		Amount of Each Disbursement this Period 2058.14
City Clarion State IA Zip Code 50525-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement 941 DEPOSIT	Candidate Name	941 DEPOSIT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) <b>C. First Citizens National Bank</b>		<b>Transaction ID:</b> 61012.E3821 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address P.O. Box 268		Amount of Each Disbursement this Period 1073.24
City Clarion State IA Zip Code 50525-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement 941 DEPOSIT	Candidate Name	941 DEPOSIT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3168.85</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. First Citizens National Bank</b>		<b>Transaction ID: 61012.E3824</b> Date of Disbursement 09 / 30 / 2006	
Mailing Address P.O. Box 268		Amount of Each Disbursement this Period 53.22	
City Clarion State IA Zip Code 50525-	Purpose of Disbursement BANK CHGS Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. IA Workforce Development</b>		<b>Transaction ID: 60715.E3733</b> Date of Disbursement 07 / 14 / 2006	
Mailing Address 1000 East Grand Avenue		Amount of Each Disbursement this Period 85.34	
City Des Moines State IA Zip Code 50309-	Purpose of Disbursement 2ND QTR/2006 ST. UNEMPLOYMENT Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Iowa Christian Alliance</b>		<b>Transaction ID: 61012.E3735</b> Date of Disbursement 07 / 21 / 2006	
Mailing Address PO Box 65066		Amount of Each Disbursement this Period 500.00	
City West Des Moines State IA Zip Code 50265-0066	Purpose of Disbursement DONATION FOR FRIENDS OF FAMILY BANQ Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	638.56
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Glenn LeMunyon</b>		<b>Transaction ID:</b> 61015.C18186IK Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 6
Mailing Address 1210 Suffield Dr.		Amount of Each Disbursement this Period 1464.33 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Mc Lean State VA Zip Code 22101-	Purpose of Disbursement FOOD & BEVERAGES FOR FUNDRAISE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	IN KIND: FOOD & BEVERAGES FOR FUNDRAISE

Full Name (Last, First, Middle Initial) <b>B. Joanne LeMunyon</b>		<b>Transaction ID:</b> 61015.C18187IK Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 6
Mailing Address 1210 Suffield Dr.		Amount of Each Disbursement this Period 1464.33 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Mclean State VA Zip Code 22101-	Purpose of Disbursement FOOD & BEVERAGE FOR FUNDRAISER Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	IN KIND: FOOD & BEVERAGE FOR FUNDRAISER

Full Name (Last, First, Middle Initial) <b>C. Ronald McMillen</b>		<b>Transaction ID:</b> 60711.E3712 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 6
Mailing Address DBA McMillen Rentals 405 Northwestern Ave		Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Ames State IA Zip Code 50010-5950	Purpose of Disbursement RENT ON CAMPAIGN HQ Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	RENT ON CAMPAIGN HQ

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5928.66
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Ronald McMillen</b>		<b>Transaction ID: 61012.E3745</b> Date of Disbursement 08 / 02 / 2006
Mailing Address DBA McMillen Rentals 405 Northwestern Ave		Amount of Each Disbursement this Period 3000.00
City Ames State IA Zip Code 50010-5950	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MONTHLY RENT ON CAMPAIGN HQ		MONTHLY RENT ON CAMPAIGN HQ
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mentzer Media Services</b>		<b>Transaction ID: 61012.E3823</b> Date of Disbursement 09 / 30 / 2006
Mailing Address 600 Fairmount Ave. Suite 306		Amount of Each Disbursement this Period 148915.00
City Towson State MD Zip Code 21286-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEDIA ADS FOR 10/3-10/10		MEDIA ADS FOR 10/3-10/10
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Midwest Flying Service of Iowa, Inc</b>		<b>Transaction ID: 60715.E3718</b> Date of Disbursement 07 / 14 / 2006
Mailing Address 2501 Airport Dr		Amount of Each Disbursement this Period 998.72
City Ames State IA Zip Code 50010-8261	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement 7/4 PARADE STOPS		7/4 PARADE STOPS
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>152913.72</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. NRCC-Natl Republican Congressional Comm</b>		<b>Transaction ID:</b> 61012.E3816 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 323 1st St SE		Amount of Each Disbursement this Period 25000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20003-	Purpose of Disbursement CONTRIBUTION Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CONTRIBUTION

Full Name (Last, First, Middle Initial) <b>B. Qwest Communications</b>		<b>Transaction ID:</b> 61012.E3783 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6
Mailing Address Political Accounts 70 West 4th St., 1st Floor		Amount of Each Disbursement this Period 355.21 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Saint Paul State MN Zip Code 55102-	Purpose of Disbursement CAMPAIGN HQ PHONES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CAMPAIGN HQ PHONES

Full Name (Last, First, Middle Initial) <b>C. Qwest Communications</b>		<b>Transaction ID:</b> 61012.E3798 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address Political Accounts 70 West 4th St., 1st Floor		Amount of Each Disbursement this Period 695.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Saint Paul State MN Zip Code 55102-	Purpose of Disbursement CAMPAIGN HQ PHONES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CAMPAIGN HQ PHONES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	26050.70
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Sarah Sauber</b>		<b>Transaction ID: 61012.E3804</b> Date of Disbursement 09 / 18 / 2006
Mailing Address 811 Burr Oaks Dr Unit 1106		Amount of Each Disbursement this Period 312.15
City West Des Moines State IA Zip Code 50266-6654	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW Candidate Name	Category/Type	SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Best Buy</b>		<b>Transaction ID: 61015.E3887</b> Date of Disbursement 09 / 18 / 2006
Mailing Address 4100 University Avenue		Amount of Each Disbursement this Period 312.15
City West Des Moines State IA Zip Code 50265-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement VIDEO CAMERA Candidate Name	Category/Type	<b>[MEMO ITEM]</b> MEMO: VIDEO CAMERA
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Elizabeth Severson</b>		<b>Transaction ID: 60711.E3713</b> Date of Disbursement 07 / 03 / 2006
Mailing Address 1610 Obrien Ave		Amount of Each Disbursement this Period 845.00
City Belmond State IA Zip Code 50421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement WAGES - ASST TREASURER Candidate Name	Category/Type	WAGES - ASST TREASURER
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1157.15
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Elizabeth Severson</b>		<b>Transaction ID:</b> 61012.E3738 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 1610 Obrien Ave		Amount of Each Disbursement this Period 581.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Belmont State IA Zip Code 50421-	Purpose of Disbursement WAGES - ASST. TREASURER Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	WAGES - ASST. TREASURER

Full Name (Last, First, Middle Initial) <b>B. Elizabeth Severson</b>		<b>Transaction ID:</b> 61012.E3782 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6
Mailing Address 1610 Obrien Ave		Amount of Each Disbursement this Period 838.07 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Belmont State IA Zip Code 50421-	Purpose of Disbursement WAGES - ASST. TREASURER Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	WAGES - ASST. TREASURER

Full Name (Last, First, Middle Initial) <b>C. Star Crossed Studios</b>		<b>Transaction ID:</b> 61012.E3744 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address PO Box 585		Amount of Each Disbursement this Period 510.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Ankeny State IA Zip Code 50021-0585	Purpose of Disbursement UPDATE COMM/COMP AT HQ Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	UPDATE COMM/COMP AT HQ

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1929.87
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Star Crossed Studios</b>		<b>Transaction ID:</b> 61012.E3750 <b>Date of Disbursement</b> 08 / 11 / 2006
Mailing Address PO Box 585		Amount of Each Disbursement this Period 127.50
City Ankeny State IA Zip Code 50021-0585	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SETUP ADDITIONAL HDWR IN HQ	Candidate Name	SETUP ADDITIONAL HDWR IN HQ
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Star Crossed Studios</b>		<b>Transaction ID:</b> 61012.E3793 <b>Date of Disbursement</b> 09 / 14 / 2006
Mailing Address PO Box 585		Amount of Each Disbursement this Period 106.25
City Ankeny State IA Zip Code 50021-0585	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement IT NETWORKING SUPPORT	Candidate Name	IT NETWORKING SUPPORT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Star Crossed Studios</b>		<b>Transaction ID:</b> 61012.E3814 <b>Date of Disbursement</b> 09 / 27 / 2006
Mailing Address PO Box 585		Amount of Each Disbursement this Period 962.50
City Ankeny State IA Zip Code 50021-0585	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement UPDATE WEBSITE MGMT CAPABILITIES	Candidate Name	UPDATE WEBSITE MGMT CAPABILITIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>1196.25</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

<b>A. Strong Repairs</b> Full Name (Last, First, Middle Initial) Mailing Address 7025 Palm Dr. City Urbandale State IA Zip Code 50322- Purpose of Disbursement INSTALL PHONE LINES HQ Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 61012.E3742 <b>Date of Disbursement:</b> 08 / 02 / 2006 Amount of Each Disbursement this Period 247.61 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 INSTALL PHONE LINES HQ
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<b>B. Strong Repairs</b> Full Name (Last, First, Middle Initial) Mailing Address 7025 Palm Dr. City Urbandale State IA Zip Code 50322- Purpose of Disbursement INSTALL 6 INT. PHONE LINES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 61012.E3792 <b>Date of Disbursement:</b> 09 / 14 / 2006 Amount of Each Disbursement this Period 286.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 INSTALL 6 INT. PHONE LINES
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<b>C. The Tarrance Group, Inc.</b> Full Name (Last, First, Middle Initial) Mailing Address 201 N Union St Ste 410 City Alexandria State VA Zip Code 22314-2649 Purpose of Disbursement VOTER SURVEYS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 61012.E3766 <b>Date of Disbursement:</b> 08 / 21 / 2006 Amount of Each Disbursement this Period 10464.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 VOTER SURVEYS
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10997.74
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. TCI Alarms</b>		<b>Transaction ID:</b> 61012.E3741 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address 1625 South Ankeny Blvd.		Amount of Each Disbursement this Period 583.00
City Ankeny State IA Zip Code 50021-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SECURITY - CAMPAIGN HQ	Candidate Name	SECURITY - CAMPAIGN HQ
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Treasurer, State of Iowa</b>		<b>Transaction ID:</b> 60715.E3732 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address PO Box 10411		Amount of Each Disbursement this Period 196.00
City Des Moines State IA Zip Code 50306-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement 2ND QTR - 2006 ST WHOLDING	Candidate Name	2ND QTR - 2006 ST WHOLDING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. United States Cellular</b>		<b>Transaction ID:</b> 61012.E3752 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address PO Box 7835		Amount of Each Disbursement this Period 174.32
City Madison State WI Zip Code 53707-7835	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MONTHLY BB CHRГ	Candidate Name	MONTHLY BB CHRГ
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	953.32
<b>TOTAL</b> This Period (last page this line number only) .....	_____

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 150 / 154

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. United States Cellular</b>		<b>Transaction ID:</b> 61012.E3795 Date of Disbursement 09 / 14 / 2006
Mailing Address PO Box 7835		Amount of Each Disbursement this Period 182.37
City Madison State WI Zip Code 53707-7835	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MONTHLY BB CHARGE -CAMPAIGN MGR	Candidate Name	MONTHLY BB CHARGE -CAMPAIGN MGR
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. UST, Inc.</b>		<b>Transaction ID:</b> 61012.E3779 Date of Disbursement 08 / 22 / 2006
Mailing Address 655 15th St., NW, ste 410		Amount of Each Disbursement this Period 1319.20
City Washington State DC Zip Code 20005-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FLIGHTS FOR CAMPAIGN	Candidate Name	FLIGHTS FOR CAMPAIGN
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		<b>Transaction ID:</b> 61012.E3743 Date of Disbursement 08 / 02 / 2006
Mailing Address 777 Big Timber Rd		Amount of Each Disbursement this Period 56.88
City Elgin State IL Zip Code 60123-1488	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN CELL	Candidate Name	CAMPAIGN CELL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1558.45
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		<b>Transaction ID:</b> 61012.E3765 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 6
Mailing Address 777 Big Timber Rd		Amount of Each Disbursement this Period 63.62
City Elgin State IL Zip Code 60123-1488	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN CELL	Candidate Name	CAMPAIGN CELL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		<b>Transaction ID:</b> 61012.E3805 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address 777 Big Timber Rd		Amount of Each Disbursement this Period 66.58
City Elgin State IL Zip Code 60123-1488	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN CELL	Candidate Name	CAMPAIGN CELL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Waste Management</b>		<b>Transaction ID:</b> 61012.E3755 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 210 Freel Dr.		Amount of Each Disbursement this Period 219.64
City Ames State IA Zip Code 50010-6512	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement UTILITIES FOR CAMPAIGN HQ	Candidate Name	UTILITIES FOR CAMPAIGN HQ
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	349.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Waste Management</b>		<b>Transaction ID:</b> 61012.E3803 Date of Disbursement 09 / 18 / 2006
Mailing Address 210 Freel Dr.		Amount of Each Disbursement this Period 77.71
City Ames State IA Zip Code 50010-6512	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement UTILITIES FOR CAMPAIGN HQ		UTILITIES FOR CAMPAIGN HQ
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. We 3 Catering</b>		<b>Transaction ID:</b> 60711.E3714 Date of Disbursement 07 / 03 / 2006
Mailing Address 231 E Main St		Amount of Each Disbursement this Period 3257.74
City Belmont State IA Zip Code 50421-1122	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CATERING/TENTS FOR PICNIC		CATERING/TENTS FOR PICNIC
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Nicole Woodroffe</b>		<b>Transaction ID:</b> 61012.E3820 Date of Disbursement 09 / 29 / 2006
Mailing Address 1233 Edgemont St		Amount of Each Disbursement this Period 627.98
City Des Moines State IA Zip Code 50315-1848	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL - CAMPAIGN STAFF		PAYROLL - CAMPAIGN STAFF
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3963.43</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Wright Cty Republicans</b>		Transaction ID: 61012.E3767 Date of Disbursement 08 / 21 / 2006
Mailing Address 813 Pesch St		Amount of Each Disbursement this Period 1000.00
City Rowan State IA Zip Code 50470-5007	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CONTRIBUTION	Category/Type	CONTRIBUTION
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:		

Full Name (Last, First, Middle Initial) <b>B. Blake Yocom</b>		Transaction ID: 61012.E3749 Date of Disbursement 08 / 15 / 2006
Mailing Address 630 S 8th St		Amount of Each Disbursement this Period 659.64
City Chariton State IA Zip Code 50049-2520	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL CAMPAIGN STAFF	Category/Type	PAYROLL CAMPAIGN STAFF
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:		

Full Name (Last, First, Middle Initial) <b>C. Blake Yocom</b>		Transaction ID: 61012.E3764 Date of Disbursement 08 / 21 / 2006
Mailing Address 630 S 8th St		Amount of Each Disbursement this Period 137.26
City Chariton State IA Zip Code 50049-2520	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MILEAGE/GAS	Category/Type	MILEAGE/GAS
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1796.90
<b>TOTAL</b> This Period (last page this line number only) .....	270303.99

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 154 / 154

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input checked="" type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

**A.** Full Name (Last, First, Middle Initial)  
Iowa Corn Growers Association PAC

Mailing Address 5505 NW 88th St Ste 100

City Johnston State IA Zip Code 50131-2948

Purpose of Disbursement  
Refund of Contribution written on wrong

Candidate Name

010  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼  
General 2006

Transaction ID: 61012.E3815  
Date of Disbursement

09 / 27 / 2006

Amount of Each Disbursement this Period

1500.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

1500.00