

**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 75 OF 81	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Iowans For Latham

Full Name (Last, First, Middle Initial) A. National Republican Congressional Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2013
Mailing Address 320 1st Street SE		Amount of Each Disbursement this Period 30000
City Washington State DC Zip Code 20003-1838	Purpose of Disbursement Political Contribution: assessment	011 Category/Type
Candidate Name National Republican Congressional Committee	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____	Transaction ID : B-E-39027	

Full Name (Last, First, Middle Initial) B. National Republican Congressional Committee		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2013
Mailing Address 320 1st Street SE		Amount of Each Disbursement this Period 20000
City Washington State DC Zip Code 20003-1838	Purpose of Disbursement Political Contribution: contribution	011 Category/Type
Candidate Name National Republican Congressional Committee	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____	Transaction ID : B-E-39196	

Full Name (Last, First, Middle Initial) c. Real Property Mgmt, Llc		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address 7355 Stafford Drive		Amount of Each Disbursement this Period 154.64
City Council Bluffs State IA Zip Code 51503-6007	Purpose of Disbursement final utility bill -CB	001 Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____	Transaction ID : B-E-39020 Original vendors exceeding reporting threshold itemized as memo transactions.	

SUBTOTAL of Disbursements This Page (optional)	50154.64
TOTAL This Period (last page this line number only)	