

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) Latham For Congress

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

ADDRESS (number and street) P.O. Box 71 Clarion IA 50525

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00287045 CITY STATE ZIP CODE STATE DISTRICT IA 04

3. IS THIS REPORT NEW OR AMENDED (A)

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 04 01 2007 through 06 30 2007

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 09 27 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.

Table with 8 columns and 1 row for Office Use Only.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Latham For Congress

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	182361.00	327218.07
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	182361.00	327218.07
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	44597.00	154749.80
(b) Total Offsets to Operating Expenditures (from Line 14).....	9899.27	16617.25
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	34697.73	138132.55
8. Cash on Hand at Close of Reporting Period (from Line 27).....	364437.39	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	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	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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).....

71830.00

133200.00

(ii) Unitemized.....

21931.00

37797.00

(iii) TOTAL of contributions

93761.00

170997.00

from individuals..... ▶

100.00

189.75

(b) Political Party Committees.....

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

88500.00

156031.32

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

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

182361.00

327218.07

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.).....

9899.27

16617.25

15. OTHER RECEIPTS

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

2111.00

3137.23

16. TOTAL RECEIPTS (add Lines

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

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

194371.27

346972.55

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	44597.00	154749.80
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).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	2000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	44597.00	156749.80

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	214663.12
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	194371.27
25. SUBTOTAL (add Line 23 and Line 24).....	409034.39
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	44597.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	364437.39

**CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)**

Name of Candidate Thomas P. Latham		Candidate ID Number H4IA05102
Name of Principal Campaign Committee Latham For Congress		Committee ID Number C C00287045
Committee Address P.O. Box 71		
City Clarion	State IA	ZIP 50525-
Report Covering Period (check one) <input checked="" type="checkbox"/> through June 30, or <input type="checkbox"/> through December 31 of the year preceding the year of the general election		
	Primary	General
1. Gross receipts of authorized committees	330872.55	16100.00
2. Aggregate amount of contributions from personal funds of the candidate	0.00	0.00
3. Gross receipts minus the candidate's personal contributions	330872.55	16100.00

**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 6 / 100
	<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)
Donald Aamodt

Mailing Address 610 S Lake St

City State Zip Code
Lake Mills IA 50450-1707

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

Name of Employer retired Occupation
Armed Forces

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
04 / 13 / 2007

Transaction ID: 70627.C18973

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)
Donald Aamodt

Mailing Address 610 S Lake St

City State Zip Code
Lake Mills IA 50450-1707

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

Name of Employer retired Occupation
Armed Forces

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00

Date of Receipt
MM / DD / YYYY
05 / 29 / 2007

Transaction ID: 70627.C19185

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)
Richard Allbee

Mailing Address PO Box 436
1320 4th Street NE

City State Zip Code
Hampton IA 50441-0436

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

Name of Employer ABCM Corp Occupation
Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1125.00

Date of Receipt
MM / DD / YYYY
04 / 20 / 2007

Transaction ID: 70627.C19014

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) ▶ **475.00**

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 7 / 100
	<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)
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 Pathology Assoc of Central Iowa
Occupation Pathologist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
05 / 29 / 2007

Transaction ID: 70627.C19184

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)
William Appelgate

Mailing Address 2709 R45 Hwy

City State Zip Code
Cumming IA 50061-5622

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

Name of Employer Des Moines University
Occupation VICE PRESIDENT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2007

Transaction ID: 70627.C19395

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)
Joan Ballantyne

Mailing Address PO Box 734

City State Zip Code
Cherokee IA 51012-0734

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

Name of Employer Self-Employed
Occupation Real Estate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
150.00

Date of Receipt
MM / DD / YYYY
05 / 03 / 2007

Transaction ID: 70627.C19089

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)	▶	1050.00
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 8 / 100
	<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

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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
05 / 24 / 2007

Transaction ID: 70627.C19173

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)
Joan Ballantyne

Mailing Address PO 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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2007

Transaction ID: 70627.C19271

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)
Samuel Baptista

Mailing Address 2015 Lorraine Ave

City Mc Lean State VA Zip Code 22101-5331

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

Name of Employer Self-Employed Occupation Lobbyist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2007

Transaction ID: 70706.C19460

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)	▶	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 9 / 100
	<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 Baty

Mailing Address 2626 Ridgetop Rd

City State Zip Code
Ames IA 50014-4573

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

Name of Employer State of Iowa Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2007

Transaction ID: 70627.C19404

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)
Jeff Becker

Mailing Address 265 W Riverside Rd

City State Zip Code
Ames IA 50010-9502

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

Name of Employer Becker Underwood Occupation Upper Management

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1300.00

Date of Receipt
MM / DD / YYYY
05 / 04 / 2007

Transaction ID: 70627.C19122

Amount of Each Receipt this Period
1300.00

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

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

Mailing Address 19 Edinburgh Ln

City State Zip Code
Pinehurst NC 28374-6714

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

Name of Employer 3M Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 22 / 2007

Transaction ID: 70627.C19202

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)	▶	1850.00
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 / 100
	<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)
Raymond Beebe

Mailing Address 17121 350th St

City State Zip Code
Forest City IA 50436-7752

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

Name of Employer Occupation
Winnebago Inds. Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 0 7

Transaction ID: 70413.C18957

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)
Elaine Bleam

Mailing Address 3181 180th St

City State Zip Code
Manson IA 50563-7565

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 70706.C19472

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)
Julia Boekelman

Mailing Address 1239 25th Ave N

City State Zip Code
Fort Dodge IA 50501-7226

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

Name of Employer Occupation
No Employer Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 7

Transaction ID: 70627.C19134

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)	525.00
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 / 100
	<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)
Mona Bond

Mailing Address 2818 W 1st St

City Ankeny State IA Zip Code 50023-5002

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

Name of Employer Agribusiness Assoc of Iowa Occupation CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 7

Transaction ID: 70413.C18958

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 Decorah State IA Zip Code 52101-2225

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

Name of Employer Self-Employed Occupation Construction

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 8 / 2 0 0 7

Transaction ID: 70627.C19373

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)
Steven Cassabaum

Mailing Address 62944 Sunset Dr

City Nevada State IA Zip Code 50201-7947

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

Name of Employer 21st Century Technologies Occupation Physical Therapist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 3 / 2 0 0 7

Transaction ID: 70627.C19086

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)	▶	750.00
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 / 100
	<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)
Norman Chambers

Mailing Address 1409 230th Ave

City State Zip Code
Corwith IA 50430-8520

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

Name of Employer Self-Employed Occupation
Farmer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2007

Transaction ID: 70706.C19459

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)
Ross Christensen

Mailing Address 1056 Prospect Blvd

City State Zip Code
Waterloo IA 50701-4930

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

Name of Employer Self-Employed Occupation
Orthodontist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2007

Transaction ID: 70627.C19074

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)
Conrad Clement

Mailing Address PO Box 154
11969 Valley Ave

City State Zip Code
Cresco IA 52136-0154

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

Name of Employer Self-Employed Occupation
CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2007

Transaction ID: 70627.C19359

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 13 / 100
	<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)
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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 09 / 2007

Transaction ID: 70413.C18944

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)
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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 24 / 2007

Transaction ID: 70627.C19171

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)
Barbara Determan

Mailing Address 2303 255th St

City State Zip Code
Early IA 50535-7543

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

Name of Employer Heartland Communications Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2007

Transaction ID: 70627.C19059

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) ► **750.00**

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 / 100
	<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 Downing

Mailing Address 8489 Highway 65/69

City State Zip Code
Indianola IA 50125

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

Name of Employer
Self-Employed

Occupation
Construction

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 25 / 2007

Transaction ID: 70627.C19047

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)
Denny Edwards

Mailing Address PO Box 497

City State Zip Code
Hampton IA 50441-0497

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

Name of Employer
Edwards Contracting

Occupation
Contractor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 09 / 2007

Transaction ID: 70413.C18952

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)
Denny Edwards

Mailing Address PO Box 497

City State Zip Code
Hampton IA 50441-0497

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

Name of Employer
Edwards Contracting

Occupation
Contractor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 28 / 2007

Transaction ID: 70706.C19456

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)	▶	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 15 / 100
	<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)
Wayne Emerson

Mailing Address 1013 W Broadway St

City State Zip Code
Eagle Grove IA 50533-1618

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

Name of Employer retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
MM / DD / YYYY
05 / 29 / 2007

Transaction ID: 70627.C19179

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: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2007

Transaction ID: 70627.C19036

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 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: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2007

Transaction ID: 70627.C19039

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) ▶ **600.00**

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 16 / 100
	<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: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

125.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 0 7

Transaction ID: 70627.C18978

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)
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: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 70627.C19034

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)
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: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

400.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 0 7

Transaction ID: 70627.C19402

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) ► **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 17 / 100
	<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 Frevert

Mailing Address PO Box 500
539 Oak Ln

City Nevada State IA Zip Code 50201-0500

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

Name of Employer retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 1 / 2 0 0 7

Transaction ID: 70627.C19070

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)
Mark Friedow

Mailing Address PO Box 110
1213 Rushridge Rd.

City Jefferson State IA Zip Code 50129-0110

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

Name of Employer Sparboe Companies Occupation Administrator

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 1 / 2 0 0 7

Transaction ID: 70627.C19076

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)
Dan Frudden

Mailing Address 806 Ellis Dr

City Charles City State IA Zip Code 50616-3029

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

Name of Employer retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 125.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 70627.C18999

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: (check only one)	PAGE 18 / 100
	<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) Dan Frudden Mailing Address 806 Ellis Dr City State Zip Code Charles City IA 50616-3029 FEC ID number of contributing federal political committee. C		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>5</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 70627.C19145 Amount of Each Receipt this Period <table border="1"> <tr> <td>150.00</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	5		2	1		2	0	0	7	150.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	1		2	0	0	7														
150.00																							
Name of Employer retired Occupation Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1"> <tr> <td>275.00</td> </tr> </table>	275.00																				
275.00																							

B. 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		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>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 70627.C19236 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	6		0	4		2	0	0	7	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		0	4		2	0	0	7														
250.00																							
Name of Employer Self-Employed Occupation Farming Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																				
250.00																							

C. 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		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>6</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 70706.C19458 Amount of Each Receipt this Period <table border="1"> <tr> <td>125.00</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	6		2	8		2	0	0	7	125.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	8		2	0	0	7														
125.00																							
Name of Employer Self-Employed Occupation Farming Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1"> <tr> <td>375.00</td> </tr> </table>	375.00																				
375.00																							

SUBTOTAL of Receipts This Page (optional)	525.00
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 19 / 100
	<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 Gratius

Mailing Address 2471 NW 152nd St

City State Zip Code
Clive IA 50325-4519

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

Name of Employer: Gratius Construction
Occupation: President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2007

Transaction ID: 70627.C19386

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)
Justin Gullekson

Mailing Address 2062 Grandview Rd

City State Zip Code
Decorah IA 52101-9573

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

Name of Employer: Bank of the West
Occupation: Financial Planner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2007

Transaction ID: 70706.C19453

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 State Zip Code
New Hampton IA 50659-9225

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

Name of Employer: State Bank of Lawler
Occupation: Banker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2300.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2007

Transaction ID: 70627.C19071

Amount of Each Receipt this Period
1300.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2550.00
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 20 / 100
	<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 Hermanson

Mailing Address 12621 Hillcrest Dr

City State Zip Code
Story City IA 50248-8602

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

Name of Employer Self-Employed Occupation
Farmer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 8 / 2 0 0 7

Transaction ID: 70627.C19114

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)
Peter Hermanson

Mailing Address 522 Story St Unit 101

City State Zip Code
Story City IA 50248-1102

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

Name of Employer Woodland Farms, Inc. Occupation
Agriculture

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

225.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 2 / 2 0 0 7

Transaction ID: 70627.C19178

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)
Melva Herum

Mailing Address 1711 N 15th St

City State Zip Code
Fort Dodge IA 50501-7603

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

Name of Employer retired Occupation
Teacher

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 70627.C19032

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) ▶ **775.00**

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 21 / 100
	<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 Hicks

Mailing Address 744 110th St

City State Zip Code
Hampton IA 50441-7551

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

Name of Employer State of Iowa Occupation Appraiser

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt
MM / DD / YYYY
05 / 24 / 2007

Transaction ID: 70627.C19158

Amount of Each Receipt this Period
300.00

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

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

Mailing Address 31194 Napa Valley Crst

City State Zip Code
Waukee IA 50263

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

Name of Employer Freedom Financial Bank Occupation Banker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt
MM / DD / YYYY
06 / 06 / 2007

Transaction ID: 70627.C19243

Amount of Each Receipt this Period
550.00

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 50265-1539

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

Name of Employer Sullivan & Ward Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2007

Transaction ID: 70627.C19063

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) ► **1000.00**

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 / 100
	<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)
Lurlin Hoelscher

Mailing Address 2271 Vail Ave

City Williams State IA Zip Code 50271-7563

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 7

Transaction ID: 70627.C18997

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)
Lurlin Hoelscher

Mailing Address 2271 Vail Ave

City Williams State IA Zip Code 50271-7563

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1100.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 7

Transaction ID: 70627.C19107

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)
Sandra Hoenig

Mailing Address 1216 25th St

City Ames State IA Zip Code 50010-4427

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

Name of Employer Self-Employed Occupation Journalism

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: 70627.C19045

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) ► 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 23 / 100
	<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)
Glenda 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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 70627.C19007

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
Glenda 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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1150.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 70627.C19008

Amount of Each Receipt this Period
-1150.00

Reattribution Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
REATTRIBUTE TO SPOUSE

C. 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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1150.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 70627.C19009

Amount of Each Receipt this Period
1150.00

Reattribution Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
REATTRIBUE FROM SPOUSE

SUBTOTAL of Receipts This Page (optional) ▶ 2300.00

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 24 / 100
	<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)
Deborah Hunt-Repp

Mailing Address 20195 H Ave

City State Zip Code
Perry IA 50220-6271

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

Name of Employer
No Employer

Occupation
Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2007

Transaction ID: 70627.C19062

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)
Bertha Hunter

Mailing Address 610 Barnard St # A

City State Zip Code
Sloan IA 51055-7732

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

Name of Employer
retired

Occupation
Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2007

Transaction ID: 70627.C19055

Amount of Each Receipt this Period
150.00

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

C. Full Name (Last, First, Middle Initial)
Hunton & Williams LLP

Mailing Address 1900 K St NW

City State Zip Code
Washington DC 20006-1110

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

Name of Employer

Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
04 / 17 / 2007

Transaction ID: 70627.C18996

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) ► **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: <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 25 / 100
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NAME OF COMMITTEE (In Full)
Latham For Congress

A. 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 Self-Employed Occupation
Realtor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 70627.C19041

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)
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: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

325.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 3 / 2 0 0 7

Transaction ID: 70627.C19149

Amount of Each Receipt this Period
150.00

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

C. Full Name (Last, First, Middle Initial)
Paul H Johnson

Mailing Address 110 S McCoy St

City State Zip Code
Algona IA 50511-2209

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

Name of Employer retired Occupation
Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 7

Transaction ID: 70627.C19130

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)	▶	1400.00
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 26 / 100
	<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 Johnson

Mailing Address PO Box 267

City State Zip Code
Belmond IA 50421-0267

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

Name of Employer
Communications 1 Network

Occupation
Chief Financial Officer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2007

Transaction ID: 70627.C19075

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)
John Keast

Mailing Address 12594 Spiller Ln

City State Zip Code
Manassas VA 20112-8831

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

Name of Employer
Cornerstone Government Affairs

Occupation
Vice-President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2007

Transaction ID: 70627.C19135

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)
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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 20 / 2007

Transaction ID: 70627.C19017

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) ► **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 27 / 100
	<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)
Gage Kent

Mailing Address 1600 Oregon Street

City Muscatine State IA Zip Code 52761

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

Name of Employer Muscatine Food Corp. Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 03 / 2007

Transaction ID: 70627.C19101

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)
Gerald Kirke

Mailing Address 5465 Mills Civic Pkwy Ste 400

City West Des Moines State IA Zip Code 50266-5303

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

Name of Employer Kirke-Van Orsdel Occupation Insurance

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 11 / 2007

Transaction ID: 70627.C19314

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)
David Kochel

Mailing Address 730 Polk Blvd

City Des Moines State IA Zip Code 50312-2335

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

Name of Employer Information Requested Occupation Professional

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 11 / 2007

Transaction ID: 70627.C19319

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) ► 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 28 / 100
	<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)
LaVonne Kruse

Mailing Address 503 Indiana Ave

City Iowa Falls State IA Zip Code 50126-1628

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

Name of Employer No Employer Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 7

Transaction ID: 70627.C18983

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)
LaVonne Kruse

Mailing Address 503 Indiana Ave

City Iowa Falls State IA Zip Code 50126-1628

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

Name of Employer No Employer Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: 70627.C19257

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)
Steven Lasky

Mailing Address 3020 SW 24th Ct

City Ankeny State IA Zip Code 50023-5404

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

Name of Employer Advanced Analytical Tech Occupation CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 0 7

Transaction ID: 70627.C19394

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) ► 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 29 / 100
	<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 Latham

Mailing Address 1468 Balsam Ave

City State Zip Code
Alexander IA 50420-8005

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

Name of Employer Latham Seeds Occupation Seedsman

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 13 / 2007

Transaction ID: 70627.C18981

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)
Robert Latham

Mailing Address 356 Park Ter SE

City State Zip Code
Cedar Rapids IA 52403-2820

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

Name of Employer Latham & Associates Occupation Economist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 03 / 2007

Transaction ID: 70627.C19082

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)
Willard Latham

Mailing Address 137 180th St

City State Zip Code
Alexander IA 50420-8028

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

Name of Employer Latham Seeds Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 27 / 2007

Transaction ID: 70627.C19103

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 30 / 100
	<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)
Terry Lutz

Mailing Address 705 1st Ave N

City State Zip Code
Fort Dodge IA 50501-3819

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

Name of Employer McClure Engineering Co Occupation Civil Engineer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
04 / 13 / 2007

Transaction ID: 70627.C18982

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)
Terry Lutz

Mailing Address 705 1st Ave N

City State Zip Code
Fort Dodge IA 50501-3819

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

Name of Employer McClure Engineering Co Occupation Civil Engineer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1125.00

Date of Receipt
MM / DD / YYYY
05 / 11 / 2007

Transaction ID: 70627.C19123

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)
Gerald Lynch

Mailing Address 331 3rd St NW

City State Zip Code
Waucoma IA 52171-9448

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

Name of Employer Lynch Livestock Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2007

Transaction ID: 70706.C19455

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) ► **1625.00**

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 31 / 100
	<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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
04 / 20 / 2007

Transaction ID: 70627.C19031

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)
Robert Malloy

Mailing Address PO Box 128

City State Zip Code
Goldfield IA 50542-0128

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

Name of Employer Occupation
Self-Employed Lawyer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1125.00

Date of Receipt
MM / DD / YYYY
04 / 09 / 2007

Transaction ID: 70413.C18954

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)
Larry McAllister

Mailing Address 308 Ford Rd

City State Zip Code
Emmetsburg IA 50536-1089

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

Name of Employer Occupation
Prairie States Mgmt Company President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
05 / 11 / 2007

Transaction ID: 70627.C19127

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) ► **1625.00**

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 / 100
	<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)
Dwayne McAninch

Mailing Address 8688 G14 Hwy

City State Zip Code
Norwalk IA 50211-9012

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

Name of Employer McAninch Corp. Occupation CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 3 / 2 0 0 7

Transaction ID: 70627.C19099

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)
William Merschman

Mailing Address PO Box 67
808 Starlite Dr.

City State Zip Code
West Point IA 52656-0067

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

Name of Employer Merschman Seed Company Occupation Management

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 4 / 2 0 0 7

Transaction ID: 70627.C19175

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)
John Miller

Mailing Address 3312 Ridgetop Rd

City State Zip Code
Ames IA 50014-4592

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

Name of Employer Skarshaug Testing Lab Occupation Professional

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
375.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 3 / 2 0 0 7

Transaction ID: 70627.C19085

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) ► **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 33 / 100
	<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
301 1st Ave SW

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: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00

Date of Receipt
MM / DD / YYYY
06 / 12 / 2007

Transaction ID: 70627.C19321

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)
Leon Neva

Mailing Address 1404 Fairway Dr

City State Zip Code
Marshalltown IA 50158-3824

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

Name of Employer Self-Employed Occupation
Sales

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 04 / 2007

Transaction ID: 70627.C19111

Amount of Each Receipt this Period
150.00

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

C. Full Name (Last, First, Middle Initial)
Anne Nygaard

Mailing Address PO Box 35
304 3rd St. S

City State Zip Code
Wesley IA 50483-0035

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

Name of Employer Self-Employed Occupation
Agriculture

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2007

Transaction ID: 70706.C19473

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)	▶	550.00
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 / 100
	<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)
Wayne Oler

Mailing Address 270 Heather Ave

City Alden State IA Zip Code 50006-8016

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

Name of Employer retired Occupation Machine Operator/Laborer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008.00

Date of Receipt
05 / 08 / 2007

Transaction ID: 70627.C19117

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)
Cynthia Opheim

Mailing Address PO Box 129

City Postville State IA Zip Code 52162-0129

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

Name of Employer Self-Employed Occupation Professional

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008.00

Date of Receipt
06 / 18 / 2007

Transaction ID: 70627.C19374

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)
John Pappajohn

Mailing Address 24 Foster Dr

City Des Moines State IA Zip Code 50312-2563

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

Name of Employer Self-Equity Dynamiss Occupation Venture Capital

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008.00

Date of Receipt
05 / 29 / 2007

Transaction ID: 70627.C19192

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) ▶ 2100.00

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 / 100
	<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)
Loran Peil

Mailing Address 584 220th St

City State Zip Code
Alexander IA 50420-8049

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

Name of Employer Self-Employed Occupation
Farmer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

150.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2007

Transaction ID: 70627.C19054

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)
Loran Peil

Mailing Address 584 220th St

City State Zip Code
Alexander IA 50420-8049

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

Name of Employer Self-Employed Occupation
Farmer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

275.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2007

Transaction ID: 70706.C19471

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)
Joseph Petrone

Mailing Address 1608 W. Main Street

City State Zip Code
Marshalltown IA 50158

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

Name of Employer retired Occupation
Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

300.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2007

Transaction ID: 70627.C19233

Amount of Each Receipt this Period
300.00

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 36 / 100
	<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)
Marvin Pomerantz

Mailing Address 5 SW 51st St

City State Zip Code
Des Moines IA 50312

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

Name of Employer Occupation
Mid-America Group Chairman & CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 70627.C19022

Amount of Each Receipt this Period
4600.00

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

B. Full Name (Last, First, Middle Initial)
Marvin Pomerantz

Mailing Address 5 SW 51st St

City State Zip Code
Des Moines IA 50312

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

Name of Employer Occupation
Mid-America Group Chairman & CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 70627.C19023

Amount of Each Receipt this Period
-2300.00

Redesignation FROM Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
REDESIGNATE from P08

C. Full Name (Last, First, Middle Initial)
Marvin Pomerantz

Mailing Address 5 SW 51st St

City State Zip Code
Des Moines IA 50312

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

Name of Employer Occupation
Mid-America Group Chairman & CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 70627.C19024

Amount of Each Receipt this Period
2300.00

Redesignation TO Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
REDESIGNATE to G08

SUBTOTAL of Receipts This Page (optional)	▶	4600.00
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 37 / 100
	<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)
Rose Pomerantz

Mailing Address 5 SW 51st Street

City State Zip Code
Des Moines IA 50312

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

Name of Employer No Employer
Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 70627.C19025

Amount of Each Receipt this Period
4600.00

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

B. Full Name (Last, First, Middle Initial)
Rose Pomerantz

Mailing Address 5 SW 51st Street

City State Zip Code
Des Moines IA 50312

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

Name of Employer No Employer
Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 70627.C19026

Amount of Each Receipt this Period
-2300.00

Redesignation FROM Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
REDESIGNATE from P08

C. Full Name (Last, First, Middle Initial)
Rose Pomerantz

Mailing Address 5 SW 51st Street

City State Zip Code
Des Moines IA 50312

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

Name of Employer No Employer
Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 70627.C19027

Amount of Each Receipt this Period
2300.00

Redesignation TO Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
REDESIGNATE to G08

SUBTOTAL of Receipts This Page (optional) ▶ **4600.00**

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 / 100
	<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)
Ken Rasch

Mailing Address 1834 Johnson Ave

City State Zip Code
Fort Dodge IA 50501-8572

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

Name of Employer Self-Employed Occupation
Farmer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 70627.C19018

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)
Ken Rasch

Mailing Address 1834 Johnson Ave

City State Zip Code
Fort Dodge IA 50501-8572

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

Name of Employer Self-Employed Occupation
Farmer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70627.C19211

Amount of Each Receipt this Period
5.00

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

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

Mailing Address 620 Country Club Rd

City State Zip Code
Iowa Falls IA 50126-9539

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

Name of Employer Hawkeye Renewables Occupation
CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3700.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 3 / 2 0 0 7

Transaction ID: 70627.C19084

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)	655.00
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 / 100
	<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 Richards

Mailing Address 3524 16 St

City Arlington State VA Zip Code 22204

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

Name of Employer Cornerstone Government Affairs Occupation Upper Management

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2007

Transaction ID: 70627.C19137

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)
Martha Rodamaker

Mailing Address 225 Pebble Creek Dr

City Mason City State IA Zip Code 50401-8920

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

Name of Employer First Citizens National Bank Occupation Banker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2007

Transaction ID: 70627.C19105

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)
Eldon Roth

Mailing Address 984 Quail Hollow Circle

City Dakota Dunes State SD Zip Code 57049

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

Name of Employer Beef Products, Inc. Occupation CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2007

Transaction ID: 70627.C19121

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional)	3800.00
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 40 / 100
	<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)
Regina Roth

Mailing Address 984 Quail Hollow Circle

City State Zip Code
North Sioux City SD 57049

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

Name of Employer Occupation
Beef Products, Inc. Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 8 / 2 0 0 7

Transaction ID: 70627.C19120

Amount of Each Receipt this Period
2300.00

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

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

Mailing Address 465 Foster Dr

City State Zip Code
Des Moines IA 50312-2513

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

Name of Employer Occupation
Ruan Companies Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 8 / 2 0 0 7

Transaction ID: 70627.C19116

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)
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 Occupation
Rueters Red Power Implement Dealer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 4 / 2 0 0 7

Transaction ID: 70627.C19161

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) ▶ **4300.00**

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 / 100
	<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)
Lee Sargent

Mailing Address 1932 Buchanan Dr

City State Zip Code
Ames IA 50010-4351

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

Name of Employer Occupation
Todd & Sargent CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 70627.C19028

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)
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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 70627.C19030

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)
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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 70627.C19010

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) ► **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 42 / 100
	<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 Shipman

Mailing Address 2417 Barbour Rd

City Falls Church State VA Zip Code 22043

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

Name of Employer Cornerstone Government Affairs Occupation Upper Management

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2007

Transaction ID: 70627.C19136

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)
Nancy Shirk

Mailing Address 1890 Ashleaf Cir

City Waukee State IA Zip Code 50263-8244

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

Name of Employer City of Waukee Occupation Executive Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2007

Transaction ID: 70627.C19398

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)
Larry Southard

Mailing Address 1304 Fairway Dr

City Marshalltown State IA Zip Code 50158-3779

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

Name of Employer Self-Employed Occupation Equipment Dealer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 21 / 2007

Transaction ID: 70627.C19423

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)	▶	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 43 / 100
	<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

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

Mailing Address 1509 165th St.

City State Zip Code
Woolstock IA 50599

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

Name of Employer Occupation
Iowa Commodities Commodities Broker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4600.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 0 7

Transaction ID: 70627.C18980

Amount of Each Receipt this Period
400.00

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

B. Full Name (Last, First, Middle Initial)
Joan Stark

Mailing Address 1509 165th St

City State Zip Code
Woolstock IA 50599

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

Name of Employer Occupation
No Employer Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4600.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 0 7

Transaction ID: 70627.C18979

Amount of Each Receipt this Period
400.00

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

C. Full Name (Last, First, Middle Initial)
Rosalie Strang

Mailing Address 401 Parkland Dr SE

City State Zip Code
Cedar Rapids IA 52403-2032

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

Name of Employer Occupation
retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 0 7

Transaction ID: 70627.C19346

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) ► **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 44 / 100
	<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 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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2007

Transaction ID: 70627.C19069

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)
Charles Sukup

Mailing Address 2418 Vine Ave

City State Zip Code
Dougherty IA 50433-7513

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

Name of Employer Occupation
Sukup Mfg Company Management

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
04 / 18 / 2007

Transaction ID: 70627.C19006

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)
Charles Sukup

Mailing Address 2418 Vine Ave

City State Zip Code
Dougherty IA 50433-7513

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

Name of Employer Occupation
Sukup Mfg Company Management

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2007

Transaction ID: 70627.C19066

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) ► **2250.00**

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 / 100
	<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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 13 / 2007

Transaction ID: 70627.C18965

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)
Allen Taylor

Mailing Address 1001 Woodside Ct

City State Zip Code
Decorah IA 52101-2341

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

Name of Employer Information Requested Occupation
Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2007

Transaction ID: 70627.C19444

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)
Patricia Tomson

Mailing Address 12 Briarstone Ct.

City State Zip Code
Mason City IA 50401

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

Name of Employer No Employer Occupation
Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 27 / 2007

Transaction ID: 70627.C19104

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) ► 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 46 / 100
	<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)
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
Becker Underwood

Occupation
Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2300.00

Date of Receipt
MM / DD / YYYY
05 / 03 / 2007

Transaction ID: 70627.C19098

Amount of Each Receipt this Period
2300.00

Reattribution Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
REATTRIBUTE FROM SPOUSE

B. Full Name (Last, First, Middle Initial)
Roger 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
Becker Underwood

Occupation
CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4600.00

Date of Receipt
MM / DD / YYYY
05 / 03 / 2007

Transaction ID: 70627.C19096

Amount of Each Receipt this Period
4600.00

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

C. Full Name (Last, First, Middle Initial)
Roger 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
Becker Underwood

Occupation
CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2300.00

Date of Receipt
MM / DD / YYYY
05 / 03 / 2007

Transaction ID: 70627.C19097

Amount of Each Receipt this Period
-2300.00

Reattribution Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
REATTRIBUTE TO SPOUSE

SUBTOTAL of Receipts This Page (optional)	▶	4600.00
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 47 / 100
	<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)
Patricia Vanore

Mailing Address 612 N 5th St

City Marshalltown State IA Zip Code 50158-5521

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

Name of Employer retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2007

Transaction ID: 70627.C19113

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)
Mike Voltmer

Mailing Address 408 W Broadway St

City Decorah State IA Zip Code 52101-1742

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

Name of Employer Voltmer Electric Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2007

Transaction ID: 70706.C19490

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)
Stephen Witort

Mailing Address 1047 N. Stuart Street

City Arlington State VA Zip Code 22201

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

Name of Employer 3M Occupation Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 22 / 2007

Transaction ID: 70627.C19201

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) ► 2000.00

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 48 / 100	
	(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

A. Full Name (Last, First, Middle Initial)
Mark Ziemann

Mailing Address 284 Luana Rd

City Postville State IA Zip Code 52162-8531

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	2	/	2	0	0	7

Transaction ID: 70627.C19326

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)	▶	250.00
TOTAL This Period (last page this line number only)	▶	71830.00

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 49 / 100
	<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) A. Action Committee - Rural Electrification		Date of Receipt
Mailing Address 4301 Wilson Blvd		<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2007"/>
City	State	Zip Code
Arlington	VA	22203-1867
FEC ID number of contributing federal political committee.		Transaction ID: 70627.C19431
C C00002972		Amount of Each Receipt this Period
		1000.00
Name of Employer	Occupation	Receipt
Receipt For: 2008	Election Cycle-to-Date ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Agricultural Retailers Assoc. PAC		Date of Receipt
Mailing Address 1156 15th St NW Ste 302		<input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2007"/>
City	State	Zip Code
Washington	DC	20005-1745
FEC ID number of contributing federal political committee.		Transaction ID: 70627.C19197
C C00264770		Amount of Each Receipt this Period
		1000.00
Name of Employer	Occupation	Receipt
Receipt For: 2008	Election Cycle-to-Date ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Am. Council of Engineering Companies PAC		Date of Receipt
Mailing Address 1015 15th St NW Fl 8		<input type="text" value="05"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>
City	State	Zip Code
Washington	DC	20005-2605
FEC ID number of contributing federal political committee.		Transaction ID: 70627.C19224
C C00010868		Amount of Each Receipt this Period
		1000.00
Name of Employer	Occupation	Receipt
Receipt For: 2008	Election Cycle-to-Date ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 100
(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 Bankers Assn BankPAC

Mailing Address 1120 Connecticut Ave NW

City State Zip Code
Washington DC 20036-3905

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 6 / 2 0 0 7

Transaction ID: 70627.C19225

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)
American Bankers Assn BankPAC

Mailing Address 1120 Connecticut Ave NW

City State Zip Code
Washington DC 20036-3905

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 4 / 2 0 0 7

Transaction ID: 70627.C19230

Amount of Each Receipt this Period
3000.00

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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

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

Transaction ID: 70706.C19482

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) ► **8000.00**

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 51 / 100
(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 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: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 7 / 2 0 0 7
Transaction ID: 70706.C19483
 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)
American Dental Political Action Comm
 Mailing Address 1111 14th Street, N.W. - Suite 110
 City State Zip Code
 Washington DC 20005
 FEC ID number of contributing federal political committee. **C** C00000729
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 6 / 2 0 0 7
Transaction ID: 70627.C19410
 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)
American Health Care Association PAC
 Mailing Address 1201 L St NW
 City State Zip Code
 Washington DC 20005-4024
 FEC ID number of contributing federal political committee. **C** C00006080
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 1 / 2 0 0 7
Transaction ID: 70627.C19072
 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) ▶ **5500.00**
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 52 / 100
(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 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: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00

Date of Receipt
MM / DD / YYYY
05 / 22 / 2007
Transaction ID: 70627.C19196
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: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4500.00

Date of Receipt
MM / DD / YYYY
06 / 01 / 2007
Transaction ID: 70627.C19204
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 Maritime Officers
Mailing Address Voluntary Political Action Fund
650 Fourth Avenue
City Brooklyn State NY Zip Code 11232
FEC ID number of contributing federal political committee. **C** C00027532
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
06 / 11 / 2007
Transaction ID: 70627.C19313
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 53 / 100
	<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	

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)
American Society of Anesthesiologists

Mailing Address 520 N Northwest Highway

City State Zip Code
Park Ridge IL 60068-2573

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: 70627.C19119

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)
American Sugar Cane League

Mailing Address PO Box 938

City State Zip Code
Thibodaux LA 70302-0938

FEC ID number of contributing federal political committee. **C** C00081414

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 7

Transaction ID: 70627.C19435

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 Sugarbeet Growers Assn PAC

Mailing Address 1156 15th St NW Ste 1101

City State Zip Code
Washington DC 20005-1756

FEC ID number of contributing federal political committee. **C** C00167684

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: 70706.C19484

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: (check only one)	PAGE 54 / 100
	<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	

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)
American Veterinary Medical Assn PAC

Mailing Address 1910 Sunderland PI NW

City Washington State DC Zip Code 20036-1608

FEC ID number of contributing federal political committee. **C** C00114132

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 2 / 2 0 0 7

Transaction ID: 70627.C19194

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)
AMPAC/CBT-AuctionMarkets-ChicagoBdTrade

Mailing Address 141 W Jackson

City Chicago State IL Zip Code 60604

FEC ID number of contributing federal political committee. **C** C00059832

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 1 / 2 0 0 7

Transaction ID: 70627.C19312

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)
Build PAC- Natl Assn of Home Builders

Mailing Address Natl Assn of Home Builders
1201 15th St NW

City Washington State DC Zip Code 20005-2800

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 6 / 2 0 0 7

Transaction ID: 70627.C19412

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:	PAGE 55 / 100
	(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

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)
COALPAC of the Natl Mining Assoc

Mailing Address 101 Constitution Ave NW Ste 500

City State Zip Code
Washington DC 20001-2133

FEC ID number of contributing federal political committee. **C** C00109819

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 2 / 2 0 0 7

Transaction ID: 70627.C19195

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)
College of American Pathologists PAC

Mailing Address 1350 I St NW Ste 590

City State Zip Code
Washington DC 20005-3305

FEC ID number of contributing federal political committee. **C** C00274944

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 2 / 2 0 0 7

Transaction ID: 70627.C19198

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)
DLA Piper PAC

Mailing Address 1200 19th St NW

City State Zip Code
Washington DC 20036-2402

FEC ID number of contributing federal political committee. **C** C00151340

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 2 / 2 0 0 7

Transaction ID: 70627.C19153

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) ► **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 56 / 100
	<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	

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) Employees of Northrup Grumman PAC Mailing Address 520 S. Grand Avenue Suite 700 City State Zip Code Los Angeles CA 90071 FEC ID number of contributing federal political committee. C C00088591 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 Transaction ID: 70627.C19112 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)
---	--	---

B. Full Name (Last, First, Middle Initial) Farm Credit Council 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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 7 Transaction ID: 70715.C19497 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)
---	--	---

C. Full Name (Last, First, Middle Initial) Farmers Mutual Hail PAC Mailing Address 6785 Westown Pkwy Oscar Deardorff City State Zip Code West Des Moines IA 50266 FEC ID number of contributing federal political committee. C C00117614 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 750.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 9 / 2 0 0 7 Transaction ID: 70706.C19475 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)
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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 57 / 100
(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)
Food Marketing Institute PAC

Mailing Address 655 15th St NW Ste 700

City State Zip Code
Washington DC 20005-5701

FEC ID number of contributing federal political committee. **C** C00014555

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 70627.C19156

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)
FPL PAC-Florida Power & Light Co

Mailing Address 700 Universe Blvd.
PO Box 14000

City State Zip Code
Juno Beach FL 33408-0420

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: 70706.C19462

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)
General Dynamics Voluntary Pol.Cont.Plan

Mailing Address 2941 Fairview Park Dr Ste 100

City State Zip Code
Falls Church VA 22042-4541

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 0 / 2 0 0 7

Transaction ID: 70627.C18994

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 58 / 100
	(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)
GlaxoSmithKline PAC

Mailing Address 5 Moore Dr
Research Triangle Park

City State Zip Code
Durham NC 27709

FEC ID number of contributing federal political committee. **C** C00199703

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2007

Transaction ID: 70627.C19157

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)
Honeywell International PAC

Mailing Address 101 Constitution Ave NW Ste 500W

City State Zip Code
Washington DC 20001-2177

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 22 / 2007

Transaction ID: 70627.C19193

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)
ICBPAC/Independent Bankers PAC

Mailing Address 1615 L St NW Ste 900

City State Zip Code
Washington DC 20036-5623

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 03 / 2007

Transaction ID: 70627.C19102

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)	▶	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 59 / 100
(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)
ICBPAC/Independent Bankers PAC

Mailing Address 1615 L St NW Ste 900

City State Zip Code
Washington DC 20036-5623

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 70627.C19154

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)
Iowa Construction Industry PAC

Mailing Address 701 E Court Ave Ste B Suite B

City State Zip Code
Des Moines IA 50309-4941

FEC ID number of contributing federal political committee. **C** C00068452

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 8 / 2 0 0 7

Transaction ID: 70627.C19378

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)
Land O Lakes PAC

Mailing Address PO Box 64101

City State Zip Code
Saint Paul MN 55164-0101

FEC ID number of contributing federal political committee. **C** C00009423

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

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

Transaction ID: 70706.C19461

Amount of Each Receipt this Period
2500.00

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: (check only one)	PAGE 60 / 100
	<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

A. Full Name (Last, First, Middle Initial)
Merck PAC

Mailing Address 601 Pennsylvania Ave NW Ste 1200

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00097485

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2007

Transaction ID: 70706.C19463

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)
Meredith Employees Fund for Better Govt

Mailing Address Jerry Hadenfeldt
1716 Locust St

City Des Moines State IA Zip Code 50309-3023

FEC ID number of contributing federal political committee. **C** C00010520

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 24 / 2007

Transaction ID: 70627.C19177

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)
MidAmerican Energy Executive PAC

Mailing Address 666 Grand Ave
P.O. Box 657

City Des Moines State IA Zip Code 50303-0657

FEC ID number of contributing federal political committee. **C** C00324483

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 22 / 2007

Transaction ID: 70627.C19152

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 61 / 100
	(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)
National Cattlemens Beef Assn PAC

Mailing Address 9110 E. Nichols Ave.

City State Zip Code
Englewood CO 80112

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 2 / 2 0 0 7

Transaction ID: 70627.C19151

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 Chicken Council PAC

Mailing Address 1015 15th St NW Ste 930

City State Zip Code
Washington DC 20005-2622

FEC ID number of contributing federal political committee. **C** C00034272

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 5 / 2 0 0 7

Transaction ID: 70627.C19228

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)
Nat'l Cable & Telecommunications Assn PAC

Mailing Address 25 Massachusetts Ave NW Ste 100

City State Zip Code
Washington DC 20001-1434

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

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

Transaction ID: 70706.C19485

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: PAGE 62 / 100
(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: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7
Transaction ID: 70706.C19476
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)
Pork PAC / Natl Pork Producers
Mailing Address PO Box 10383
122 CSt, Nw, Suite 875, DC
City Des Moines State IA Zip Code 50306-0383
FEC ID number of contributing federal political committee. **C** C00201871
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 0 / 2 0 0 7
Transaction ID: 70627.C19139
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)
Power PAC - Edison Electric Institute
Mailing Address 701 Pennsylvania Ave. NW
City Washington State DC Zip Code 20004-2696
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 0 7
Transaction ID: 70627.C18995
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 63 / 100
	<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) A. Prairie Island Tribal Council		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7	
Mailing Address 5636 Sturgeon Lake Rd		Transaction ID: 70627.C19199	
City State Zip Code Welch MN 55089-9635	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 Occupation	Election Cycle-to-Date 1000.00		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Professionals PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7	
Mailing Address 8404 Indian Hills Dr		Transaction ID: 70627.C19200	
City State Zip Code Omaha NE 68114-4049	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00103903		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date 1000.00		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. Qwest PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 7	
Mailing Address 607 14th St Ste 950		Transaction ID: 70627.C19226	
City State Zip Code Denver CO 80202-4233	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00237156		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date 1000.00		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

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 64 / 100
	(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) A. Rain & Hail Insurance Society PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2007
Mailing Address 9200 Northpark Dr Ste 300		Transaction ID: 70627.C19413
City State Zip Code Johnston IA 50131-3006	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00279505		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. RJReynolds PAC		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2007
Mailing Address PO Box 718 401 N Main St.		Transaction ID: 70627.C19155
City State Zip Code Winston Salem NC 27102-0718	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00042002		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) C. Rockwell Collins Good Government		Date of Receipt M M / D D / Y Y Y Y 05 / 28 / 2007
Mailing Address 1300 Wilson Blvd Ste 200		Transaction ID: 70627.C19227
City State Zip Code Arlington VA 22209-2307	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00365684		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1500.00	

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 65 / 100
	(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) A. Securities Industry & Financial Mkts Ass Mailing Address 1425 K St NW FI 7		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2007
City State Zip Code Washington DC 20005-3684		Transaction ID: 70706.C19481
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Occupation		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00

Full Name (Last, First, Middle Initial) B. Smithfield Foods PAC Mailing Address 499 Park Ave Ste 600		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2007
City State Zip Code New York NY 10022-1240		Transaction ID: 70627.C19140
FEC ID number of contributing federal political committee. C C00359075		Amount of Each Receipt this Period 1000.00
Name of Employer Occupation		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00

Full Name (Last, First, Middle Initial) C. Syngenta Corporation PAC Mailing Address 2 Righter Parkway P.O. Box 15458		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2007
City State Zip Code Wilmington DE 19850-5458		Transaction ID: 70627.C19138
FEC ID number of contributing federal political committee. C C00363945		Amount of Each Receipt this Period 1000.00
Name of Employer Occupation		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00

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 66 / 100
	<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) A. United Parcel Service PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2007	
Mailing Address 55 Glenlake Pkwy NE		Transaction ID: 70627.C19411	
City State Zip Code Atlanta GA 30328-3474	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C C00064766		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. United Parcel Service PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2007	
Mailing Address 55 Glenlake Pkwy NE		Transaction ID: 70727.C19564	
City State Zip Code Atlanta GA 30328-3474	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C C00064766		In-Kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) C. United Parcel Service PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2007	
Mailing Address 55 Glenlake Pkwy NE		Transaction ID: 70727.C19565	
City State Zip Code Atlanta GA 30328-3474	Amount of Each Receipt this Period 528.00		
FEC ID number of contributing federal political committee. C C00064766		In-Kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1228.00		

SUBTOTAL of Receipts This Page (optional) ▶	1228.00
TOTAL 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:	PAGE 67 / 100
	(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)
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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2007

Transaction ID: 70706.C19494

Amount of Each Receipt this Period
3772.00

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

B. Full Name (Last, First, Middle Initial)
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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2007

Transaction ID: 70706.C19495

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)
US Cuba Democracy PAC

Mailing Address 1200 W 49th St

City Hialeah State FL Zip Code 33012-3217

FEC ID number of contributing federal political committee. **C** C00387720

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2007

Transaction ID: 70706.C19477

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)	▶	5272.00
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 68 / 100
	(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) A. Verizon Communications Inc.		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address Good Govt Club 1717 Arch St # 23-S		Transaction ID: 70413.C18961
City Philadelphia State PA Zip Code 19103-2713	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00186288		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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Verizon Communications Inc.		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address Good Govt Club 1717 Arch St # 23-S		Transaction ID: 70706.C19451
City Philadelphia State PA Zip Code 19103-2713	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00186288		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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. WELLS FARGO EMPLOYEE PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 7
Mailing Address Norwest Center Sixth & Marquette		Transaction ID: 70627.C19433
City Minneapolis State MN Zip Code 55479-1032	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00034595		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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

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 69 / 100
	<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

A. Full Name (Last, First, Middle Initial)
Wyeth Good Government Fund

Mailing Address 5 Giralda Farms

City State Zip Code
Madison NJ 07940-1027

FEC ID number of contributing federal political committee. **C** C00115303

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 70627.C19203

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
XCEL Energy Employee PAC

Mailing Address 1225 17th St Ste 1200

City State Zip Code
Denver CO 80202-5503

FEC ID number of contributing federal political committee. **C** C00107771

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 70627.C19073

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)	▶	3500.00
TOTAL This Period (last page this line number only)	▶	88500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 70 / 100	
	(check only one)			
<input type="checkbox"/> 11a	<input checked="" 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
--

Full Name (Last, First, Middle Initial) A. IA Presidential Watch	
Mailing Address P.O. Box 171	
City Webster City	State IA
Zip Code 50595	
FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00

Date of Receipt MM / DD / YYYY 06 / 16 / 2007
Transaction ID: 70627.C19414
Amount of Each Receipt this Period 100.00
Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number only)	100.00

**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 71 / 100
	<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

Full Name (Last, First, Middle Initial) A. Mentzer Media Services		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 600 Fairmount Ave. Suite 306		Transaction ID: 70627.C19052	
City State Zip Code Towson MD 21286-	Amount of Each Receipt this Period 9583.17		
FEC ID number of contributing federal political committee. C		Offsets to Operating Expenditure <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 9583.17		

Full Name (Last, First, Middle Initial) B. Qwest Communications		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address Political Accounts 70 West 4th St., 1st Floor		Transaction ID: 70627.C19033	
City State Zip Code Saint Paul MN 55102-	Amount of Each Receipt this Period 231.21		
FEC ID number of contributing federal political committee. C		Offsets to Operating Expenditure <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1131.21		

Full Name (Last, First, Middle Initial) C. Qwest Communications		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address Political Accounts 70 West 4th St., 1st Floor		Transaction ID: 70627.C19231	
City State Zip Code Saint Paul MN 55102-	Amount of Each Receipt this Period 49.89		
FEC ID number of contributing federal political committee. C		Offsets to Operating Expenditure <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1181.10		

SUBTOTAL of Receipts This Page (optional) ▶	9864.27
TOTAL This Period (last page this line number only) ▶	9864.27

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 / 100
	<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) A. First Citizens National Bank		Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2007
Mailing Address P.O. Box 268		Transaction ID: 70627.C19081
City State Zip Code Clarion IA 50525-	Amount of Each Receipt this Period 191.38	
FEC ID number of contributing federal political committee. C	Other 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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 1217.61		

Full Name (Last, First, Middle Initial) B. First Citizens National Bank		Date of Receipt M M / D D / Y Y Y Y Y 05 / 31 / 2007
Mailing Address P.O. Box 268		Transaction ID: 70627.C19232
City State Zip Code Clarion IA 50525-	Amount of Each Receipt this Period 272.54	
FEC ID number of contributing federal political committee. C	Other 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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 1490.15		

Full Name (Last, First, Middle Initial) C. First Citizens National Bank		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2007
Mailing Address P.O. Box 268		Transaction ID: 70706.C19496
City State Zip Code Clarion IA 50525-	Amount of Each Receipt this Period 1647.08	
FEC ID number of contributing federal political committee. C	Other 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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 3137.23		

SUBTOTAL of Receipts This Page (optional) ▶	2111.00
TOTAL This Period (last page this line number only) ▶	2111.00

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

A. Bankers Advertising Company Full Name (Last, First, Middle Initial) Mailing Address PO Box 2687 2800 Hwy 6 East City Iowa City State IA Zip Code 52244-2687 Purpose of Disbursement PROMOTIONAL MATERIAL 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) ▼		Transaction ID: 70413.E4160 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7 Amount of Each Disbursement this Period 802.42 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PROMOTIONAL MATERIAL
---	--	---

B. Bogart Associates Full Name (Last, First, Middle Initial) Mailing Address 1200 Trinity Drive City Alexandria State VA Zip Code 22314- 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) ▼		Transaction ID: 70413.E4156 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7 Amount of Each Disbursement this Period 161.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SEE BELOW
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C. Congressional Liquors Full Name (Last, First, Middle Initial) Mailing Address 404 1st Street SE City Washington State DC Zip Code 20003- Purpose of Disbursement BEVERAGES FOR FUNDRAISER EVENT 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) ▼		Transaction ID: 70413.E4157 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7 Amount of Each Disbursement this Period 161.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: BEVERAGES FOR FUNDRAISER EVENT
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SUBTOTAL of Disbursements This Page (optional) ▶	964.24
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)

<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. Bogart Associates		Transaction ID: 70413.E4167 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 39.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Alexandria State VA Zip Code 22314-	Purpose of Disbursement MEETING SUPPLIES 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) ▼	MEETING SUPPLIES

Full Name (Last, First, Middle Initial) B. Bogart Associates		Transaction ID: 70627.E4193 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 6200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Alexandria State VA Zip Code 22314-	Purpose of Disbursement FUNDRAISING COMMISSIONS 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) ▼	FUNDRAISING COMMISSIONS

Full Name (Last, First, Middle Initial) C. Bogart Associates		Transaction ID: 70706.E4215 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 1245.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Alexandria State VA Zip Code 22314-	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) ▼	SEE BELOW

SUBTOTAL of Disbursements This Page (optional) ▶	7484.62
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)

<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. Bogart Associates		Transaction ID: 70715.E4222 Date of Disbursement 06 / 29 / 2007
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 404.39
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 POSTAGE & COURIER CHARGES		[MEMO ITEM] MEMO: POSTAGE & COURIER CHARGES
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. Congressional Liquors		Transaction ID: 70715.E4223 Date of Disbursement 06 / 29 / 2007
Mailing Address 404 1st Street SE		Amount of Each Disbursement this Period 759.70
City Washington State DC Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement BEVERAGES FOR EVENT		[MEMO ITEM] MEMO: BEVERAGES FOR EVENT
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) C. Bon Vivant Catering		Transaction ID: 70627.E4201 Date of Disbursement 06 / 05 / 2007
Mailing Address 6330 Dunman Way		Amount of Each Disbursement this Period 1567.50
City Alexandria State VA Zip Code 22315-5505	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISER MEALS		FUNDRAISER MEALS
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) ▶	1567.50
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)

<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. Natl Republican Club of Capitol Hill		Transaction ID: 70413.E4159 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 336.60 <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 MEALS FOR FUNDRAISER Candidate Name <input type="checkbox"/> 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) ▼	MEALS FOR FUNDRAISER

Full Name (Last, First, Middle Initial) B. Capitol Resources		Transaction ID: 70413.E4161 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 5883.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Brooklyn State IA Zip Code 52211-	Purpose of Disbursement SEE BELOW Candidate Name <input type="checkbox"/> 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) C. Capitol Resources		Transaction ID: 70413.E4163 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 4502.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Brooklyn State IA Zip Code 52211-	Purpose of Disbursement FUNDRAISING COMMISSIONS Candidate Name <input type="checkbox"/> 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) ▼	[MEMO ITEM] MEMO: FUNDRAISING COMMISSIONS

SUBTOTAL of Disbursements This Page (optional) ▶	6220.59
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)

<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. Capitol Resources		Transaction ID: 70413.E4162 Date of Disbursement MM / DD / YYYY 04 / 13 / 2007
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 456.05
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 PRINT MATERIALS/MILEAGE	Candidate Name	[MEMO ITEM] MEMO: PRINT MATERIALS/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) ▼	

Full Name (Last, First, Middle Initial) B. Marvin Gardens		Transaction ID: 70413.E4165 Date of Disbursement MM / DD / YYYY 04 / 13 / 2007
Mailing Address 809 Central Ave		Amount of Each Disbursement this Period 254.40
City Fort Dodge State IA Zip Code 50501-3936	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FOOD FOR FUNDRAISER EVENT	Candidate Name	[MEMO ITEM] MEMO: FOOD FOR FUNDRAISER EVENT
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) C. Sams Club		Transaction ID: 70413.E4166 Date of Disbursement MM / DD / YYYY 04 / 13 / 2007
Mailing Address South Duff		Amount of Each Disbursement this Period 79.29
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 FOOD FOR FUNDRAISER EVENT	Candidate Name	[MEMO ITEM] MEMO: FOOD FOR FUNDRAISER EVENT
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) ▶	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 78 / 100

<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

A. US Postal Service

Full Name (Last, First, Middle Initial)
Mailing Address Main Post Office

City Brooklyn State IA Zip Code 52211-

Purpose of Disbursement
POSTAGE FOR FUNDRAISING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 70413.E4164
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: POSTAGE FOR FUNDRAISING

B. Capitol Resources

Full Name (Last, First, Middle Initial)
Mailing Address 700 East Pleasant St.
P.O. Box 257

City Brooklyn State IA Zip Code 52211-

Purpose of Disbursement
SEE BELOW

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 70627.E4186
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SEE BELOW

C. Capitol Resources

Full Name (Last, First, Middle Initial)
Mailing Address 700 East Pleasant St.
P.O. Box 257

City Brooklyn State IA Zip Code 52211-

Purpose of Disbursement
PRINTING & MILEAGE FOR FUNDRAISERS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 70627.E4188
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PRINTING & MILEAGE
FOR FUNDRAISERS

SUBTOTAL of Disbursements This Page (optional)

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)

<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. Capitol Resources		Transaction ID: 70627.E4187 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 4137.50
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 FUNDRAISING COMMISSIONS	Candidate Name	[MEMO ITEM] 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. US Postal Service		Transaction ID: 70627.E4189 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address Main Post Office		Amount of Each Disbursement this Period 916.80
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	Candidate Name	[MEMO ITEM] 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) C. Capitol Resources		Transaction ID: 70627.E4210 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 7
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 5131.20
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5131.20
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)

<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. Capitol Resources		Transaction ID: 70627.E4211 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 7
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 134.70
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 PRINTING & MILEAGE COSTS	Candidate Name	[MEMO ITEM] MEMO: PRINTING & MILEAGE COSTS
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. Capitol Resources		Transaction ID: 70715.E4221 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 7
Mailing Address 700 East Pleasant St. P.O. Box 257		Amount of Each Disbursement this Period 4016.50
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 FINDRAISING COMMISSIONS	Candidate Name	[MEMO ITEM] MEMO: FINDRAISING 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) C. US Postal Service		Transaction ID: 70627.E4212 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 7
Mailing Address Main Post Office		Amount of Each Disbursement this Period 980.00
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 POSTAGE FOR MAY MAILINGS	Candidate Name	[MEMO ITEM] MEMO: POSTAGE FOR MAY MAILINGS
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) ▶	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)

<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. Christian Printers, Inc.		Transaction ID: 70627.E4176 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 1411 21st Street		Amount of Each Disbursement this Period 1404.80
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 LTRHD ENVELOPES	Candidate Name	LTRHD ENVELOPES
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. Christian Printers, Inc.		Transaction ID: 70627.E4190 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 1411 21st Street		Amount of Each Disbursement this Period 2382.74
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 LETTERHEAD INVITATIONS ENV.	Candidate Name	LETTERHEAD INVITATIONS ENV.
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) C. First Bankcard		Transaction ID: 70627.E4174 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address P.O. Box 2814		Amount of Each Disbursement this Period 1820.84
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 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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5608.38
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)

<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. Elys Lockup Storage		Transaction ID: 70627.E4183 Date of Disbursement 04 / 15 / 2007	
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) ▼	[MEMO ITEM] MEMO: MONTHLY STORAGE	

Full Name (Last, First, Middle Initial) B. Staples		Transaction ID: 70627.E4182 Date of Disbursement 04 / 15 / 2007	
Mailing Address 1333 Buckeye Road		Amount of Each Disbursement this Period 60.99	
City Ames State IA Zip Code 50010-	Purpose of Disbursement OFFICE SUPPLIES	<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) ▼	[MEMO ITEM] MEMO: OFFICE SUPPLIES	

Full Name (Last, First, Middle Initial) C. US Airways		Transaction ID: 70627.E4178 Date of Disbursement 04 / 15 / 2007	
Mailing Address 2345 Crystal Dr		Amount of Each Disbursement this Period 1339.59	
City Arlington State VA Zip Code 22227-0001	Purpose of Disbursement AIR TRAVEL	<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) ▼	[MEMO ITEM] MEMO: AIR TRAVEL	

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)

<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. United States Post Office		Transaction ID: 70627.E4181 Date of Disbursement 04 / 15 / 2007	
Mailing Address 115 1st ST NE		Amount of Each Disbursement this Period 79.67	
City Clarion State IA Zip Code 50525-	Purpose of Disbursement POSTAGE	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) ▼	[MEMO ITEM] MEMO: POSTAGE	

Full Name (Last, First, Middle Initial) B. First Bankcard		Transaction ID: 70627.E4194 Date of Disbursement 05 / 15 / 2007	
Mailing Address P.O. Box 2814		Amount of Each Disbursement this Period 85.60	
City Omaha State NE Zip Code 68103-2814	Purpose of Disbursement SEE BELOW	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) ▼	SEE BELOW	

Full Name (Last, First, Middle Initial) C. Elys Lockup Storage		Transaction ID: 70627.E4195 Date of Disbursement 05 / 15 / 2007	
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	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) ▼	[MEMO ITEM] MEMO: MONTHLY STORAGE	

SUBTOTAL of Disbursements This Page (optional) ▶	85.60
TOTAL 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) A. First Bankcard		Transaction ID: 70627.E4205 Date of Disbursement 06 / 05 / 2007
Mailing Address P.O. Box 2814		Amount of Each Disbursement this Period 105.60
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 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. Elys Lockup Storage		Transaction ID: 70627.E4206 Date of Disbursement 06 / 05 / 2007
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	[MEMO ITEM] 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) ▼	

Full Name (Last, First, Middle Initial) C. First Citizens National Bank		Transaction ID: 70627.E4184 Date of Disbursement 04 / 30 / 2007
Mailing Address P.O. Box 268		Amount of Each Disbursement this Period 78.73
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 BANK/CC FEES	Candidate Name	MONTHLY BANK/CC 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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	184.33
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)

<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. First Citizens National Bank		Transaction ID: 70627.E4207 Date of Disbursement 05 / 31 / 2007
Mailing Address P.O. Box 268		Amount of Each Disbursement this Period 153.98
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 BANK/CC CHARGES	Candidate Name	MONTHLY BANK/CC CHARGES
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. First Citizens National Bank		Transaction ID: 70706.E4219 Date of Disbursement 06 / 30 / 2007
Mailing Address P.O. Box 268		Amount of Each Disbursement this Period 421.05
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 BANK/CC CHARGES	Candidate Name	MONTHLY BANK/CC CHARGES
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) C. IA Workforce Development		Transaction ID: 70413.E4168 Date of Disbursement 04 / 13 / 2007
Mailing Address 1000 East Grand Avenue		Amount of Each Disbursement this Period 29.70
City Des Moines State IA Zip Code 50309-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement 1ST QTR 2007 SUTA	Candidate Name	1ST QTR 2007 SUTA
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) ▶	604.73
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)

<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. IRS United States Treasury		Transaction ID: 70706.E4220 Date of Disbursement 04 / 04 / 2007	
Mailing Address 5800 E Bannister Rd		Amount of Each Disbursement this Period 413.14	
City Kansas City State MO Zip Code 64134-	Purpose of Disbursement 941 DEPOSIT - 1ST QTR	<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) ▼	941 DEPOSIT - 1ST QTR	

Full Name (Last, First, Middle Initial) B. Iowans For Nussle		Transaction ID: 70627.E4191 Date of Disbursement 05 / 15 / 2007	
Mailing Address PO Box 1153		Amount of Each Disbursement this Period 2150.55	
City Cedar Rapids State IA Zip Code 52406-1153	Purpose of Disbursement MAILING LISTS	<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) ▼	MAILING LISTS	

Full Name (Last, First, Middle Initial) C. Bowermaster Group		Transaction ID: 70627.E4208 Date of Disbursement 06 / 13 / 2007	
Mailing Address 1529 41st St		Amount of Each Disbursement this Period 900.00	
City Windsor Hts State IA Zip Code 50311-2521	Purpose of Disbursement FUNDRAISER ENTERTAINMENT	<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) ▼	FUNDRAISER ENTERTAINMENT	

SUBTOTAL of Disbursements This Page (optional) ▶	3463.69
TOTAL 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) A. Republican Party Of Iowa		Transaction ID: 70413.E4158 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 621 E. 9th St.		Amount of Each Disbursement this Period 750.00
City Des Moines State IA Zip Code 50309-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISER CONTRIBUTION	Candidate Name	FUNDRAISER CONTRIBUTION
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. Elizabeth Severson		Transaction ID: 70627.E4177 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 1610 Obrien Ave		Amount of Each Disbursement this Period 623.36
City Belmont State IA Zip Code 50421-7500	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL	Candidate Name	PAYROLL
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) C. Elizabeth Severson		Transaction ID: 70627.E4200 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 7
Mailing Address 1610 Obrien Ave		Amount of Each Disbursement this Period 498.69
City Belmont State IA Zip Code 50421-7500	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL	Candidate Name	PAYROLL
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) ▶	1872.05
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)

<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. Elizabeth Severson		Transaction ID: 70706.E4216 Date of Disbursement 06 / 29 / 2007
Mailing Address 1610 Obrien Ave		Amount of Each Disbursement this Period 547.17
City Belmont State IA Zip Code 50421-7500	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL	Category/Type	PAYROLL
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Star Crossed Studios		Transaction ID: 70627.E4185 Date of Disbursement 05 / 15 / 2007
Mailing Address PO Box 585		Amount of Each Disbursement this Period 238.75
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 WEB PAGE	Category/Type	UPDATE WEB PAGE
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Sundquist Anthony, LLC		Transaction ID: 70627.E4214 Date of Disbursement 06 / 19 / 2007
Mailing Address 51 Louisiana Ave NW		Amount of Each Disbursement this Period 200.00
City Washington State DC Zip Code 20001-2105	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement 20070522 RENTAL FOR FUNDRAISER	Category/Type	20070522 RENTAL FOR FUNDRAISER
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	985.92
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)

<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. United Parcel Service PAC		Transaction ID: 70727.C19564IK Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 7
Mailing Address 55 Glenlake Pkwy NE		Amount of Each Disbursement this Period 200.00
City Atlanta State GA Zip Code 30328-3474	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement RENTAL FOR FACILITY	Candidate Name	IN KIND: RENTAL FOR FACILITY
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. United Parcel Service PAC		Transaction ID: 70727.C19565IK Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address 55 Glenlake Pkwy NE		Amount of Each Disbursement this Period 528.00
City Atlanta State GA Zip Code 30328-3474	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CATERING - SEE BELOW	Candidate Name	IN KIND: CATERING - 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) C. Bank Card Services		Transaction ID: 072720019E298 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 1 9 9 6
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 1781.50
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE	Candidate Name	[MEMO ITEM] MEMO: CREDIT CARD FEE
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) ▶	728.00
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)

<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. Bank Card Services		Transaction ID: 072720019E309 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 1 9 9 7
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 978.48
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE Candidate Name		[MEMO ITEM] MEMO: CREDIT CARD FEE
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. Bank Card Services		Transaction ID: 072720019E316 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 1 9 9 8
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 126.27
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE Candidate Name		[MEMO ITEM] MEMO: CREDIT CARD FEE
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) C. Bank Card Services		Transaction ID: 072720019E321 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 1 9 9 9
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 1452.68
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE Candidate Name		[MEMO ITEM] MEMO: CREDIT CARD FEE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	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)

<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)		Transaction ID: 072720019E320																					
A. Bank Card Services		Date of Disbursement																					
Mailing Address Security Natl Bank Payment Processing		<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>3</td><td></td><td>0</td><td>5</td><td></td><td>1</td><td>9</td><td>9</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		1	9	9	9
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		0	5		1	9	9	9														
City Milwaukee State WI Zip Code 53288-0200		Amount of Each Disbursement this Period																					
Purpose of Disbursement CREDIT CARD FEE		<table border="1"> <tr> <td colspan="10">33.00</td> </tr> </table>		33.00																			
33.00																							
Candidate Name		<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		[MEMO ITEM]																					
State: District:		MEMO: CREDIT CARD FEE																					
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							

Full Name (Last, First, Middle Initial)		Transaction ID: 072720019E313																					
B. Bank Card Services		Date of Disbursement																					
Mailing Address Security Natl Bank Payment Processing		<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>7</td><td></td><td>0</td><td>1</td><td></td><td>1</td><td>9</td><td>9</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	1		1	9	9	8
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		0	1		1	9	9	8														
City Milwaukee State WI Zip Code 53288-0200		Amount of Each Disbursement this Period																					
Purpose of Disbursement CREDIT CARD FEE		<table border="1"> <tr> <td colspan="10">6697.76</td> </tr> </table>		6697.76																			
6697.76																							
Candidate Name		<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		[MEMO ITEM]																					
State: District:		MEMO: CREDIT CARD FEE																					
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							

Full Name (Last, First, Middle Initial)		Transaction ID: 072720019E314																					
C. Bank Card Services		Date of Disbursement																					
Mailing Address Security Natl Bank Payment Processing		<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>7</td><td></td><td>3</td><td>1</td><td></td><td>1</td><td>9</td><td>9</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		1	9	9	8
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		3	1		1	9	9	8														
City Milwaukee State WI Zip Code 53288-0200		Amount of Each Disbursement this Period																					
Purpose of Disbursement CREDIT CARD FEE		<table border="1"> <tr> <td colspan="10">1011.76</td> </tr> </table>		1011.76																			
1011.76																							
Candidate Name		<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		[MEMO ITEM]																					
State: District:		MEMO: CREDIT CARD FEE																					
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							

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)

<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. Bank Card Services		Transaction ID: 072720019E311 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 1 9 9 8
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 13.50
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE Candidate Name		[MEMO ITEM] MEMO: CREDIT CARD FEE
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. Bank Card Services		Transaction ID: 072720019E315 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 1 9 9 8
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 651.53
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE Candidate Name		[MEMO ITEM] MEMO: CREDIT CARD FEE
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) C. Bank Card Services		Transaction ID: 072720019E317 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 1 9 9 8
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 255.46
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE Candidate Name		[MEMO ITEM] MEMO: CREDIT CARD FEE
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) ▶	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)

<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. Bank Card Services		Transaction ID: 072720019E307 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 4 / 1 9 9 7
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 29.46
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE Candidate Name		[MEMO ITEM] MEMO: CREDIT CARD FEE
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. Bank Card Services		Transaction ID: 072720019E297 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 1 9 9 6
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 264.06
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE Candidate Name		[MEMO ITEM] MEMO: CREDIT CARD FEE
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) C. Bank Card Services		Transaction ID: 072720019E300 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 1 9 9 6
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 2723.26
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE Candidate Name		[MEMO ITEM] MEMO: CREDIT CARD FEE
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) ▶	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)

<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. Bank Card Services		Transaction ID: 072720019E319 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 1 9 9 8
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 5225.69
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE Candidate Name		[MEMO ITEM] MEMO: CREDIT CARD FEE
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. Bank Card Services		Transaction ID: 072720019E302 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 2 / 1 9 9 6
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 2199.27
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE Candidate Name		[MEMO ITEM] MEMO: CREDIT CARD FEE
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) C. Bank Card Services		Transaction ID: 0130200233E2030 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 2
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 10.00
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FINANCE CHARGE Candidate Name		[MEMO ITEM] MEMO: FINANCE CHARGE
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) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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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) A. Bank Card Services		Transaction ID: 072720019E310 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 1 9 9 8
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 68.00
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE		[MEMO ITEM] MEMO: CREDIT CARD FEE
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. Bank Card Services		Transaction ID: 072720019E301 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 1 9 9 6
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 192.00
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE		[MEMO ITEM] MEMO: CREDIT CARD FEE
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) C. Bank Card Services		Transaction ID: 072720019E306 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 1 9 9 7
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 62.49
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE		[MEMO ITEM] MEMO: CREDIT CARD FEE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	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)

<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. Bank Card Services		Transaction ID: 072720019E299 Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 1996
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 1241.43
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE Candidate Name		[MEMO ITEM] MEMO: CREDIT CARD FEE
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. Bank Card Services		Transaction ID: 072720019E304 Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 1996
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 417.25
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE Candidate Name		[MEMO ITEM] MEMO: CREDIT CARD FEE
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) C. Bank Card Services		Transaction ID: 072720019E303 Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 1996
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 2383.15
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE Candidate Name		[MEMO ITEM] MEMO: CREDIT CARD FEE
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) ▶	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)

<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. Bank Card Services		Transaction ID: 072720019E296 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 1 9 9 6
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 697.29
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE	Category/Type	[MEMO ITEM] MEMO: CREDIT CARD FEE
Candidate Name	Disbursement For:	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Bank Card Services		Transaction ID: 072720019E312 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 1 9 9 8
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 105.28
City Milwaukee State WI Zip Code 53288-0200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD FEE	Category/Type	[MEMO ITEM] MEMO: CREDIT CARD FEE
Candidate Name	Disbursement For:	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jennifer Crall		Transaction ID: 70627.E4196 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 8343 Colby Pkwy Apt 214		Amount of Each Disbursement this Period 1430.60
City Urbandale State IA Zip Code 50322-7046	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement REPLACE CK 2165 DATED 10/31/06	Category/Type	[MEMO ITEM] MEMO: REPLACE CK 2165 DATED 10/31/06
Candidate Name	Disbursement For:	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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 98 / 100

<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. First Citizens National Bank		Transaction ID: 70627.E4197 Date of Disbursement 05 / 15 / 2007	
Mailing Address P.O. Box 268		Amount of Each Disbursement this Period 21.40	
City Clarion State IA Zip Code 50525-	Purpose of Disbursement STOP PYMT C#2165 TO JENN CRALL	<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) ▼	[MEMO ITEM] MEMO: STOP PYMT C#2165 TO JENN CRALL	

Full Name (Last, First, Middle Initial) B. NRCC-Natl Republican Congressional Comm		Transaction ID: 70627.E4198 Date of Disbursement 05 / 15 / 2007	
Mailing Address 323 1st St SE		Amount of Each Disbursement this Period 250.00	
City Washington State DC Zip Code 20003-	Purpose of Disbursement REPLACE C#1770	<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) ▼	[MEMO ITEM] MEMO: REPLACE C#1770	

Full Name (Last, First, Middle Initial) C. KWMT Radio		Transaction ID: 0727200115E1832 Date of Disbursement 09 / 27 / 2000	
Mailing Address 540 A Street		Amount of Each Disbursement this Period 4800.00	
City Fort Dodge State IA Zip Code 50501-	Purpose of Disbursement RADIO BUYS	<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) ▼	[MEMO ITEM] MEMO: RADIO BUYS	

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)

<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. United States Cellular		Transaction ID: 70627.E4192 Date of Disbursement MM / DD / YYYY 05 / 15 / 2007
Mailing Address PO Box 7835		Amount of Each Disbursement this Period 94.04 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Madison State WI Zip Code 53707-7835	Purpose of Disbursement CELL CHARGES 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) ▼	CELL CHARGES

Full Name (Last, First, Middle Initial) B. United States Cellular		Transaction ID: 70627.E4203 Date of Disbursement MM / DD / YYYY 06 / 05 / 2007
Mailing Address PO Box 7835		Amount of Each Disbursement this Period 99.04 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Madison State WI Zip Code 53707-7835	Purpose of Disbursement CELL CHARGES 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) ▼	CELL CHARGES

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Transaction ID: 70627.E4175 Date of Disbursement MM / DD / YYYY 04 / 17 / 2007
Mailing Address 777 Big Timber Rd		Amount of Each Disbursement this Period 55.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Elgin State IL Zip Code 60123-1488	Purpose of Disbursement CAMPAIGN CELL 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 CELL

SUBTOTAL of Disbursements This Page (optional) ▶	248.95
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 100 / 100

<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

A. Verizon Wireless

Full Name (Last, First, Middle Initial)

Mailing Address 777 Big Timber Rd

City Elgin State IL Zip Code 60123-1488

Purpose of Disbursement
CAMPAIGN CELL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 70627.E4202
Date of Disbursement

/ /

06 / 05 / 2007

Amount of Each Disbursement this Period

55.87

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

CAMPAIGN CELL

B. We 3 Catering

Full Name (Last, First, Middle Initial)

Mailing Address 231 E Main St

City Belmont State IA Zip Code 50421-1122

Purpose of Disbursement
CATERING FOR PICNIC

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 70627.E4209
Date of Disbursement

/ /

06 / 19 / 2007

Amount of Each Disbursement this Period

3439.24

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

CATERING FOR PICNIC

SUBTOTAL of Disbursements This Page (optional)

3495.11

TOTAL This Period (last page this line number only)

44395.31