

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

(Summary Page)

1 / 31  
07/15/1998 14 : 48

<b>1. NAME OF COMMITTEE (in full)</b> <b>Boswell for Congress Committee</b>		<b>2. FEC IDENTIFICATION NUMBER</b> C00316881
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported PO Box 823		
<b>CITY, STATE, and ZIP CODE</b> Indianola IA 50125	<b>STATE / DISTRICT</b> IA / 3	<b>3. IS THIS REPORT AN AMENDMENT?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

## 4. TYPE OF REPORT

- |  |  |
|--|--|
| <input type="checkbox"/> April 15 Quarterly Report<br><br><input checked="" type="checkbox"/> July 15 Quarterly Report<br><br><input type="checkbox"/> October 15 Quarterly Report<br><br><input type="checkbox"/> January 31 Year End Report<br><br><input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) | <input type="checkbox"/> Twelfth day report preceding _____<br>(election type) _____<br>election on _____ in the State of _____<br><br><input type="checkbox"/> Thirtieth day report following the General Election<br><br>on _____ in the State of _____<br><br><input type="checkbox"/> Termination report |
|--|--|

This report contains activity for:  Primary election  General election  Runoff election  Special election

## SUMMARY

5. Covering period <u>05/14/1998</u> through <u>08/30/1998</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net contributions (other than loans)		
(a) Total Contributions (other than loans) (from line 11(a)) .....	141142.82	288664.38
(b) Total Contribution Refunds (from line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) .....	141142.82	288664.38
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from line 17) .....	36816.75	118483.91
(b) Total Offsets to Operating Expenditures (from line 14) .....	230.00	637.19
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a)) .....	36586.75	117846.72
8. Cash on Hand at Close of Reporting Period (from line 27) .....	307543.84	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
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) .....	2985.83	

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

**Electronically Filed by Carl McGuire**

Signature of Treasurer

Date

07/15/1998

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

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**FEC FORM 3**  
(revised 4/87)

**DETAILED SUMMARY PAGE**  
**of Receipts and Disbursements**  
 (Page 2, FEG Form 3)

Name of Committee (In Full) Boswell for Congress Committee	Report Covering the Period From: 05/14/1998 To: 06/30/1998	
<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-To-Date</b>
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees .....		
(i) Itemized (use Schedule A) .....	23900.00	
(ii) Unitemized .....	18542.92	
(iii) Total of contributions from individuals .....	42442.92	116278.42
(b) Political Party Committees .....	5500.00	5885.96
(c) Other Political Committees (such as PACs) .....	93200.00	168500.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	141142.92	288864.38
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 13(a) and (b)) .....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	230.00	637.19
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	2912.70	3361.24
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) .....	144285.62	292682.81
<b>II. DISBURSEMENTS</b>		
17. OPERATING EXPENDITURES .....	36816.75	118483.91
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	28048.05
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) .....	0.00	28048.05
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 20(a), (b) and (c)) .....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	1000.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) .....	36816.75	147528.96
<b>III. CASH SUMMARY</b>		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....		200074.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) .....		144285.62
25. SUBTOTAL (add Line 23 and Line 24) .....		344360.59
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) .....		36816.75
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		307543.84

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	<b>3 / 31</b>
				FOR LINE NUMBER	<b>11A</b>
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.					
<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Evelyn Hewlett Strable 1111 E. Iowa #5-A  Indiana IA 50125	<b>Name of Employer</b>  Retired	<b>Date (month, day, year)</b> 05/14/1998	<b>Amount of Each Receipt this Period</b> 50.00		
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Retired		<b>Aggregate Year-to-Date</b> > \$ 275.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Dr. Cass Franklin 411 Laurel Street, Suite 2300  Des Moines IA 50314	<b>Name of Employer</b> Self	<b>Date (month, day, year)</b> 05/14/1998	<b>Amount of Each Receipt this Period</b> 500.00		
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Physician		<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> James Conlin 6116 SW McKinley Avenue  Des Moines IA 50321	<b>Name of Employer</b> AmerUs Realty	<b>Date (month, day, year)</b> 05/14/1998	<b>Amount of Each Receipt this Period</b> 1000.00		
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Broker		<b>Aggregate Year-to-Date</b> > \$ 1500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Alan Shirley 704 12th Street  Perry IA 50220	<b>Name of Employer</b> Self	<b>Date (month, day, year)</b> 05/14/1998	<b>Amount of Each Receipt this Period</b> 225.00		
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Attorney		<b>Aggregate Year-to-Date</b> > \$ 300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Wallace Parmer 302 Plaza Heights Road, #3  Marshalltown IA 50158	<b>Name of Employer</b>  Retired	<b>Date (month, day, year)</b> 05/19/1998	<b>Amount of Each Receipt this Period</b> 400.00		
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Retired		<b>Aggregate Year-to-Date</b> > \$ 600.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Oliver Houston 200 E. 10th  Lamoni IA 50140	<b>Name of Employer</b> Graceland College	<b>Date (month, day, year)</b> 05/20/1998	<b>Amount of Each Receipt this Period</b> 100.00		
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Professor		<b>Aggregate Year-to-Date</b> > \$ 300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Roger Shinn RR 1  Eddyville IA 52553	<b>Name of Employer</b> Ben Shinn Trucking	<b>Date (month, day, year)</b> 05/26/1998	<b>Amount of Each Receipt this Period</b> 500.00		
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> President		<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>4 / 31</b>
			FOR LINE NUMBER <b>11A</b>

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**NAME OF COMMITTEE (In Full)**  
**Boswell for Congress Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> Alan Shirley 704 12th Street  Perry IA 50220  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self  Occupation Attorney  Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 05/27/1998	Amount of Each Receipt this Period 75.00
<b>Full Name, Mailing Address, and ZIP Code</b> Michael G. Reilly 215 S. Main St., Box 1016  Council Bluffs IA 51502-1016  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self  Occupation Attorney  Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 05/29/1998	Amount of Each Receipt this Period 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> Viola De Stigter 3200 NE Trikin Drive  Ankeny IA 50021  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation Homemaker  Aggregate Year-to-Date > \$ 800.00	Date (month, day, year) 05/30/1998	Amount of Each Receipt this Period 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> Robert M. Sturgeon 3004 Elm  West Des Moines IA 50265  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Barr Nunn Transportation  Occupation President  Aggregate Year-to-Date > \$ 750.00	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 750.00
<b>Full Name, Mailing Address, and ZIP Code</b> Faye Fraisa 1680 280th Avenue  Ft. Madison IA 52627  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation Homemaker  Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 100.00
<b>Full Name, Mailing Address, and ZIP Code</b> Jeannie A. Foster 8109 Sulton Drive  Urbandale IA 50322  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Pioneer Hi-Bred International  Occupation Professional  Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> Harry Y. Baxter 203 Washington  Burlington IA 52601  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Schaff & Baxter, Inc.  Occupation President  Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 250.00
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	<b>5 / 31</b>
				FOR LINE NUMBER <b>11A</b>	
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<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Steven J. Crowley 10824 Oak Ridge Road  Burlington IA 52601		Name of Employer Self		Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Kenny Hartman 4972 Sullivan Slough Road  Burlington IA 52601		Name of Employer		Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Retired			
		Aggregate Year-to-Date > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Barbara Miller 6339 Madison Avenue  Burlington IA 52601		Name of Employer		Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Homemaker			
		Aggregate Year-to-Date > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Patrick C. Jackson 1303 N. 6th Street  Burlington IA 52601		Name of Employer Des Moines County		Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Darwin Bunger 3215 Crystal Drive  Burlington IA 52601		Name of Employer Crowley, Bunger & Pothitakis		Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Steve Brody 4119 Kingman Blvd.  Des Moines IA 50311		Name of Employer Pioneer HiBred International		Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Professional			
		Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Thomas I. Henderson 5680 Columbine Drive  Johnston IA 50131		Name of Employer Whitfield & Eddy PC		Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 500.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	<b>6 / 31</b>
				FOR LINE NUMBER <b>11A</b>	
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<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Janet Griffin 410 27th St.  Des Moines IA 50312		Name of Employer Blue Cross Blue Shield		Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 350.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Sheila Riggs 405 S. Wilmoth  Ames IA 50014		Name of Employer Wellmark, Inc.		Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Epidemiologist			
		Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Patricia Hurd 3030 Grand, #406  Des Moines IA 50312		Name of Employer		Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Retired			
		Aggregate Year-to-Date > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> George H. Perry 14 Country Club Lane  Shenandoah IA 51801		Name of Employer First National Bank		Date (month, day, year) 06/04/1998	Amount of Each Receipt this Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Banker			
		Aggregate Year-to-Date > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> John Lisle 729 Logan Drive  Clarinda IA 51632		Name of Employer Lisle Corporation		Date (month, day, year) 06/05/1998	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation CEO			
		Aggregate Year-to-Date > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Sally Pederson 5007 Woodland  Des Moines IA 50312		Name of Employer		Date (month, day, year) 06/05/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Homemaker/Community Activist			
		Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Patricia W. Gilroy 2601 Hickory Trail, #14  Iowa City IA 52245		Name of Employer		Date (month, day, year) 06/06/1998	Amount of Each Receipt this Period 400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Retired			
		Aggregate Year-to-Date > \$ 500.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		7 / 31
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 11A1
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<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Jerry Shelberg 608 2nd Street  Red Oak                      IA    51566	<b>Name of Employer</b> JFSCO Engineering, PC	<b>Date (month, day, year)</b> 06/06/1998	<b>Amount of Each Receipt this Period</b> 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Professional Engineer	<b>Aggregate Year-to-Date</b> > \$    500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> C. Lynne Bishop 2809 Eisenhower  Ames                              IA    50010	<b>Name of Employer</b> Iowa State University	<b>Date (month, day, year)</b> 06/09/1998	<b>Amount of Each Receipt this Period</b> 250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Copy Editor	<b>Aggregate Year-to-Date</b> > \$    250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Alan Koslow 2716 Jordan Grove  West Des Moines              IA    50265	<b>Name of Employer</b> Iowa Heart	<b>Date (month, day, year)</b> 06/09/1998	<b>Amount of Each Receipt this Period</b> 250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Surgeon/Physician	<b>Aggregate Year-to-Date</b> > \$    250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Dan Durlap 820 Davis Avenue  Comins                            IA    50841	<b>Name of Employer</b> First Community National Bank	<b>Date (month, day, year)</b> 06/10/1998	<b>Amount of Each Receipt this Period</b> 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> President	<b>Aggregate Year-to-Date</b> > \$    500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Brent Wynja 1012 Hunziker Drive  Ames                              IA    50010-5028	<b>Name of Employer</b> Smith Barney	<b>Date (month, day, year)</b> 06/10/1998	<b>Amount of Each Receipt this Period</b> 250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Financial Analyst	<b>Aggregate Year-to-Date</b> > \$    250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Oliver Houston 200 E. 10th  Lamoni                            IA    50140	<b>Name of Employer</b> Graceland College	<b>Date (month, day, year)</b> 06/10/1998	<b>Amount of Each Receipt this Period</b> 100.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Professor	<b>Aggregate Year-to-Date</b> > \$    300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Evelyn Hewlett Strable 1111 E. Iowa #6-A  Indianola                        IA    50125	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 06/10/1998	<b>Amount of Each Receipt this Period</b> 150.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Retired	<b>Aggregate Year-to-Date</b> > \$    275.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>8 / 31</b>
			FOR LINE NUMBER <b>11A</b>

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**NAME OF COMMITTEE (In Full)**  
**Boswell for Congress Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> Junius Clyde Brenton 1400 Windover Road  Des Moines IA 50315  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Brenton Banks  Occupation President  Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 06/11/1998	Amount of Each Receipt this Period 100.00
<b>Full Name, Mailing Address, and ZIP Code</b> Dr. Stephen Gleason 225 58th Place  Des Moines IA 50312  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Catholic Health Initiatives  Occupation VP-Medical Affairs  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 06/11/1998	Amount of Each Receipt this Period 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> Julie A. Dwyer 700 A Street SE  Washington DC 20003  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Congressman Bob Ehrhidge  Occupation Chief of Staff  Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 06/11/1998	Amount of Each Receipt this Period 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> Tom Whitney 900 Two Run Center  Des Moines IA 50309  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Whitney Law Office  Occupation Attorney  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 06/16/1998	Amount of Each Receipt this Period 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> Colin Jensen PO Box 1618  Sioux City IA 51102  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self  Occupation Contractor  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 06/19/1998	Amount of Each Receipt this Period 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> Norvel Houck 1657 165th St.  Coming IA 50841-8366  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self  Occupation Farmer  Aggregate Year-to-Date > \$ 600.00	Date (month, day, year) 06/22/1998	Amount of Each Receipt this Period 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> Beverly McMahon 1600 Grove Avenue  Coming IA 50841  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer McMahon Pharmacy  Occupation Pharmacist  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 06/22/1998	Amount of Each Receipt this Period 500.00

**SUBTOTALS** of Receipts This Page (Optional) .....

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



<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>9 / 31</b>
			FOR LINE NUMBER <b>11A</b>

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)**  
**Boswell for Congress Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> Stuart D. Nielsen 507 Rosary Drive  Coming IA 50841  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 06/22/1998	Amount of Each Receipt this Period 300.00	
	Occupation Attorney	Aggregate Year-to-Date > \$ 425.00		
	<b>Full Name, Mailing Address, and ZIP Code</b> Margaret Brown Tait 2924 Eisenhower Avenue  Ames IA 50010  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :			Name of Employer  Date (month, day, year) 06/22/1998
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Relly PO Box 179  Ossian IA 52161  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer Relly Construction Co.	Date (month, day, year) 06/22/1998	Amount of Each Receipt this Period 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> David Carlson 110 Western  Decorah IA 52101  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Retired	Aggregate Year-to-Date > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Relly PO Box 179  Ossian IA 52161  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer Relly Construction Co.	Date (month, day, year) 06/22/1998	
<b>Full Name, Mailing Address, and ZIP Code</b> David Carlson 110 Western  Decorah IA 52101  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer Self	Date (month, day, year) 06/22/1998	Amount of Each Receipt this Period 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> William P. Bagley 1451 Pompano Drive  Des Moines IA 50325  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Contractor	Aggregate Year-to-Date > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> William P. Bagley 1451 Pompano Drive  Des Moines IA 50325  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer Link Plus. Inc.	Date (month, day, year) 06/24/1998	
<b>Full Name, Mailing Address, and ZIP Code</b> Thomas D. Bonner 13640 Bellerose Drive  Chanilly VA 20151  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer Link Plus. Inc.	Date (month, day, year) 06/24/1998	Amount of Each Receipt this Period 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Thomas D. Bonner 13640 Bellerose Drive  Chanilly VA 20151  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation General Manager	Aggregate Year-to-Date > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Thomas D. Bonner 13640 Bellerose Drive  Chanilly VA 20151  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer Mid American Energy Co.	Date (month, day, year) 06/26/1998	
<b>Full Name, Mailing Address, and ZIP Code</b> Herman C. Gumbach 1002 Jarrett Circle  Ames IA 50014  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer Mid American Energy Co.	Date (month, day, year) 06/26/1998	Amount of Each Receipt this Period 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> Herman C. Gumbach 1002 Jarrett Circle  Ames IA 50014  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Governmental Affairs Rep.	Aggregate Year-to-Date > \$ 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Herman C. Gumbach 1002 Jarrett Circle  Ames IA 50014  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer Iowa State University	Date (month, day, year) 06/27/1998	
<b>Full Name, Mailing Address, and ZIP Code</b> Herman C. Gumbach 1002 Jarrett Circle  Ames IA 50014  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer Iowa State University	Date (month, day, year) 06/27/1998	Amount of Each Receipt this Period 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> Herman C. Gumbach 1002 Jarrett Circle  Ames IA 50014  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Economics Professor	Aggregate Year-to-Date > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Herman C. Gumbach 1002 Jarrett Circle  Ames IA 50014  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>SUBTOTALS</b> of Receipts This Page (Optional) .....		
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>10 / 31</b>
Use separate schedule(s) for each category of the Detailed Summary Page			<b>FOR LINE NUMBER 11A</b>	
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Alta P. Carmody 101 Maple  Colo IA 50056  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b>  Occupation Retired  <b>Aggregate Year-to-Date</b> > \$ 500.00	<b>Date (month, day, year)</b> 06/27/1998	<b>Amount of Each Receipt this Period</b>  500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Steven C. Schoenebaum Two Ruan Center, Suite 1100 601 Locust Des Moines IA 50309  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Brown, Winick, Graves, Gross et al  Occupation Attorney  <b>Aggregate Year-to-Date</b> > \$ 500.00	<b>Date (month, day, year)</b> 06/28/1998	<b>Amount of Each Receipt this Period</b>  500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> James Conlin 6116 80th McKinley Avenue  Des Moines IA 50321  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> AmerUs Realty  Occupation Broker  <b>Aggregate Year-to-Date</b> > \$ 1500.00	<b>Date (month, day, year)</b> 06/28/1998	<b>Amount of Each Receipt this Period</b>  500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Charles J. Krogmeier 905 NE 34th  Ankeny IA 50021  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Brown, Winick, Graves, Gross et al  Occupation Attorney  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 06/28/1998	<b>Amount of Each Receipt this Period</b>  250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Frederick B. Waitz 1212 Nuuanu Avenue  Honolulu HI 96817  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b>  Occupation Retired  <b>Aggregate Year-to-Date</b> > \$ 400.00	<b>Date (month, day, year)</b> 06/29/1998	<b>Amount of Each Receipt this Period</b>  400.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Lloyd Glendenning 108 Shellway Drive  Mt. Airy IA 50854  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Glendenning Auto  Occupation Auto Dealer  <b>Aggregate Year-to-Date</b> > \$ 500.00	<b>Date (month, day, year)</b> 06/29/1998	<b>Amount of Each Receipt this Period</b>  500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> D. G. Ramey Rt. 1 Box 80  Lamoni IA 50140  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Graceland College  Occupation Development Office  <b>Aggregate Year-to-Date</b> > \$ 350.00	<b>Date (month, day, year)</b> 06/29/1998	<b>Amount of Each Receipt this Period</b>  100.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>11 / 31</b>
			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER <b>11A</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Joseph S. Brick 550 38th St.  Des Moines IA 50312	<b>Name of Employer</b> Brick, Gentry, Bowers, Swartz, et al	<b>Date (month, day, year)</b> 06/30/1998	<b>Amount of Each Receipt this Period</b> 300.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Attorney	<b>Aggregate Year-to-Date</b> > \$ 300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Lee H. Gaudineer 4520 51st St.  Des Moines IA 50310	<b>Name of Employer</b> Austin, Gaudineer & Cornilo, LLP	<b>Date (month, day, year)</b> 06/30/1998	<b>Amount of Each Receipt this Period</b> 250.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Attorney	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Law Firm of Budin & Lipkin 100 N. La Salle Street, Suite 1616  Chicago IL 60602	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 06/30/1998	<b>Amount of Each Receipt this Period</b> 250.00 <i>See Attribution Below</i>	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b>	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mitchell Lipkin 100 N. La Salle Street, Suite 1616  Chicago IL 60602	<b>Name of Employer</b> Law Firm of Budin & Lipkin	<b>Date (month, day, year)</b> 06/30/1998	<b>Amount of Each Receipt this Period</b> 250.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Attorney	<b>Aggregate Year-to-Date</b> > \$ 0.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Whittenburg 205 E 2nd Street  Spencer IA 51301	<b>Name of Employer</b> Chuck Whittenburg Distributing	<b>Date (month, day, year)</b> 06/30/1998	<b>Amount of Each Receipt this Period</b> 250.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Owner	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Clark McLeod 232 Rosedale Road SE  Cedar Rapids IA 52403	<b>Name of Employer</b> McLeod Telephone Systems	<b>Date (month, day, year)</b> 06/30/1998	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> President & CEO	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Dwight W. James 630 Equitable Building  Des Moines IA 50309	<b>Name of Employer</b> James Law Firm	<b>Date (month, day, year)</b> 06/30/1998	<b>Amount of Each Receipt this Period</b> 300.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Attorney	<b>Aggregate Year-to-Date</b> > \$ 300.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>12 / 31</b>
			FOR LINE NUMBER <b>11A</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>			
<b>Full Name, Mailing Address, and ZIP Code</b> David Claypool 4920 Country Club Blvd.  Des Moines IA 50312	<b>Name of Employer</b> Dorsey & Whitney	<b>Date (month, day, year)</b> 06/30/1998	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Attorney	<b>Aggregate Year-to-Date</b> > 5 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Edward Campbell 2555 Pennsylvania Avenue, NW, #703  Washington DC 20037-1846	<b>Name of Employer</b> Self	<b>Date (month, day, year)</b> 06/30/1998	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Consultant	<b>Aggregate Year-to-Date</b> > 8 1000.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			<b>23900.00</b>

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>13 / 31</b>
			FOR LINE NUMBER <b>11B</b>

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**NAME OF COMMITTEE (In Full)**  
**Boswell for Congress Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> Friends of Rosa DeLauro 49 Huntington Street  New Haven CT 06511	Name of Employer	Date (month, day, year) 06/22/1998	Amount of Each Receipt this Period 1000.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		

<b>Full Name, Mailing Address, and ZIP Code</b> Third District Democratic Central Committee 1000 N. Cherry  Creston IA 50801	Name of Employer	Date (month, day, year) 06/25/1998	Amount of Each Receipt this Period 2000.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 2000.00		

<b>Full Name, Mailing Address, and ZIP Code</b> Jim Oberster US Congress PO Box 465  Duluth MN 55802	Name of Employer	Date (month, day, year) 06/26/1998	Amount of Each Receipt this Period 1000.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		

<b>Full Name, Mailing Address, and ZIP Code</b> Walter Capps for Congress PO Box 91429  Santa Barbara CA 93190-1429	Name of Employer	Date (month, day, year) 06/29/1998	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		

<b>Full Name, Mailing Address, and ZIP Code</b> Bob Matsui for Congress 555 Capitol Mall, Suite 1425  Sacramento CA 95814	Name of Employer	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 1000.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		

<b>SUBTOTALS</b> of Receipts This Page (Optional) .....	
<b>TOTALS</b> This Period (last page this line number only) .....	<b>5500.00</b>

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>14 / 31</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		<b>FOR LINE NUMBER 11C</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Association of American Agricultural Insurers 535 W. Broadway  Council Bluffs IA 51503-4212  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation  Aggregate Year-to-Date > \$ 1250.00	Date (month, day, year) 05/26/1998	Amount of Each Receipt this Period 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Brotherhood of Locomotive Engineers PAC Fund 1370 Ontario St.  Cleveland OH 44131  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation  Aggregate Year-to-Date > \$ 3000.00	Date (month, day, year) 05/26/1998	Amount of Each Receipt this Period 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Action Committee for Rural Electrification 4301 Wilson Boulevard  Arlington VA 22203-1860  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation  Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 05/27/1998	Amount of Each Receipt this Period 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Transportation Political Education League 14800 Detroit Avenue  Cleveland OH 44107  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation  Aggregate Year-to-Date > \$ 6300.00	Date (month, day, year) 05/27/1998	Amount of Each Receipt this Period 5000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Effective Government Committee 607 14th Street, NW, Suite 800  Washington DC 20005  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation  Aggregate Year-to-Date > \$ 5000.00	Date (month, day, year) 05/27/1998	Amount of Each Receipt this Period 5000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Cooperative Action for Congressional Trust 1401 New York Avenue, NW, Suite 11  Washington DC 20005  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation  Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 05/27/1998	Amount of Each Receipt this Period 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> American Pharmaceutical Association 2215 Constitution Avenue, NW  Washington DC 20037  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 05/27/1998	Amount of Each Receipt this Period 500.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>15 / 31</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11C</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> National Telephone Cooperative Association 2626 Pennsylvania Avenue, NW  Washington DC 20037	Name of Employer	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 500.00				
<b>Full Name, Mailing Address, and ZIP Code</b> American Nurses Association PAC 600 Maryland Avenue, SW, Suite 100  Washington DC 20024-2571	Name of Employer	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 2000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 2000.00				
<b>Full Name, Mailing Address, and ZIP Code</b> National Air Traffic Controllers Association 1150 17th Street, NW, Suite 1701  Washington DC 20036	Name of Employer	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 2000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 3500.00				
<b>Full Name, Mailing Address, and ZIP Code</b> Ironworkers Political Action League 1750 New York Avenue, NW  Washington DC 20006	Name of Employer	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 2000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 2000.00				
<b>Full Name, Mailing Address, and ZIP Code</b> Drive Political Fund 25 Louisiana Avenue, NW  Washington DC 20001	Name of Employer	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 3500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 3500.00				
<b>Full Name, Mailing Address, and ZIP Code</b> American Medical PAC 1101 Vermont Avenue, NW  Washington DC 20005	Name of Employer	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 1500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 1500.00				
<b>Full Name, Mailing Address, and ZIP Code</b> Maintenance of Way Political League 26555 Evergreen Road, Suite 200  Southfield MI 48076-4225	Name of Employer	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 1000.00				
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>16 / 31</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11C</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> American Concrete & Pavement Association PAC 1225 I Street, NW, #300  Washington DC 20005	Name of Employer	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 500.00				
<b>Full Name, Mailing Address, and ZIP Code</b> United Auto Workers V CAP 8000 East Jefferson Avenue  Detroit MI 48214-3903	Name of Employer	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 1000.00				
<b>Full Name, Mailing Address, and ZIP Code</b> Futures Industry PAC 2001 Pennsylvania Avenue, NW  Washington DC 20006	Name of Employer	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 500.00				
<b>Full Name, Mailing Address, and ZIP Code</b> Independent Bankers PAC One Thomas Circle, NW, Suite 400  Washington DC 20005	Name of Employer	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 1000.00				
<b>Full Name, Mailing Address, and ZIP Code</b> General Aviation Manufacturers Association PAC 1400 K Street, NW, Suite 801  Washington DC 20005	Name of Employer	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 500.00				
<b>Full Name, Mailing Address, and ZIP Code</b> Machinists Non-Partisan Political League 9000 Machinist Place  Upper Marlboro MD 20772	Name of Employer	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 3500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 4500.00				
<b>Full Name, Mailing Address, and ZIP Code</b> United Egg Association EggPac 1303 Hightower Trail  Atlanta GA 30350	Name of Employer	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 500.00				
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				



<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>17 / 31</b>
			FOR LINE NUMBER <b>11C</b>

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)**  
**Boswell for Congress Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> Farmland Industries PAC PO Box 13473  Kansas City MD 64116	Name of Employer	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 250.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Amalgamated Transit Union Cope Account Voluntary Fund 5125 Wisconsin Avenue, NW Washington DC 20016	Name of Employer	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> American Bankers Association PAC 1120 Connecticut Avenue, NW  Washington DC 20036	Name of Employer	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 4500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> National Ready Mixed Concrete Association PAC 900 Spring St.  Silver Spring MD 20910	Name of Employer	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> International Organization of Masters, Mates & Pilots Political Contribution Fund 700 Maritime Blvd. Linthicum MD 21090	Name of Employer	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 2000.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 2000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Petroleum Marketers Association of America's Small Business Committee 1901 N Fort Myer Drive, Suite 1200 Arlington VA 22209	Name of Employer	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 1000.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Pass PAC 1150 17th Street, NW, Suite 702  Washington DC 20036	Name of Employer	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 1000.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>18 / 31</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11C</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Seafarers Political Activity 5201 Auth Way  Camp Springs MD 20746	Name of Employer   Occupation	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> American Association of Crop Insurers PAC 1 Massachusetts Avenue, #800  Washington DC 20001	Name of Employer   Occupation	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> National Rural Letter Carriers Association PAC 1630 Duke Street, 4th Floor Alexandria VA 22314-3465	Name of Employer   Occupation	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> American Dietetic Association PAC 1225 I Street, NW Suite 1250  Washington DC 20005	Name of Employer   Occupation	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Human Rights Campaign PAC 1101 14th Street, NW  Washington DC 20005	Name of Employer   Occupation	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 5000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 5000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> National Committee to Preserve Social Security 2000 K Street, NW, Suite 800  Washington DC 20006	Name of Employer   Occupation	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Committee on Letter Carriers Political Educ. National Assoc. of Letter Carriers 100 Indiana Avenue, NW Washington CA 20001	Name of Employer   Occupation	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 2000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 4000.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>19 / 31</b>
			FOR LINE NUMBER <b>11C</b>

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)**  
**Boswell for Congress Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> Maintenance of Way Political League 26555 Evergreen Road, Suite 200  Southfield MI 48075-4225	Name of Employer	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> American Podiatric Medical Association 9312 Old Georgetown Road  Bethesda MD 20814-1898	Name of Employer	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> National Council of Farmer Cooperatives 50 F Street, NW, Suite 800  Washington DC 20001	Name of Employer	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Concerned Associates Employees PAC 250 Carpenter Freeway  Irving TX 75062	Name of Employer	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 1000.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ernst & Young PAC 1225 Connecticut Avenue, NW  Washington DC 20036	Name of Employer	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Pork PAC PO Box 10383  Des Moines IA 50306	Name of Employer	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 5000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Gas Employees PAC 1515 Wilson Boulevard  Arlington VA 22209	Name of Employer	Date (month, day, year) 06/04/1998	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>20 / 31</b>
			FOR LINE NUMBER <b>11C</b>

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)**  
**Boswell for Congress Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> National Rifle Association Political Victory Fund 11250 Waples Mill Road Fairfax VA 22030-7400	Name of Employer  Occupation	Date (month, day, year) 06/05/1998	Amount of Each Receipt this Period 2950.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 6450.00		
<b>Full Name, Mailing Address, and ZIP Code</b> United Steel Workers of America Political Acti 5 Gateway Center  Pittsburgh PA 15222	Name of Employer  Occupation	Date (month, day, year) 06/05/1998	Amount of Each Receipt this Period 5000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 5000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> CF Industries Employees' Good Government Fund One Salem Lake Drive  Long Grove IL 60047	Name of Employer  Occupation	Date (month, day, year) 06/05/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Responsible Citizens Political League 3 Research Place  Rockville MD 20850	Name of Employer  Occupation	Date (month, day, year) 06/11/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> United Auto Workers V CAP 8000 East Jefferson Avenue  Detroit MI 48214-3963	Name of Employer  Occupation	Date (month, day, year) 06/11/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> American Crystal Sugar PAC 101 North 3rd St.  Moorhead MN 56500	Name of Employer  Occupation	Date (month, day, year) 06/16/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> International Brotherhood of Electrical Workers - COPE 1125 15th Street, NW Washington DC 20005	Name of Employer  Occupation	Date (month, day, year) 06/22/1998	Amount of Each Receipt this Period 2500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 4500.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>21 / 31</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11C</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Build PAC of the National Association of Home Builders 1201 15th Street, NW Washington DC 20005-2800	Name of Employer	Date (month, day, year) 06/22/1998	Amount of Each Receipt this Period 2500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 5000.00				
<b>Full Name, Mailing Address, and ZIP Code</b> Lone Star Fund PO Box 4219 Dallas TX 75206	Name of Employer	Date (month, day, year) 06/22/1998	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 500.00				
<b>Full Name, Mailing Address, and ZIP Code</b> American Bankers Association PAC 1120 Connecticut Avenue, NW Washington DC 20036	Name of Employer	Date (month, day, year) 06/22/1998	Amount of Each Receipt this Period 4000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 4500.00				
<b>Full Name, Mailing Address, and ZIP Code</b> American Federation of State, County & Municipal Employees-ALF-CIO 1625 L Street, NW Washington DC 20036	Name of Employer	Date (month, day, year) 06/22/1998	Amount of Each Receipt this Period 5000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 6500.00				
<b>Full Name, Mailing Address, and ZIP Code</b> National Rifle Association Political Victory Fund 11250 Waples Mill Road Fairfax VA 22030-7400	Name of Employer	Date (month, day, year) 06/29/1998	Amount of Each Receipt this Period 2500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 6450.00				
<b>Full Name, Mailing Address, and ZIP Code</b> American Veterinary Medical Association PAC 1101 Vermont Avenue, NW, Suite 710 Washington DC 20005	Name of Employer	Date (month, day, year) 06/29/1998	Amount of Each Receipt this Period 2000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 2000.00				
<b>Full Name, Mailing Address, and ZIP Code</b> Air Line Pilots Association PAC 1625 Massachusetts Avenue, NW Washington DC 20036	Name of Employer	Date (month, day, year) 06/29/1998	Amount of Each Receipt this Period 1500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation			
Aggregate Year-to-Date > \$ 2500.00				
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>22 / 31</b>
			FOR LINE NUMBER <b>11C</b>

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)**  
**Boswell for Congress Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> National Education Association 1201 16th Street, NW  Washington DC 20036	Name of Employer	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 5000.00
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 6500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Firstar Corporation Civic Affairs Committee 777 E. Wisconsin Avenue  Milwaukee WI 53202	Name of Employer	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 2000.00
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 2000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Pork PAC PO Box 10383  Des Moines IA 50306	Name of Employer	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 4000.00
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 5000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> American Chiropractic Association PAC 1701 Clarendon Blvd.  Arlington VA 22209	Name of Employer	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 500.00
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 500.00			

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<b>SUBTOTALS</b> of Receipts This Page (Optional) .....	
<b>TOTALS</b> This Period (last page this line number only) .....	<b>93200.00</b>

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	<b>23 / 31</b>
					FOR LINE NUMBER <b>14</b>
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.					
<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Scott Douglas Ourth RR 2 Box 55R  Lemon IA 50140		<b>Name of Employer</b>		<b>Date (month, day, year)</b> 06/30/1998	<b>Amount of Each Receipt This Period</b> 230.00  Phone bill reimbursement
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b>			
		<b>Aggregate Year-to-Date</b> > 5    230.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					<b>230.00</b>

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>24 / 31</b>
			FOR LINE NUMBER <b>15</b>

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)**  
**Boswell for Congress Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> Commercial Federal Bank 105 N. Washington - PO Box 36  Bloomfield IA 52537	Name of Employer   Occupation	Date (month, day, year) 05/23/1998	Amount of Each Receipt this Period 53.43 Bank interest
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 3291.56		
<b>Full Name, Mailing Address, and ZIP Code</b> Commercial Federal Bank 105 N. Washington - PO Box 36  Bloomfield IA 52537	Name of Employer   Occupation	Date (month, day, year) 05/26/1998	Amount of Each Receipt this Period 260.27 Bank Interest
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 3291.56		
<b>Full Name, Mailing Address, and ZIP Code</b> Commercial Federal Bank 105 N. Washington - PO Box 36  Bloomfield IA 52537	Name of Employer   Occupation	Date (month, day, year) 05/29/1998	Amount of Each Receipt this Period 1005.49 Bank interest
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 3291.56		
<b>Full Name, Mailing Address, and ZIP Code</b> Commercial Federal Bank 105 N. Washington - PO Box 36  Bloomfield IA 52537	Name of Employer   Occupation	Date (month, day, year) 06/22/1998	Amount of Each Receipt this Period 95.92 Bank Interest
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 3291.56		
<b>Full Name, Mailing Address, and ZIP Code</b> Commercial Federal Bank 105 N. Washington - PO Box 36  Bloomfield IA 52537	Name of Employer   Occupation	Date (month, day, year) 06/23/1998	Amount of Each Receipt this Period 204.82 Bank interest
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 3291.56		
<b>Full Name, Mailing Address, and ZIP Code</b> Commercial Federal Bank 105 N. Washington - PO Box 36  Bloomfield IA 52537	Name of Employer   Occupation	Date (month, day, year) 06/29/1998	Amount of Each Receipt this Period 1252.77 Bank Interest
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 3291.56		

<b>SUBTOTALS</b> of Receipts This Page (Optional) .....	
<b>TOTALS</b> This Period (last page this line number only) .....	<b>2912.70</b>



<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		<b>25 / 31</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 17
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Aaron Pickrel 508 S. F Street  Indianola IA 50125	<b>Purpose of Disbursement</b>  Reimburse-mileage (127), postage(135.95)  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/14/1998  office supplies (41.89), fund raiser supplies (279.89)	<b>Amount of Each Disbursement This Period</b> 584.63	
<b>Full Name, Mailing Address, and ZIP Code</b> Cathy Hladky 705 Howard St.  Indianola IA 50125	<b>Purpose of Disbursement</b>  Office rent  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/14/1998	<b>Amount of Each Disbursement This Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Commercial Federal Bank 105 N. Washington - PO Box 36  Bloomfield IA 52537	<b>Purpose of Disbursement</b>  Bank fee  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/14/1998	<b>Amount of Each Disbursement This Period</b> 9.01	
<b>Full Name, Mailing Address, and ZIP Code</b> US Postmaster 201 W. 1st St.  Indianola IA 50125	<b>Purpose of Disbursement</b>  Postage  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/15/1998	<b>Amount of Each Disbursement This Period</b> 1104.36	
<b>Full Name, Mailing Address, and ZIP Code</b> US Postmaster 201 W. 1st St.  Indianola IA 50125	<b>Purpose of Disbursement</b>  Postage  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/15/1998	<b>Amount of Each Disbursement This Period</b> 620.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Crestmoor Golf and Country Club Highway 25  Creston IA 50801	<b>Purpose of Disbursement</b>  Golf fundraiser expenses  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/18/1998	<b>Amount of Each Disbursement This Period</b> 2404.31	
<b>Full Name, Mailing Address, and ZIP Code</b> Carter Printing 1739 East Grand  Des Moines IA 50316	<b>Purpose of Disbursement</b>  Printing  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/18/1998	<b>Amount of Each Disbursement This Period</b> 58.35	
<b>Full Name, Mailing Address, and ZIP Code</b> Carter Printing 1739 East Grand  Des Moines IA 50316	<b>Purpose of Disbursement</b>  Printing  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/18/1998	<b>Amount of Each Disbursement This Period</b> 56.70	
<b>Full Name, Mailing Address, and ZIP Code</b> Koch Brothers, Inc. 4th and Grand Avenue  Des Moines IA 50309	<b>Purpose of Disbursement</b>  Equipment rental  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/18/1998	<b>Amount of Each Disbursement This Period</b> 78.75	
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE B ITEMIZED DISBURSEMENTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	<b>26 / 31</b> FOR LINE NUMBER 17
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<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>			
<b>Full Name, Mailing Address, and ZIP Code</b> US West Communications PO Box 737  Des Moines IA 50336-0001	<b>Purpose of Disbursement</b> Telephone deposits  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/18/1998	<b>Amount of Each Disbursement This Period</b> 710.00
<b>Full Name, Mailing Address, and ZIP Code</b> US West Communications PO Box 737  Des Moines IA 50336-0001	<b>Purpose of Disbursement</b> Telephone deposits  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/19/1998	<b>Amount of Each Disbursement This Period</b> 875.00
<b>Full Name, Mailing Address, and ZIP Code</b> Scott Douglas Ourth RR 2 Box 55R  Lamoni IA 50140	<b>Purpose of Disbursement</b> Reimburse-mileage (324.00).  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/20/1998	<b>Amount of Each Disbursement This Period</b> 338.72 office supplies (14.72)
<b>Full Name, Mailing Address, and ZIP Code</b> Jessica Vanden Berg 510 Broadway  Pella IA 50219	<b>Purpose of Disbursement</b> Reimburse-Mileage (734.50).  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/26/1998	<b>Amount of Each Disbursement This Period</b> 772.68 office supplies (38.18)
<b>Full Name, Mailing Address, and ZIP Code</b> Aaron Pickrel 508 S. F Street  Indianola IA 50125	<b>Purpose of Disbursement</b> Salary  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/29/1998	<b>Amount of Each Disbursement This Period</b> 1630.94
<b>Full Name, Mailing Address, and ZIP Code</b> Jessica Vanden Berg 510 Broadway  Pella IA 50219	<b>Purpose of Disbursement</b> Salary  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/29/1998	<b>Amount of Each Disbursement This Period</b> 1175.12
<b>Full Name, Mailing Address, and ZIP Code</b> Koch Brothers, Inc. 4th and Grand Avenue  Des Moines IA 50309	<b>Purpose of Disbursement</b> Equipment rental  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/29/1998	<b>Amount of Each Disbursement This Period</b> 78.75
<b>Full Name, Mailing Address, and ZIP Code</b> Kielock Consultants 236 Massachusetts Avenue, NE, #206  Washington DC 20002	<b>Purpose of Disbursement</b> Consulting  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/29/1998	<b>Amount of Each Disbursement This Period</b> 2000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Alice Fuk Wisner AF Wisner Campaign Services 4401 Dakota Drive West Des Moines IA 50265	<b>Purpose of Disbursement</b> FEC report preparation  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/01/1998	<b>Amount of Each Disbursement This Period</b> 300.00
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>27 / 31</b>
			FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**  
**Boswell for Congress Committee**

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Beeper People 1015 Keo Way  Des Moines IA 50309	Pagers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	06/01/1998	94.34
Kielock Consultants 236 Massachusetts Avenue, NE, #206  Washington DC 20002	Reimbursement - fund raiser refreshments Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	06/01/1998	500.00
Scott Douglas Ourth RR 2 Box 55R  Lamoni IA 50140	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	06/02/1998	1639.94
Matt Mann 615 N. 6th Street  Missouri Valley IA 51555	Computer services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	06/02/1998	135.00
Scott Douglas Ourth RR 2 Box 55R  Lamoni IA 50140	Mileage reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	06/03/1998	531.50
The Strategy Group 730 N. Franklin  Chicago IL 60810	Mailing production Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	06/03/1998	3961.17
Commercial Federal Bank 105 N. Washington - PO Box 36  Bloomfield IA 52537	Bank fee Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	06/03/1998	5.00
Marlene McCarthy 1530 Kanawha Street. #105  Adelphi MD 20765	Reimbursement - fundraiser refreshments Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	06/10/1998	500.00
US West Communications PO Box 737  Des Moines IA 50336-0001	Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	06/12/1998	998.30

**SUBTOTALS** of Disbursements This Page (Optional) .....

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

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		<b>28 / 31</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 17
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Mike Plante PO Box 12015  Charleston WV 25302	<b>Purpose of Disbursement</b>  Research consulting  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/12/1998	<b>Amount of Each Disbursement This Period</b> 5000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mary Alice Wikasin 513 N. J  Indianola IA 50125	<b>Purpose of Disbursement</b>  Salary  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/12/1998	<b>Amount of Each Disbursement This Period</b> 293.79	
<b>Full Name, Mailing Address, and ZIP Code</b> Scott Douglas Ourth RR 2 Box 55R  Lamoni IA 50140	<b>Purpose of Disbursement</b>  Reimbursement - mileage  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/12/1998	<b>Amount of Each Disbursement This Period</b> 153.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Aaron Pickrel 508 S. F Street  Indianola IA 50125	<b>Purpose of Disbursement</b>  Reimburse-postage (472.20)  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/12/1998	<b>Amount of Each Disbursement This Period</b> 670.81 office supplies (198.61)	
<b>Full Name, Mailing Address, and ZIP Code</b> Treasurer, State of Iowa State Capitol Building  Des Moines IA 50319	<b>Purpose of Disbursement</b>  Taxes  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/12/1998	<b>Amount of Each Disbursement This Period</b> 225.70	
<b>Full Name, Mailing Address, and ZIP Code</b> Carter Printing 1739 East Grand  Des Moines IA 50316	<b>Purpose of Disbursement</b>  Printing  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/17/1998	<b>Amount of Each Disbursement This Period</b> 174.30	
<b>Full Name, Mailing Address, and ZIP Code</b> Commercial Federal Bank 105 N. Washington - PO Box 36  Bloomfield IA 52537	<b>Purpose of Disbursement</b>  Taxes  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/17/1998	<b>Amount of Each Disbursement This Period</b> 1579.12	
<b>Full Name, Mailing Address, and ZIP Code</b> US Postmaster 201 W. 1st St.  Indianola IA 50125	<b>Purpose of Disbursement</b>  Postage  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/18/1998	<b>Amount of Each Disbursement This Period</b> 42.75	
<b>Full Name, Mailing Address, and ZIP Code</b> Aaron Pickrel 508 S. F Street  Indianola IA 50125	<b>Purpose of Disbursement</b>  Reimburse - postage (382.03).  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/24/1998	<b>Amount of Each Disbursement This Period</b> 623.51 software (241.48)	
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>29 / 31</b>
			FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**  
**Boswell for Congress Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> Copy Centre 802 1/2 N. Jefferson Street  Indianola IA 50125	Purpose of Disbursement  Copies	Date (month, day, year) 06/24/1998	Amount of Each Disbursement This Period 336.64
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Carter Printing 1739 East Grand  Des Moines IA 50316	Purpose of Disbursement  Letterhead & envelopes	Date (month, day, year) 06/24/1998	Amount of Each Disbursement This Period 312.90
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Commercial Federal Bank 105 N. Washington - PO Box 36  Bloomfield IA 52537	Purpose of Disbursement  Taxes	Date (month, day, year) 06/25/1998	Amount of Each Disbursement This Period 4362.74
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Treasurer, State of Iowa State Capitol Building  Des Moines IA 50319	Purpose of Disbursement  Taxes	Date (month, day, year) 06/25/1998	Amount of Each Disbursement This Period 245.47
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Cathy Hladky 709 Howard St.  Indianola IA 50125	Purpose of Disbursement  Office rent	Date (month, day, year) 06/25/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Koch Brothers, Inc. 4th and Grand Avenue  Des Moines IA 50309	Purpose of Disbursement  Equipment rental	Date (month, day, year) 06/25/1998	Amount of Each Disbursement This Period 78.75
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		

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<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....	
<b>TOTALS</b> This Period (last page this line number only) .....	<b>36371.05</b>

<b>SCHEDULE C</b> (Revised 3/80)	<b>LOANS</b>	Use separate schedule(s) for each numbered line	<b>30 / 31</b>  FOR LINE NUMBER <b>10</b>
<b>NAME OF COMMITTEE (in Full)</b> <b>Boswell for Congress Committee</b>			
Full Name, Mailing Address, and ZIP Code of Loan Source Citizen's Bank 111 N. Main  Leon IA 50144  Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : General 98	Original Amount of Loan  60000.00  REF-ID : <b>1443</b>	Cumulative Payment to Date  58844.64	Balance Outstanding at Close of This Period  1155.36
TERMS : Date incurred: 12/21/1998 Date Due: 12/21/98 Interest Rate(%) = 10.24 <input checked="" type="checkbox"/> Secured			
<b>SUBTOTALS</b> This Period This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			<b>1155.36</b>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary			

<b>SCHEDULE D</b> (Revised 3/80)		<b>DEBTS AND OBLIGATIONS</b> <b>Excluding Loans</b>			<b>31 / 31</b>
		Use separate schedule(s) for each numbered line			FOR LINE NUMBER <b>10</b>
<b>NAME OF COMMITTEE (In Full)</b> <b>Boswell for Congress Committee</b>					
	<b>Outstanding Balance Beginning This Period</b>	<b>Amount Incurred This Period</b>	<b>Payment This Period</b>	<b>Outstanding Balance at Close of This Period</b>	
Full Name, Mailing Address, and Zip Code of Debtor or Creditor Citizen's Bank 111 N. Main  Leon IA 50144	1810.47	20.10	0.00	1830.57	
Nature of Debt (purpose): Loan interest					
<b>1) SUBTOTALS</b> This Period This Page (Optional)					
<b>2) TOTALS</b> This Period (last page this line number only)				<b>1830.57</b>	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)					
<b>4) ADD</b> 2) and 3) and carry forward to appropriate line of Summary Page (last page only)					