

# Latham

## CONGRESS

FEDERAL ELECTION  
COMMISSION MAIL ROOM

Aug 3 11:46 AM '99

July 30, 1999

Federal Election Commission  
999 E Street, N.W.  
Washington, D.C. 20463

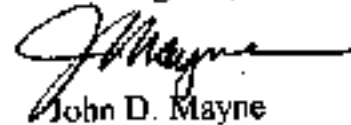
Attn: Tammy Pataluna  
Reports Analyst  
Reports Analysis Division

Re: Identification No. C00287045  
Mid Year Report (1/1/99 - 6/30/99)

Dear Ms. Pataluna,

We enclose the Mid Year Report for the above committee. An unusual number of the contributors listed did not provide us with employer/employment information notwithstanding that the committee routinely requests that information in writing at the time the contributions are solicited. We are engaged in an ongoing effort to obtain additional employer/employment information for these contributors. When we believe we have exhausted our obligation to use our best efforts, we will amend the enclosed report to include the additional information given to us. We do this because we continue to be guided by the principle of complete and accurate disclosure of all campaign finance affairs, and we ask your patience and understanding in this regard. As always, I am at the Commission's disposal to respond to any inquiries you may have.

With regards,



John D. Mayne  
Treasurer,  
Latham for Congress Committee

JDM:jm  
Enclosure:



**Detailed Summary Page**  
of Receipts and Disbursements  
(Page 2, FEC FORM 3)

Name of Committee (in full) Latham for Congress	Report Covering the Period: From: 01/01/99 To: 06/30/99	
<b>I. RECEIPTS</b>	<b>Column A Total This Period</b>	<b>Column B Calendar Year-To-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A)	\$47770.00	
(ii) Unitemized	\$0.00	
(iii) Total of contributions from individual	\$47770.00	\$47770.00
(b) Political Party Committees	\$100.00	\$100.00
(c) Other Political Committees (such as PACs)	\$62200.00	\$62200.00
(d) The Candidate	\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	\$110070.00	\$110070.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>	\$0.00	\$0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>	\$0.00	\$0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>	\$624.72	\$624.72
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b>	\$110694.72	\$110694.72
<b>II. DISBURSEMENTS</b>		
<b>17. OPERATING EXPENDITURES</b>	\$27421.09	\$27421.09
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>	\$0.00	\$0.00
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) Of All Other Loans	\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	\$0.00	\$0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(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
<b>21. OTHER DISBURSEMENTS</b>	\$0.00	\$0.00
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b>	\$27421.09	\$27421.09
<b>III. CASH SUMMARY</b>		
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>		\$25763.52
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>		\$110694.72
<b>25. SUBTOTAL (add Line 23 and Line 24)</b>		\$136458.24
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</b>		\$27421.09
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)</b>		\$109037.15

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code John W Aalfs 4208 Perry Way Sioux City, IA 51104-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Aalfs Manufacturing</p> <p>Occupation President</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 06/30/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Greg Abel 987 Tulip Tree Lane West Des Moines, IA 50266-6640</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer MidAmerican Energy</p> <p>Occupation Management</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 05/18/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Rick Ahee Box 7 Moravia, IA 52571-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>D. Full Name, Mailing Address and Zip Code Scott Arnold 1507 Alderwood Dr SW Altoona, IA 50009-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>E. Full Name, Mailing Address and Zip Code Milt Avery 4011 Hiawatha St W Sioux City, IA 51104-4317</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Avery Brothers</p> <p>Occupation Executive</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 06/17/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>F. Full Name, Mailing Address and Zip Code John Aylward Rt. 2 Box 88 Memphis, MO 63555-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>G. Full Name, Mailing Address and Zip Code Barry &amp; Sandra Backhaus 4859 Bradford Ln Sioux City, IA 51106-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer First Federal Savings Bank</p> <p>Occupation President</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 06/17/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

SUBTOTAL of Receipts This Page (optional)	\$4300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code Alden Bailey PO Box 1618 Sioux City, IA 51102-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Jebro Inc</p> <p>Occupation President</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 06/30/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Georjean Bailey 3008 McDonald Sioux City, IA 51104-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Goodwill Industries</p> <p>Occupation Management</p> <p>Aggregate Year-to-Date -&gt; \$20.00</p>	<p>Date (month, day, year) 06/28/99</p>	<p>Amount of Each Receipt this Period \$20.00</p>
<p>C. Full Name, Mailing Address and Zip Code Darrel Baker 25 Quail CT. Sioux City, IA 51104-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self-Employed</p> <p>Occupation Oral Surgeon</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Date (month, day, year) 06/28/99</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>D. Full Name, Mailing Address and Zip Code Michael &amp; Sue Bennett 3048 Cheyenne Blvd Sioux City, IA 51104-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Terra Chemical</p> <p>Occupation Vice-President</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 06/18/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and Zip Code Marvin S. Berenstein 300 Firstar Bank Bldg, 501 Pierce St PO Box 3207 Sioux City, IA 51102-3207</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self-Employed</p> <p>Occupation Lawyer</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 04/14/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>F. Full Name, Mailing Address and Zip Code James &amp; Gail Bernstein 940 Spyglass Court N Sioux City, SD 57049-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer State Steele Supply</p> <p>Occupation Executive</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 05/07/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Lyle Bitton 906 Mill Street Traer, IA 50675-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$100.00</p>

SUBTOTAL of Receipts This Page (optional)

\$3720.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (In Full)**  
Latham for Congress

<b>A. Full Name, Mailing Address and Zip Code</b> Robert Black 2908 270th Street Williamsburg, IA 52361-	<b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-to-Date -&gt;</b>	<b>Date (month, day, year)</b> 05/26/99   \$100.00	<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>B. Full Name, Mailing Address and Zip Code</b> Elizabeth Bond 326 W Sawgrass Trail Dakota Dunes, SD 57049-	<b>Name of Employer</b>  <b>Occupation</b> Homemaker  <b>Aggregate Year-to-Date -&gt;</b>	<b>Date (month, day, year)</b> 06/30/99   \$1000.00	<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>C. Full Name, Mailing Address and Zip Code</b> Thomas Bonner 13640 Bellerose Dr Chantilly, VA 20151-	<b>Name of Employer</b> MidAmerican Energy  <b>Occupation</b> Management  <b>Aggregate Year-to-Date -&gt;</b>	<b>Date (month, day, year)</b> 04/14/99   \$500.00	<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>D. Full Name, Mailing Address and Zip Code</b> Larry Book 2821 S. Mulberry CT Sioux City, IA 51106-	<b>Name of Employer</b> L & L Builders  <b>Occupation</b> Owner  <b>Aggregate Year-to-Date -&gt;</b>	<b>Date (month, day, year)</b> 05/24/99   \$1000.00	<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>E. Full Name, Mailing Address and Zip Code</b> Loren & Gaylene Bouns 1426 6th St Hull, IA 51239-	<b>Name of Employer</b> Sioux County  <b>Occupation</b> County Supervisor  <b>Aggregate Year-to-Date -&gt;</b>	<b>Date (month, day, year)</b> 01/19/99   \$25.00	<b>Amount of Each Receipt this Period</b> \$25.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
<b>F. Full Name, Mailing Address and Zip Code</b> Roger Bradson 3848 Sunset Drive Spring Park, MN 55384-	<b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-to-Date -&gt;</b>	<b>Date (month, day, year)</b> 05/26/99   \$100.00	<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>G. Full Name, Mailing Address and Zip Code</b> William Burke 1221 Steuben Street PO Box 64 Sioux City, IA 51102-	<b>Name of Employer</b> Standard Ready Mix  <b>Occupation</b> Executive  <b>Aggregate Year-to-Date -&gt;</b>	<b>Date (month, day, year)</b> 04/14/99   \$1000.00	<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>SUBTOTAL of Receipts This Page (optional)</b>	\$3725.00
<b>TOTAL This Period (last page this line number only)</b>	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (In Full)**  
Latham for Congress

<p><b>A. Full Name, Mailing Address and Zip Code</b> Nicholas Calio 11 West Melrose Street Chevy Chase, MD 20815-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-to-Date -&gt;</b> \$250.00</p>	<p><b>Date (month, day, year)</b> 06/28/99</p>	<p><b>Amount of Each Receipt this Period</b> \$250.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b> Mary Carney 30 Ridgeview Rd. Sioux City, IA 51104-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b> Homemaker  <b>Aggregate Year-to-Date -&gt;</b> \$20.00</p>	<p><b>Date (month, day, year)</b> 06/29/99</p>	<p><b>Amount of Each Receipt this Period</b> \$20.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b> Ray Chambers 1431 Woodacre Dr Mc Lean, VA 22101-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Chambers, Conlon &amp; Hartwell <b>Occupation</b> Consultant  <b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Date (month, day, year)</b> 03/16/99</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b> Cy Chesterman 1 Harvest Road Sioux City, IA 51104-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Self-Employed <b>Occupation</b> Beverage Dist.  <b>Aggregate Year-to-Date -&gt;</b> \$1000.00</p>	<p><b>Date (month, day, year)</b> 04/09/99</p>	<p><b>Amount of Each Receipt this Period</b> \$1000.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b> Leonard Clark 320 7th Ave. N. Clear Lake, IA 50428-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-to-Date -&gt;</b> \$100.00</p>	<p><b>Date (month, day, year)</b> 05/26/99</p>	<p><b>Amount of Each Receipt this Period</b> \$100.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b> Jon Cleghorn 1209 46th Street Sioux City, IA 51104-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> First Federal Savings Bank <b>Occupation</b> Vice-President  <b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Date (month, day, year)</b> 06/17/99</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b> Jerome Conlon 2501 M Street NW - #707 Washington, DC 20001-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Chambers, Conlon, &amp; Hartwell <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Date (month, day, year)</b> 05/17/99</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>

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

\$2870.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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**NAME OF COMMITTEE (In Full)**  
Latham for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Connealy 18205 34th Ave. N. Minneapolis, MN 55447-1152		05/26/99	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Occupation	Aggregate Year-to-Date ->	\$100.00
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Randall Crawford 10 Western Hills Coralville, IA 52241-		03/03/99	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Occupation	Aggregate Year-to-Date ->	\$100.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patrick Denzer 2025 Kenwood Pky. Minneapolis, MN 55405-		05/26/99	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Occupation	Aggregate Year-to-Date ->	\$100.00
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert A Dixon 702 10th St Correctionville, IA 51016-	Dixon Construction Co	04/09/99	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Occupation Owner	Aggregate Year-to-Date ->	\$1000.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tom Dorr Box 369 Marcus, IA 51035-		06/30/99	\$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
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Terrence A Duffy 25 115th St Lemont, IL 60439-	Chicago Mercantile & Exchange	04/01/99	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	Occupation VP/Commodity Trader	Aggregate Year-to-Date ->	\$500.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Terrence A Duffy 25 115th St Lemont, IL 60439-	Chicago Mercantile & Exchange	04/01/99	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Occupation VP/Commodity Trader	Aggregate Year-to-Date ->	\$1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional)	\$3300.00
<b>TOTAL</b> This Period (last page this line number only)	



SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
Latham for Congress

<b>A. Full Name, Mailing Address and Zip Code</b> Joel & Debi Ducham 3834 Country Club Blvd  Sioux City, IA 51104- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sioux City Chamber of Commerce	Date (month, day, year) 06/30/99	Amount of Each Receipt this Period \$500.00
	Occupation President	Aggregate Year-to-Date -> \$500.00	
<b>B. Full Name, Mailing Address and Zip Code</b> Lance D Ehmcke 4906 Ravine Park Ln  Sioux City, IA 51106- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed	Date (month, day, year) 06/30/99	Amount of Each Receipt this Period \$1000.00
	Occupation Lawyer	Aggregate Year-to-Date -> \$1000.00	
<b>C. Full Name, Mailing Address and Zip Code</b> Cheryl Engle 5924 Four Seasons Dr.  Sioux City, IA 51106- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 06/29/99	Amount of Each Receipt this Period \$20.00
	Occupation Self-employed	Aggregate Year-to-Date -> \$20.00	
<b>D. Full Name, Mailing Address and Zip Code</b> Phil Fanning 2320 175th Street  Nemaha, IA 50567-7508 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 05/26/99	Amount of Each Receipt this Period \$100.00
	Occupation	Aggregate Year-to-Date -> \$100.00	
<b>E. Full Name, Mailing Address and Zip Code</b> Stephen Foote Foote's Trucking West 1330 260th Ave. Everly, IA 51330- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Foote Trucking West	Date (month, day, year) 06/28/99	Amount of Each Receipt this Period \$50.00
	Occupation Owner	Aggregate Year-to-Date -> \$50.00	
<b>F. Full Name, Mailing Address and Zip Code</b> Marilyn Fowler PO BOX 355 326 Maple St. Lawton, IA 51030- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 06/29/99	Amount of Each Receipt this Period \$30.00
	Occupation	Aggregate Year-to-Date -> \$30.00	
<b>G. Full Name, Mailing Address and Zip Code</b> Verrick O French 3200 Leland St  Chevy Chase, MD 20815- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer French & Company	Date (month, day, year) 03/16/99	Amount of Each Receipt this Period \$1000.00
	Occupation Consultant	Aggregate Year-to-Date -> \$1000.00	

SUBTOTAL of Receipts This Page (optional)	\$2700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full)  
Latham for Congress

A. Full Name, Mailing Address and Zip Code Tod Geyer 412 Maple PO Box 43 Early, IA 50535-0043 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/26/99	
Aggregate Year-to-Date ->		\$100.00	
B. Full Name, Mailing Address and Zip Code Robert E. Gleeson Post Office Box 8800 Sioux City, IA 51102- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Self-Employed	06/30/99	
Occupation		Klinger Cons.	
Aggregate Year-to-Date ->		\$500.00	
C. Full Name, Mailing Address and Zip Code Monica Graybill 312 1/2 Walnut Street Early, IA 50535- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/26/99	
Aggregate Year-to-Date ->		\$100.00	
D. Full Name, Mailing Address and Zip Code Larry Grieme 1307 180th Street Schaller, IA 51053- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/26/99	
Aggregate Year-to-Date ->		\$100.00	
E. Full Name, Mailing Address and Zip Code William Hackett 3804 Chippewa Court Sioux City, IA 51104- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Metz Baking	06/29/99	
Occupation		Accountant	
Aggregate Year-to-Date ->		\$25.00	
F. Full Name, Mailing Address and Zip Code Janis A Hamilton 1065 S Ave Jefferson, IA 50129- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	People Trust & Savings Bank	01/19/99	
Occupation		Secretary	
Aggregate Year-to-Date ->		\$25.00	
G. Full Name, Mailing Address and Zip Code Michael & LindaLee Hamm 2715 S. Patterson Street Sioux City, IA 51106- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	City of Sioux City	06/28/99	
Occupation		Police	
Aggregate Year-to-Date ->		\$25.00	

SUBTOTAL of Receipts This Page (optional)	\$875.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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**NAME OF COMMITTEE (In Full)**  
Latham for Congress

<b>A. Full Name, Mailing Address and Zip Code</b> Robert Haney 5705 Beechtree Dr. West Des Moines, IA 50266-	Name of Employer _____ Occupation _____	Date (month, day, year) 05/26/99	Amount of Each Receipt this Period \$100.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		Aggregate Year-to-Date -> \$100.00
<b>B. Full Name, Mailing Address and Zip Code</b> Steve Harms 4120 Timberwood Dr. West Des Moines, IA 50265-	Name of Employer _____ Occupation _____	Date (month, day, year) 05/26/99	Amount of Each Receipt this Period \$100.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		Aggregate Year-to-Date -> \$100.00
<b>C. Full Name, Mailing Address and Zip Code</b> Clarence Hoffman 569 S. 5th Street Charter Oak, IA 51439-	Name of Employer _____ Occupation _____	Date (month, day, year) 05/26/99	Amount of Each Receipt this Period \$200.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		Aggregate Year-to-Date -> \$200.00
<b>D. Full Name, Mailing Address and Zip Code</b> Marilyn Hogue 1914 Summit St. Sioux City, IA 51104-	Name of Employer Self-Employed Occupation Day care	Date (month, day, year) 06/30/99	Amount of Each Receipt this Period \$40.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		Aggregate Year-to-Date -> \$40.00
<b>E. Full Name, Mailing Address and Zip Code</b> Edna Hollister 1521 Osage Court Sioux City, IA 51104-	Name of Employer _____ Occupation Retired	Date (month, day, year) 06/28/99	Amount of Each Receipt this Period \$35.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		Aggregate Year-to-Date -> \$35.00
<b>F. Full Name, Mailing Address and Zip Code</b> David & Barbara Holtze 3639 Lindenwood St Sioux City, IA 51104-	Name of Employer Holtze Construction Occupation Contractor	Date (month, day, year) 04/14/99	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 -> \$1000.00
<b>G. Full Name, Mailing Address and Zip Code</b> Stewart A Huff 221 41 St Sioux City, IA 51104-	Name of Employer _____ Occupation Attorney	Date (month, day, year) 06/30/99	Amount of Each Receipt this Period \$25.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		Aggregate Year-to-Date -> \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional)	\$1500.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the detailed summary page

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**NAME OF COMMITTEE (In Full)**  
Latham for Congress

<p><b>A. Full Name, Mailing Address and Zip Code</b> Jay Jacobi 7423 Cody Dr. West Des Moines, IA 50266-2607</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 05/26/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$100.00</p>	<p><b>Amount of Each Receipt this Period</b> \$100.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b> Colin &amp; Pokey Jensen Box 1618 Sioux City, IA 51102-1618</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Irving F Jensen Co <b>Occupation</b> Contractor</p>	<p><b>Date (month, day, year)</b> 06/30/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$1000.00</p>	<p><b>Amount of Each Receipt this Period</b> \$1000.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b> Irving F Jensen PO Box 1618 Sioux City, IA 51102-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Irving F. Jensen Companies <b>Occupation</b> Contractor</p>	<p><b>Date (month, day, year)</b> 04/14/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$1000.00</p>	<p><b>Amount of Each Receipt this Period</b> \$1000.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b> Mark Jensen 3927 Country Club Blvd. Sioux City, IA 51104-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> self-employed <b>Occupation</b> Contractor</p>	<p><b>Date (month, day, year)</b> 06/30/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$1000.00</p>	<p><b>Amount of Each Receipt this Period</b> \$1000.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b> Wayne Johnson 728 Grand Ave. Spencer, IA 51301-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b> Banker</p>	<p><b>Date (month, day, year)</b> 06/29/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$1000.00</p>	<p><b>Amount of Each Receipt this Period</b> \$1000.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b> Burton M Joyce 600 4th St Sioux City, IA 51101-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Terra Chemical <b>Occupation</b> CEO</p>	<p><b>Date (month, day, year)</b> 06/18/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b> John Joyce 407 SW Country Club Lane Ankeny, IA 50021-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 05/26/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$100.00</p>	<p><b>Amount of Each Receipt this Period</b> \$100.00</p>

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

\$4700.00

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

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the detailed summary page

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NAME OF COMMITTEE (in full)  
Latham for Congress

A. Full Name, Mailing Address and zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jack Kammerer 232 Firethorn Trail Dakota Dunes, SD 57049- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Banker	06/30/99	\$1000.00
Aggregate Year-to-Date ->		\$1000.00	
B. Full Name, Mailing Address and Zip Code Dennis Keifer 218 N Greeley Nora Springs, IA 50458- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	05/26/99	\$100.00
Aggregate Year-to-Date ->		\$100.00	
C. Full Name, Mailing Address and Zip Code Jerry Kincade 1702 280th St Winterset, IA 50273- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	05/26/99	\$100.00
Aggregate Year-to-Date ->		\$100.00	
D. Full Name, Mailing Address and Zip Code Doug Lacey 4513 Cheyenne Blvd Sioux City, IA 51104- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Michols Risk & Co Occupation Owner	04/09/99	\$1000.00
Aggregate Year-to-Date ->		\$1000.00	
E. Full Name, Mailing Address and Zip Code Ritch LeGrand 4328 Perry Way Sioux City, IA 51104- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	LeGrand & Co Occupation Real Estate	06/30/99	\$500.00
Aggregate Year-to-Date ->		\$500.00	
F. Full Name, Mailing Address and zip Code Ray Lenz RR 2 Carroll, IA 51401- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	05/26/99	\$100.00
Aggregate Year-to-Date ->		\$100.00	
G. Full Name, Mailing Address and Zip Code Barry & Sue Loughridge 450 N Royal Troon Dakota Dunes, SD 57049- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Grandy-Pratt Company Occupation Insurance Agent	06/30/99	\$1000.00
Aggregate Year-to-Date ->		\$1000.00	

SUBTOTAL of Receipts This Page (optional)	\$3800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

Latham for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ron Haas 2206 110th Street Menlo, IA 50164- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		05/26/99	\$100.00
		Aggregate Year-to-Date ->	\$100.00
B. Full Name, Mailing Address and Zip Code Gerald McGowan 2605 W Solway St. Sioux City, IA 51104- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Physician	Date (month, day, year) 06/30/99	Amount of Each Receipt this Period \$1000.00
		Aggregate Year-to-Date ->	\$1000.00
C. Full Name, Mailing Address and Zip Code F.G. Meyer 320 Firethorn Trail Dakota Dunes, SD 57049- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 06/18/99	Amount of Each Receipt this Period \$500.00
		Aggregate Year-to-Date ->	\$500.00
D. Full Name, Mailing Address and Zip Code John Wlynski Gateway Country Store 214 N. Derby Ln. North Sioux City, SD 57049- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Gateway 2000 Occupation	Date (month, day, year) 05/19/99	Amount of Each Receipt this Period \$500.00
		Aggregate Year-to-Date ->	\$500.00
E. Full Name, Mailing Address and Zip Code Karen Molstad 216 Cook Dr. Sioux City, IA 51104- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 06/29/99	Amount of Each Receipt this Period \$25.00
		Aggregate Year-to-Date ->	\$25.00
F. Full Name, Mailing Address and Zip Code Amelia Moore 216 Buckley St. Sloan, IA 51055- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sioux City School Occupation Teacher	Date (month, day, year) 06/29/99	Amount of Each Receipt this Period \$20.00
		Aggregate Year-to-Date ->	\$20.00
G. Full Name, Mailing Address and Zip Code John Murphy 735 6th Street SE Le Mars, IA 51031- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 05/26/99	Amount of Each Receipt this Period \$100.00
		Aggregate Year-to-Date ->	\$100.00

SUBTOTAL of Receipts This Page (optional)	\$2245.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code Rodney Nelson 3147 139th Ave. N.W. Anoka, MN 55304-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>B. Full Name, Mailing Address and Zip Code Marci Nichols 425 Lake Street Laurens, IA 50554-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>C. Full Name, Mailing Address and Zip Code Terry Nielsen 832 Walnut Mapleton, IA 51034-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>D. Full Name, Mailing Address and Zip Code Deanna Orwig 3940 330th Ave. Ruthven, IA 51358-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$150.00</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$150.00</p>
<p>E. Full Name, Mailing Address and Zip Code Douglas E &amp; Cathy Palmer 6 Red Fox Run Sioux City, IA 51104-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Terminal Grain Corp.  Occupation Manager</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 04/09/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>F. Full Name, Mailing Address and Zip Code Robert Parkerson 7218 W. 115th Apt 1008 Overland Park, KS 66210-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>G. Full Name, Mailing Address and Zip Code C. Wilson Persinger 4420 Hamilton Blvd Sioux City, IA 51104-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Wilson Trailer Company  Occupation Owner</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 06/30/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

SUBTOTAL of Receipts This Page (optional)

\$2550.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code Warren Floeger 2140 Buchanan Ave. Schaller, IA 51053-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 05/26/99</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>B. Full Name, Mailing Address and Zip Code John &amp; Barbara Redwine 33533 S Ridge Road Sioux City, IA 51108-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer St Luke's Health System Occupation Administrator</p>	<p>Date (month, day, year) 06/28/99</p> <p>Aggregate Year-to-Date -&gt; \$25.00</p>	<p>Amount of Each Receipt this Period \$25.00</p>
<p>C. Full Name, Mailing Address and Zip Code Larry Rosenstein 23 Old Creek Ct. Potsdam, MD 20854-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 05/26/99</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>D. Full Name, Mailing Address and Zip Code Leanne Samuelson 320 SW 9th Ogden, IA 50212-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 05/26/99</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>E. Full Name, Mailing Address and Zip Code Henry Joe Sandve 17 W Main Marshalltown, IA 50158-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 05/26/99</p> <p>Aggregate Year-to-Date -&gt; \$200.00</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>F. Full Name, Mailing Address and Zip Code Wrede Smith 4301 Perry Way Sioux City, IA 51104-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer American Popcorn Company Occupation President</p>	<p>Date (month, day, year) 06/30/99</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>G. Full Name, Mailing Address and Zip Code George, Sr &amp; Carolyn Spellman 3849 Jones St Sioux City, IA 51104-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer retired Occupation Physician</p>	<p>Date (month, day, year) 06/28/99</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$2525.00</p>
<p>TOTAL This Period (last page this line number only)</p>	



SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code Ralph Stanifer Post Office Box 568  Sioux City, IA 51102-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation Doctor</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 06/30/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Therese Steppal 12109 Cottonwood St. NW  Minneapolis, MN 55448-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>C. Full Name, Mailing Address and Zip Code Marsen Taj Mirza 19 Foreside Common Dr  Falmouth, ME 04105-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$150.00</p>	<p>Date (month, day, year) 01/19/99</p>	<p>Amount of Each Receipt this Period \$150.00</p>
<p>D. Full Name, Mailing Address and Zip Code Lloyd Tinkle 1903 Rebecca St.  Sioux City, IA 51103-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation Retired</p> <p>Aggregate year-to-Date -&gt; \$10.00</p>	<p>Date (month, day, year) 06/28/99</p>	<p>Amount of Each Receipt this Period \$10.00</p>
<p>E. Full Name, Mailing Address and Zip Code Duane Towers 100 Oakhill Dr.  Charidan, IA 50050-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>F. Full Name, Mailing Address and Zip Code Ruth Ann Tronnes 14735 Waco St. NW  Anoka, MN 55303-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>G. Full Name, Mailing Address and Zip Code Clifford Tufty PO Box 3147  Sioux City, IA 51102-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Northern Auto Park  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 06/30/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

SUBTOTAL of Receipts This Page (optional)

\$1960.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
Latham for Congress

<b>A. Full Name, Mailing Address and Zip Code</b> Timothy Verbrugge 2905 Bellepine Circle Sioux Falls, SD 57103- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation	Date (month, day, year) 05/26/99	Amount of Each Receipt this Period \$100.00
	Aggregate Year-to-Date -> \$100.00		
<b>B. Full Name, Mailing Address and Zip Code</b> Norm Waitt PO Box 980 N Sioux City, SD 57049- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation	Date (month, day, year) 06/30/99	Amount of Each Receipt this Period \$1000.00
	Aggregate Year-to-Date -> \$1000.00		
<b>C. Full Name, Mailing Address and Zip Code</b> Richard & Karleen Waller 463 Prairie Passage Dakota Dunes, SD 57049- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Security National Bank Occupation President and CEO	Date (month, day, year) 06/17/99	Amount of Each Receipt this Period \$1000.00
	Aggregate Year-to-Date -> \$1000.00		
<b>D. Full Name, Mailing Address and Zip Code</b> Fay Robert Wells Crowland Acres Rural Route 1, Box 136 Le Mars, IA 51031- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Wells Dairy Inc. Occupation CEO	Date (month, day, year) 06/18/99	Amount of Each Receipt this Period \$500.00
	Aggregate Year-to-Date -> \$500.00		
<b>E. Full Name, Mailing Address and Zip Code</b> Beverly Wharton 4529 Grayhawk Ridge Dr. Sioux City, IA 51106- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mid America Energy Occupation Executive	Date (month, day, year) 05/07/99	Amount of Each Receipt this Period \$1000.00
	Aggregate Year-to-Date -> \$1000.00		
<b>F. Full Name, Mailing Address and Zip Code</b> James Wharton 4529 Grayhawk Ridge Dr Sioux City, IA 51106- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Gateway 2000 Occupation Executive	Date (month, day, year) 05/07/99	Amount of Each Receipt this Period \$1000.00
	Aggregate Year-to-Date -> \$1000.00		
<b>G. Full Name, Mailing Address and Zip Code</b> Dick J. Winkel 107 Quail Ridge Sergeant Bluff, IA 51054- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Long Lines Ltd. Occupation Owner	Date (month, day, year) 06/30/99	Amount of Each Receipt this Period \$1000.00
	Aggregate Year-to-Date -> \$1000.00		

SUBTOTAL of Receipts This Page (optional)	\$5600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code Thomas Witthoft 14484 Woodcrest Dr. Clive, IA 50325-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 05/27/99</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>B. Full Name, Mailing Address and Zip Code Bruce Woodward 3403 Merritt Rd. Marshalltown, IA 50150-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 05/26/99</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>C. Full Name, Mailing Address and Zip Code Matthew Wyatt 106 W. Warren Street Mount Pleasant, IA 52641-2233</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 05/27/99</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>D. Full Name, Mailing Address and Zip Code Robert M Young Jr. 1401 50th St. Ste. 301 West Des Moines, IA 50266-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Rain and Hail Insurance Inc. Occupation Chief Investment Officer</p>	<p>Date (month, day, year) 05/27/99</p> <p>Aggregate Year-to-Date -&gt; \$100.00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>E. Full Name, Mailing Address and Zip Code Charlie Zook 4300 Bennington Road Sioux City, IA 51103-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self-Employed Occupation Car Dealer</p>	<p>Date (month, day, year) 06/30/99</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>F. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) / /</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) / /</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Amount of Each Receipt this Period</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$1400.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>\$47770.00</p>

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code AACI PAC/American Assoc. of Crop Insurer Mike McLeod 1 Massachusetts Ave # 800 Washington, DC 20001-140</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 03/16/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -&gt; \$500.00</p>			
<p>B. Full Name, Mailing Address and Zip Code AACI PAC/American Assoc. of Crop Insurer Mike McLeod 1 Massachusetts Ave # 800 Washington, DC 20001-140</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>Aggregate Year-to-Date -&gt; \$1500.00</p>			
<p>C. Full Name, Mailing Address and Zip Code Action Committee - Rural Electrification 4301 Wilson Blvd  Arlington, VA 22203-1860</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 03/16/99</p>	<p>Amount of Each Receipt this Period \$750.00</p>
<p>Aggregate Year-to-Date -&gt; \$750.00</p>			
<p>D. Full Name, Mailing Address and Zip Code Action Committee - Rural Electrification 4301 Wilson Blvd  Arlington, VA 22203-1860</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 06/08/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>Aggregate Year-to-Date -&gt; \$1750.00</p>			
<p>E. Full Name, Mailing Address and Zip Code AG PAC / Ag Processing, Inc 12700 W Dodge Rd PO Box 2047 NE 68103-2047</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 04/01/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -&gt; \$500.00</p>			
<p>F. Full Name, Mailing Address and Zip Code Associated General Contractors of Am PAC 1957 E St NW  Washington, DC 20006-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 03/24/99</p>	<p>Amount of Each Receipt this Period \$750.00</p>
<p>Aggregate Year-to-Date -&gt; \$750.00</p>			
<p>G. Full Name, Mailing Address and Zip Code AMI/American Meat Institute PAC Mike Brown, VP-Leg Affairs 1700 N Moore St Ste 1600 Arlington, VA 22209-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 03/16/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -&gt; \$500.00</p>			

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$5000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the detailed Summary Page

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NAME OF COMMITTEE (In Full)  
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code AMI/American Meat Institute PAC Mike Brown, VP-Leg Affairs 1700 N Moore St Ste 1600 Arlington, VA 22209-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 05/28/99 \$1000.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code AMPAC/CBT-AuctionMarkets-ChicagoBdTrade 141 W Jackson Chicago, IL 60604-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 04/14/99 \$750.00</p>	<p>Amount of Each Receipt this Period \$750.00</p>
<p>C. Full Name, Mailing Address and Zip Code ARMPAC Americans for A Republican Majority Tom DeLay, Chr Washington, DC 20002-4937</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 06/03/99 \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>D. Full Name, Mailing Address and Zip Code Agricultural Retailers Assoc. PAC Andrew Aaher, Mgr-Gvmt Affairs 1900 M St NW # 740 Washington, DC 20036-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/16/99 \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and Zip Code Alabama Farmers PAC PO Box 11023 Montgomery, AL 36191-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 06/16/99 \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>F. Full Name, Mailing Address and Zip Code Allied Domestic Spirits &amp; Wine Chris R Swonger, VP Gov Affairs 700 11th St NW Ste 680 Washington, DC 20001-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 05/28/99 \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code American Maritime Officers Voluntary Political Action Fund 650 Fourth Avenue Brooklyn, NY 11232-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 06/21/99 \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

SUBTOTAL of Receipts This Page (optional)

\$5250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code Am Maritimes Officer Retirees Assn 490 L'Enfant Plaza East SW, Ste 7204 Washington, DC 20024-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/24/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
		<p>Aggregate Year-to-Date -&gt;</p>	<p>\$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code American Commercial Lines, Inc Effective Government Fund PO Box 610 Jeffersonville, IN 47130-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 04/29/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
		<p>Aggregate Year-to-Date -&gt;</p>	<p>\$1000.00</p>
<p>C. Full Name, Mailing Address and Zip Code American Sugar Cane League Macon Edwards 600 Pennsylvania Ave SE Ste 320 Washington, DC 20003-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/16/99</p>	<p>Amount of Each Receipt this Period \$750.00</p>
		<p>Aggregate Year-to-Date -&gt;</p>	<p>\$750.00</p>
<p>D. Full Name, Mailing Address and Zip Code American Sugarbeet Growers Association Luther Markwart 1156 15th St NW #1101 Washington, DC 20005-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/16/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
		<p>Aggregate Year-to-Date -&gt;</p>	<p>\$500.00</p>
<p>E. Full Name, Mailing Address and Zip Code American Supply Ass 222 Merchandise Mart # 1360 Chicago, IL 60654-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 04/14/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
		<p>Aggregate Year-to-Date -&gt;</p>	<p>\$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Association of American Ag Insurers Rick Gibson, Chr &amp; CEO 535 W Broadway Council Bluffs, IA 51503-4212</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 04/01/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
		<p>Aggregate Year-to-Date -&gt;</p>	<p>\$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code Association of American Ag Insurers Rick Gibson, Chr &amp; CEO 535 W Broadway Council Bluffs, IA 51503-4212</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 06/16/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
		<p>Aggregate Year-to-Date -&gt;</p>	<p>\$1000.00</p>

SUBTOTAL of Receipts This Page (optional)	\$4750.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Sundry Page

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**NAME OF COMMITTEE (In Full)**  
Latham for Congress

<p><b>A. Full Name, Mailing Address and Zip Code</b> BANKPAC American Bankers Association 1120 Connecticut Ave NW Washington, DC 20036-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 03/16/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$1000.00</p>	<p><b>Amount of Each Receipt this Period</b> \$1000.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b> Build PAC- Natl Assoc of Home Builders Natl Assn of Home Builders 1201 15th St NW Washington, DC 20005-2800</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 06/21/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$1000.00</p>	<p><b>Amount of Each Receipt this Period</b> \$1000.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b> Beet Sugar PAC James W Johnson, President US Beet Sugar Assn Washington, DC 20005-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 03/24/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b> Bell Atlantic PAC 1717 Arch Street 46W Philadelphia, PA 19103-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 04/29/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b> Brown &amp; Williamson Tobacco Employee PAC PO Box 35090 Louisville, KY 40232-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 05/17/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$5000.00</p>	<p><b>Amount of Each Receipt this Period</b> \$5000.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b> Business Technology Assoc. PAC 222 S. Riverside Plaza Suite 2100 Chicago, IL 60606-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 05/13/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b> Chicago Mercantile Exchange PAC 30 S. Wacker Drive Chicago, IL 60606-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 04/29/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>

<p><b>SUBTOTAL</b> of Receipts This Page (optional)</p>	<p>\$9000.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the detailed Summary Page

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

**NAME OF COMMITTEE (In Full)**

Latham for Congress

A. Full Name, Mailing Address and Zip Code Chicago Mercantile Exchange PAC 30 S. Wacker Drive Chicago, IL 60606- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation  Aggregate Year-to-Date ->	Date (month, day, year) 06/17/99  \$1000.00	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code Crop Protection PAC 1156 15th St NW - Ste 400 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 ->	Date (month, day, year) 03/16/99  \$750.00	Amount of Each Receipt this Period \$750.00
C. Full Name, Mailing Address and Zip Code ConAgra Good Government Assoc. One ConAgra Dr Omaha, NE 68102-5501 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation  Aggregate Year-to-Date ->	Date (month, day, year) 05/24/99  \$750.00	Amount of Each Receipt this Period \$750.00
D. Full Name, Mailing Address and Zip Code ConAgra Good Government Assoc. One ConAgra Dr Omaha, NE 68102-5501 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation  Aggregate Year-to-Date ->	Date (month, day, year) 06/16/99  \$1750.00	Amount of Each Receipt this Period \$1000.00
E. Full Name, Mailing Address and Zip Code Cmt. for Advancement of Cotton PO Box #20292 Memphis, TN 38102- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation  Aggregate Year-to-Date ->	Date (month, day, year) 06/28/99  \$1000.00	Amount of Each Receipt this Period \$1000.00
F. Full Name, Mailing Address and Zip Code Dealers Election Action Committee The National Automobile Dealers Assoc. 8400 Westpark Drive Mc Lean, VA 22102- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation  Aggregate Year-to-Date ->	Date (month, day, year) 04/14/99  \$500.00	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and Zip Code DEERE PAC - ILLINDIS John Deere RD Moline, IL 61265- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation  Aggregate Year-to-Date ->	Date (month, day, year) 05/07/99  \$750.00	Amount of Each Receipt this Period \$750.00

SUBTOTAL of Receipts This Page (optional)	\$5250.00
TOTAL This Period (last page this line number only)	



SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the detailed Summary Page

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NAME OF COMMITTEE (In Full)

Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code EGGPAC-United Egg Assn PAC 1303 Hightower Tr Ste 200 Atlanta, GA 30350-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 06/16/99 \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Equitable of Iowa Companies PAC 909 Locust St Des Moines, IA 50309-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/16/99 \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>C. Full Name, Mailing Address and Zip Code FIPAC 2001 Pennsylvania Ave. NW #600 Washington, DC 20006-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 04/29/99 \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code FPL PAC-Florida Power &amp; Light Co Thomas W Barlow, Mgr, Gov. Affairs PO Box 14000 Juno Beach, FL 33408-0420</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 04/29/99 \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and Zip Code Farm Credit PAC 50 F St NW Ste 900 Washington, DC 20001-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 06/16/99 \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>F. Full Name, Mailing Address and Zip Code Farm Credit PAC 50 F St NW Ste 900 Washington, DC 20001-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 06/21/99 \$2000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Farmers Mutual Hail Insurance PAC Mr Bill Rutledge, President 2323 Grand Ave Des Moines, IA 50312-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 05/26/99 \$200.00</p>	<p>Amount of Each Receipt this Period \$200.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$5200.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full)  
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code Farmland Industries PAC PO Box 12473  Kansas City, MO 64116-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 05/07/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Food Marketing Inst. PAC Nancy Yanish, Dir-Ag Relations 800 Connecticut Ave NW Ste 500 Washington, DC 20006-2701</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt; \$750.00</p>	<p>Date (month, day, year) 04/01/99</p>	<p>Amount of Each Receipt this Period \$750.00</p>
<p>C. Full Name, Mailing Address and Zip Code GM PAC/General Mills PAC Robert Bird, Director 601 Pennsylvania Ave NW Washington, DC 20004-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 05/24/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>D. Full Name, Mailing Address and Zip Code Gateway 2000 Good Gov PAC 228 S Washington St Ste 200  Alexandria, VA 22314-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 05/07/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and Zip Code Greenberg, Traurig, Hoffman, Lipoff, Rosen &amp; Quentel, PAC 1221 Brickell Ave Miami, FL 33131-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 06/07/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code IBPAC/Independent Bankers PAC Mary Helen Atkins 1 Thomas Cir NW Ste 400 Washington, DC 20005-5802</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 03/16/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code IBPAC/Independent Bankers PAC Mary Helen Atkins 1 Thomas Cir NW Ste 400 Washington, DC 20005-5802</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 04/09/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>

SUBTOTAL, of Receipts This Page (optional)	\$4250.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (In Full)**  
Latham for Congress

<p><b>A. Full Name, Mailing Address and Zip Code</b> IBPAC/Independent Bankers PAC Mary Helen Atkins 1 Thomas Cir NW Ste 400 Washington, DC 20005-5802</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 06/16/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$1500.00</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b> IMPAC/Mutual of Omaha Companies PAC Mutual of Omaha Plaza Omaha, NE 68175-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 03/16/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$750.00</p>	<p><b>Amount of Each Receipt this Period</b> \$750.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b> InsurPAC-Independent Insurance Agents Am Maria L Berthoud, VP-Fed Govt Affairs 412 1st St SE Ste 300 Washington, DC 20003-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 04/01/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$1000.00</p>	<p><b>Amount of Each Receipt this Period</b> \$1000.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b> Iowa Farm Bureau Federation PAC Emily Piper Eide 5400 University Ave W Des Moines, IA 50265-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 04/09/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b> MAYTAG Employees for Good Government Doug Horstman, VP-Govt Affairs 403 W 4th St N Newton, IA 50208-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 03/16/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b> MCI PAC 1801 Pennsylvania Ave NW Washington, DC 20006-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 06/28/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$750.00</p>	<p><b>Amount of Each Receipt this Period</b> \$750.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b> National Council of Farmer Co-op's PAC 50 F Street NW - Suite 900 Washington, DC 20001-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 06/16/99</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$1000.00</p>	<p><b>Amount of Each Receipt this Period</b> \$1000.00</p>

<b>SUBTOTAL of Receipts This Page (optional)</b>	\$5000.00
<b>TOTAL This Period (last page this line number only)</b>	

SCHEDULE A

ITEMIZED RECEIPTS

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**NAME OF COMMITTEE (In Full)**  
Latham for Congress

<p><b>A. Full Name, Mailing Address and Zip Code</b> Natl Comm. to Preserve SS &amp; Medicare PAC Max Richtman-Exec VP-PAC Dir 10 G St NE Ste 600 Washington, DC 20002-4215</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 03/16/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b> NORWEST PAC 6th and Marquette  Minneapolis, MN 55479-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b> NRA Political Victory Fund-Natl Rifle As 11250 Waples Mill Rd  Fairfax, VA 22030-7400</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; \$1500.00</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$1500.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b> National Funeral Directors Assoc PAC 11121 West Oklahoma Ave  Milwaukee, WI 53227-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 05/17/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b> National Turkey Federation PAC 1225 New York Ave NW Ste 400  Washington, DC 20005-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 05/13/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b> National Chicken Council PAC Mary M Colville, Dir--Govt Affairs 1015 15th St NW Ste 930 Washington, DC 20005-2605</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 04/01/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b> Northwest Airlines PAC Sally Veith, Director 901 15th St NW Washington, DC 20005-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 03/16/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>

<b>SUBTOTAL of Receipts This Page (optional)</b>	\$5500.00
<b>TOTAL This Period (last page this line number only)</b>	

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code Nuclear Energy Institute 1776 I St NW Ste 400 Washington, DC 20006-3708</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/16/99 \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code PMA PAC-Paul Magliocchetti Assoc 1755 Jefferson Davis Hwy-Ste 1107 Arlington, VA 22202-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/16/99 \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>C. Full Name, Mailing Address and Zip Code PMAA-Petroleum Marketers Assn Am Sm Busi 1901 N Fort Meyer Dr Ste 1200 Arlington, VA 22209-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 05/21/99 \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Public Ownership of Electrical Resources American Public Power Assn Chris Eckl, Govt Rel Rep Washington, DC 20037-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/16/99 \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and Zip Code PRINPAC-Principal Financial Grp Stuart Brahs, VP-Fed Govt Relations 711 High St Des Moines, IA 50392-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/16/99 \$750.00</p>	<p>Amount of Each Receipt this Period \$750.00</p>
<p>F. Full Name, Mailing Address and Zip Code PHIL-PAC - Philip Morris PAC Beverly B McKittrick 120 Park Ave - 25th Floor New York, NY 10017-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/24/99 \$750.00</p>	<p>Amount of Each Receipt this Period \$750.00</p>
<p>G. Full Name, Mailing Address and Zip Code Pork Pac / Iowa Pork Producers Jerry Becker PO Box 71009 Des Moines, IA 50325-1009</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/24/99 \$750.00</p>	<p>Amount of Each Receipt this Period \$750.00</p>

SUBTOTAL of Receipts This Page (optional)

\$4250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code RHIS PAC-Rain &amp; Hail Insurance PAC 1501 50th St Ste 200 West Des Moines, IA 50266-5925</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/24/99</p>	<p>Amount of Each Receipt this Period \$750.00</p>
Aggregate Year-to-Date ->		\$750.00	
<p>B. Full Name, Mailing Address and Zip Code RHIS PAC-Rain &amp; Hail Insurance PAC 1501 50th St Ste 200 West Des Moines, IA 50266-5925</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 05/26/99</p>	<p>Amount of Each Receipt this Period \$1500.00</p>
Aggregate Year-to-Date ->		\$2250.00	
<p>C. Full Name, Mailing Address and Zip Code RJR PAC / RJR-Nabisco PO Box 718 Winston Salem, NC 27102-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 04/09/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
Aggregate Year-to-Date ->		\$1000.00	
<p>D. Full Name, Mailing Address and Zip Code SBC Communications Inc Employees Federal PAC 175 E. Houston, RM 4-R-4 San Antonio, TX 78205-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 06/28/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
Aggregate Year-to-Date ->		\$1000.00	
<p>E. Full Name, Mailing Address and Zip Code Sea-Land PAC Peter Finnerty, VP Public Affairs 1331 Pennsylvania Ave NW # 560 Washington, DC 20004-1703</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/16/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
Aggregate Year-to-Date ->		\$500.00	
<p>F. Full Name, Mailing Address and Zip Code Southern Minnesota Sugar Coop PAC PO Box 500 Renville, MN 56284-0500</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/24/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
Aggregate Year-to-Date ->		\$500.00	
<p>G. Full Name, Mailing Address and Zip Code TECO Energy Employees' PAC Jim Woodroffe, VP-Fed Affairs 601 Pennsylvania Ave NW # 1405 Washington, DC 20004-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 04/01/99</p>	<p>Amount of Each Receipt this Period \$750.00</p>
Aggregate Year-to-Date ->		\$750.00	

SUBTOTAL of Receipts This Page (optional)	\$6000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full)  
Latham for Congress

A. Full Name, Mailing Address and Zip Code OPSPAC-United Parcel Service PAC 55 Glenlake Pkwy NE Atlanta, GA 30328-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$500.00
	Occupation	04/09/99	
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 USTeam PAC 100 S Putnam Ave Greenwich, CT 06030-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$500.00
	Occupation	06/03/99	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Aggregate Year-to-Date ->		\$500.00
C. Full Name, Mailing Address and Zip Code Union Pacific Fund for Effective Govt. 555 - 13th St NW Suite 450 W Washington, DC 20004-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$750.00
	Occupation	03/24/99	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Aggregate Year-to-Date ->		\$750.00
D. Full Name, Mailing Address and Zip Code WATERPAC-Natl Rural Water Assn 2915 S. 13TH Duncan, OK 73533-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$500.00
	Occupation	05/07/99	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Aggregate Year-to-Date ->		\$500.00
E. Full Name, Mailing Address and Zip Code ZENECA PAC 1800 Concord Pike PO Box 15438 Wilmington, DE 19850-5438	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$500.00
	Occupation	03/16/99	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Aggregate Year-to-Date ->		\$500.00
F. Full Name, Mailing Address and Zip Code /	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code /	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	\$2750.00
TOTAL This Period (last page this line number only)	\$62200.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
Latham for Congress

A. Full Name, Mailing Address and Zip Code O'Brien County Republicans 6010 320th St Sanborn, IA 51248-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$100.00
	Occupation	01/29/99	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$100.00
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		

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



SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)			
Latham for Congress			
A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147		01/31/99	\$6.93
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$6.93
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147		01/31/99	\$43.33
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$50.26
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147		02/28/99	\$5.11
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$55.37
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147		02/28/99	\$39.38
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$94.75
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147		03/31/99	\$2.88
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$97.63
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147		03/31/99	\$64.23
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$161.86
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147		04/30/99	\$5.90
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$167.76

SUBTOTAL of Receipts This Page (optional)	\$167.76
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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

NAME OF COMMITTEE (In Full)  
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 04/30/99</p> <p>Aggregate Year-to-Date -&gt; \$273.31</p>	<p>Amount of Each Receipt this Period \$105.55</p>
<p>B. Full Name, Mailing Address and Zip Code Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 05/31/99</p> <p>Aggregate Year-to-Date -&gt; \$277.23</p>	<p>Amount of Each Receipt this Period \$3.92</p>
<p>C. Full Name, Mailing Address and Zip Code Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 05/31/99</p> <p>Aggregate Year-to-Date -&gt; \$420.09</p>	<p>Amount of Each Receipt this Period \$142.86</p>
<p>D. Full Name, Mailing Address and Zip Code Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 06/30/99</p> <p>Aggregate Year-to-Date -&gt; \$425.48</p>	<p>Amount of Each Receipt this Period \$5.39</p>
<p>E. Full Name, Mailing Address and Zip Code Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 06/30/99</p> <p>Aggregate Year-to-Date -&gt; \$624.72</p>	<p>Amount of Each Receipt this Period \$199.24</p>
<p>F. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) / /</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) / /</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional)	\$456.96
TOTAL This Period (last page this line number only)	\$624.72

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

**NAME OF COMMITTEE (In Full)**  
Latham for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bank Card Services  Security Nat'l Bank Payment Processing Milwaukee, WI 53288-0200	Annual Fee  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/99	\$12.00
B. Full Name, Mailing Address and Zip Code Bittersweet Catering  103 N Alfred St  Alexandria, VA 22314-	Purpose of Disbursement catering  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/99	Amount of Each Disbursement This Period \$1359.96
C. Full Name, Mailing Address and Zip Code Nat'l Republican Club of Capitol Hill  300 First Street SE  Washington, DC 20003-	Purpose of Disbursement catering  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/09/99	Amount of Each Disbursement This Period \$361.35
D. Full Name, Mailing Address and Zip Code Charter Printing  PO Box 64163  Baltimore, MD 21264-4163	Purpose of Disbursement printing inv. #9079  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/99	Amount of Each Disbursement This Period \$1039.78
E. Full Name, Mailing Address and Zip Code Congressional Liquor  404 1st Street SE  Washington, DC 20003-	Purpose of Disbursement catering  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/99	Amount of Each Disbursement This Period \$140.32
F. Full Name, Mailing Address and Zip Code Gwen Ecklund  519 N 19th St  Denison, IA 51442-1665	Purpose of Disbursement April Consulting Fee  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/13/99	Amount of Each Disbursement This Period \$1200.00
G. Full Name, Mailing Address and Zip Code Gwen Ecklund  519 N 19th St  Denison, IA 51442-1665	Purpose of Disbursement salary  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 04/12/99	Amount of Each Disbursement This Period \$1204.89

<b>SUBTOTAL</b> of Disbursements This Page (optional)	\$5318.30
<b>TOTAL</b> This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)  
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code Gwen Ecklund  519 N 19th St  Denison, IA 51442-1665</p>	<p>Purpose of Disbursement expenses: phone &amp; travel  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 04/20/99</p>	<p>Amount of Each Disbursement This Period \$158.20</p>
<p>B. Full Name, Mailing Address and Zip Code Gwen Ecklund  519 N 19th St  Denison, IA 51442-1665</p>	<p>Purpose of Disbursement salary  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 02/01/99</p>	<p>Amount of Each Disbursement This Period \$1204.89</p>
<p>C. Full Name, Mailing Address and Zip Code Gwen Ecklund  519 N 19th St  Denison, IA 51442-1665</p>	<p>Purpose of Disbursement salary  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 03/01/99</p>	<p>Amount of Each Disbursement This Period \$1204.99</p>
<p>D. Full Name, Mailing Address and Zip Code Gwen Ecklund  519 N 19th St  Denison, IA 51442-1665</p>	<p>Purpose of Disbursement phone/travel expenses  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 02/08/99</p>	<p>Amount of Each Disbursement This Period \$60.77</p>
<p>E. Full Name, Mailing Address and Zip Code FBL Brokerage  5400 University Avenue  West Des Moines, IA 50266-</p>	<p>Purpose of Disbursement Insurance Summer Celebration  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/16/99</p>	<p>Amount of Each Disbursement This Period \$484.50</p>
<p>F. Full Name, Mailing Address and Zip Code Huisenga, Henjes, Conner, Williams &amp; Ass  P.O. Box 1528  Sioux City, IA 51102-</p>	<p>Purpose of Disbursement accounting fee  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 03/09/99</p>	<p>Amount of Each Disbursement This Period \$112.00</p>
<p>G. Full Name, Mailing Address and Zip Code IA Workforce Development  215 Keosauqua Way  Des Moines, IA 50309-</p>	<p>Purpose of Disbursement Unemployment taxes  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 01/29/99</p>	<p>Amount of Each Disbursement This Period \$1.10</p>

SUBTOTAL of Disbursements This Page (optional)	\$3226.45
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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**NAME OF COMMITTEE (In Full)**  
Latham for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Internal Revenue Service  Kansas City, MO 64999-	1120 POL  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/12/99	\$852.00
Internal Revenue Service  Kansas City, MO 64999-	940 Fed Unemployment  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/29/99	\$56.00
JS Day & Associates 8555 Harbach Blvd, Ste 302 Clive, IA 50325-	Consult fee 2000 / travel 231.89  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/99	\$2231.89
JS Day & Associates 8555 Harbach Blvd, Ste 302 Clive, IA 50325-	Mileage, Meals, Lodging, Supplies  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/09/99	\$299.86
JS Day & Associates 8555 Harbach Blvd, Ste 302 Clive, IA 50325-	Consulting fee 1000 / travel 275.40  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/29/99	\$1275.40
JS Day & Associates 8555 Harbach Blvd, Ste 302 Clive, IA 50325-	Consulting Fee  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/20/99	\$1000.00
JS Day & Associates 8555 Harbach Blvd, Ste 302 Clive, IA 50325-	Consulting Fee  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/09/99	\$2000.00

SUBTOTAL of Disbursements This Page (optional)	\$7715.15
TOTAL This Period (last page this line number only)	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (In Full)**  
Latham for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Thomas P Latham  178 180th St  Alexander, IA 50420-	Travel Expense  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/29/99	\$2924.67
B. Full Name, Mailing Address and Zip Code Marina Inn  4th & B  South Sioux City, NE 68776-	catering  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/13/99	\$124.20
C. Full Name, Mailing Address and Zip Code Nancy Maxwell  Maxwell & Associates 4010 Franconia Rd Alexandria, VA 22310-	expenses: postage  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/99	\$726.00
D. Full Name, Mailing Address and Zip Code Nancy Maxwell  Maxwell & Associates 4010 Franconia Rd Alexandria, VA 22310-	Fundraising Consulting Fee  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/99	\$750.00
E. Full Name, Mailing Address and Zip Code Nancy Maxwell  Maxwell & Associates 4010 Franconia Rd Alexandria, VA 22310-	Fundraising Consulting Fee  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/01/99	\$750.00
F. Full Name, Mailing Address and Zip Code Nancy Maxwell  Maxwell & Associates 4010 Franconia Rd Alexandria, VA 22310-	expenses: phone/data entry  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/28/99	\$68.19
G. Full Name, Mailing Address and Zip Code Nancy Maxwell  Maxwell & Associates 4010 Franconia Rd Alexandria, VA 22310-	April, May, June Consulting Fee  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/16/99	\$2250.00

<b>SUBTOTAL</b> of Disbursements This Page (optional)	\$7593.06
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (In Full)**  
 Latham for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nancy Maxwell  Maxwell & Associates 401D Franconia Rd Alexandria, VA 22310-	Fundraising Consulting Fee  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/01/99	\$750.00
B. Full Name, Mailing Address and Zip Code Morningside College  1501 Morningside Avenue  Sioux City, IA 51106-1751	Purpose of Disbursement Reservation Fee  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/09/99	\$50.00
C. Full Name, Mailing Address and Zip Code NEBS  500 Main St  Groton, MA 01471-	Purpose of Disbursement printing  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/99	\$92.72
D. Full Name, Mailing Address and Zip Code Office Depot  1550 22nd St  West Des Moines, IA 50265-	Purpose of Disbursement Office supplies  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/13/99	\$143.45
E. Full Name, Mailing Address and Zip Code Security National Bank  601 Pierce St PO Box 147 Sioux City, IA 51102-0147	Purpose of Disbursement 941 dep  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/99	\$373.88
F. Full Name, Mailing Address and Zip Code Security National Bank  601 Pierce St PO Box 147 Sioux City, IA 51102-0147	Purpose of Disbursement 941 deposit  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/28/99	\$373.88
G. Full Name, Mailing Address and Zip Code Security National Bank  601 Pierce St PO Box 147 Sioux City, IA 51102-0147	Purpose of Disbursement For deposit only stamp  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/21/99	\$20.00

<b>SUBTOTAL of Disbursements This Page (optional)</b>	\$1803.93
<b>TOTAL This Period (last page this line number only)</b>	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 sources.

**NAME OF COMMITTEE (In Full)**  
Latham for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Security National Bank  601 Pierce St PO Box 147 Sioux City, IA 51102-0147	For deposit only stamp  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/21/99	\$20.00
Security National Bank  601 Pierce St PO Box 147 Sioux City, IA 51102-0147	941 deposit  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/01/99	\$373.68
Sioux City Country Club  4001 Jackson Street  Sioux City, IA 51104-	Catering  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/13/99	\$197.42
Staples  840 Gordon Dr  Sioux City, IA 51101-	office supplies  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/13/99	\$19.25
The Dutko Group  Attn: Karen J Swaitek 412 1st St SE Washington, DC 20003-	room rental  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/03/99	\$100.00
Treasurer, State of Iowa  PO Box 10411  Des Moines, IA 50306-	IA 1120  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/99	\$338.00
Treasurer, State of Iowa  PO Box 10411  Des Moines, IA 50306-	St WH  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/99	\$54.69

<b>SUBTOTAL</b> of Disbursements This Page (optional)	\$1103.24
<b>TOTAL</b> This Period (last page this line number only)	



SCHEDULE B

ITEMIZED DISBURSEMENTS

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**NAME OF COMMITTEE (In Full)**  
Latham for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Treasurer, State of Iowa  PO Box 10411  Des Moines, IA 50306-	state w/h  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/28/99	\$54.69
Treasurer, State of Iowa  PO Box 10411  Des Moines, IA 50306-	state w/h  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/29/99	\$54.69
Treasurer, State of Iowa  PO Box 10411  Des Moines, IA 50306-	state w/h  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/01/99	\$5.89
Treasurer, State of Iowa  PO Box 10411  Des Moines, IA 50306-	state w/h  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/01/99	\$54.69
US Post Office  108 Albany Ave SE  Orange City, IA 51041-	Mailing Permit  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/19/99	\$100.00
US Post Office  108 Albany Ave SE  Orange City, IA 51041-	Box Rent OC  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/04/99	\$58.00
US Post Office  108 Albany Ave SE  Orange City, IA 51041-	Postage  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/05/99	\$33.00

<b>SUBTOTAL</b> of Disbursements This Page (optional)	\$360.96
<b>TOTAL</b> This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)  
Latham for Congress

A. Full Name, Mailing Address and Zip Code US Postmaster	Purpose of Disbursement Postage Stamps  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 04/28/99	Amount of Each Disbursement This Period \$300.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	\$300.00
TOTAL This Period (last page this line number only)	\$27421.09

