

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial)

A.

Latham for Congress

Date of Disbursement

MM	DD	YYYY
06	19	2010

Mailing Address
P.O. Box 71

City **Clarion** State **Iowa** Zip Code **50525**

Purpose of Disbursement
Contribution

011
Category/Type

Amount of Each Disbursement this Period

100000

Candidate Name
Tom Latham

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: **IA** District: **4th**

Full Name (Last, First, Middle Initial)

B.

The Grassley Committee, Inc.

Date of Disbursement

MM	DD	YYYY
04	16	2010

Mailing Address
P.O. Box 1000

City **Des Moines** State **Iowa** Zip Code **50304**

Purpose of Disbursement
Contribution

011
Category/Type

Amount of Each Disbursement this Period

100000

Candidate Name
Charles Grassley

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: **IA** District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

MM	DD	YYYY

City State Zip Code

Purpose of Disbursement

Category/Type

Amount of Each Disbursement this Period

--

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

200000

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

910000

10030391737