

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Latham For Congress

ADDRESS (number and street)

PO Box 71

Check if different than previously reported. (ACC)

Clarion

IA

50525

2. **FEC IDENTIFICATION NUMBER**

C00287045

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

IA 4

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

In the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period 01 01 2003 through 03 31 2003

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert W. Brinton

Signature of Treasurer Electronically Filed by Robert W. Brinton Date 04 11 2003

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

Office Use Only

**FEC FORM 3**  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

**Write or Type Committee Name**

Latham For Congress

Report Covering the Period: From: M M D D Y Y Y Y To: M M D D Y Y Y Y  
0 1 0 1 2 0 0 3 0 3 3 1 2 0 0 3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(a)).....	5277.00	34669.00
(b) Total Contribution Refunds (from Line 20(d)).....	1027.00	1027.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	4250.00	33642.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	18268.14	117934.36
(b) Total Offsets to Operating Expenditures (from Line 14).....	2118.50	2118.50
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	16149.64	115815.86
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	32182.71	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**

of Receipts

Write or Type Committee Name

Latham For Congress

Report Covering the Period: From: M M D J Y ' ' ' ' 0 1 0 1 2 0 0 3

To: V V U J Y Y ' ' Y 0 3 3 1 2 0 0 3

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	18268.14	117934.36
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(b) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	27.00	27.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1027.00	1027.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) [ > ]	19295.14	118961.36

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	42452.57
24. TOTAL RECEIPTS THIS PERIOD (from Line 15, page3).....	9025.28
25. SUBTOTAL (add Line 23 and Line 24).....	51477.85
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	19295.14
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	32182.71

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 / 25	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

Full Name (Last, First, Middle Initial) A. American Institute of CPAs PAC		Date of Receipt M / D / Y 02 / 13 / 2003
Mailing Address Harborside Financial Center 201 Plaza Three		Transaction ID: 0406200326C10090
City Jersey City	State NJ	Zip Code 07311-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. American Motorcyclist PAC		Date of Receipt M / D / Y 03 / 12 / 2003
Mailing Address PO Box 6114		Transaction ID: 0406200326C10100
City Westerville	State OH	Zip Code 43081-6114
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Bridgestone Firestone		Date of Receipt M / D / Y 01 / 21 / 2003
Mailing Address 1401 Eye Street N.W. Suite 220		Transaction ID: 0406200326C10086
City Washington	State DC	Zip Code 20005-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	2000.00
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 25	
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) A. Friends of Bill Zeff		Date of Receipt M / D / Y 03 / 03 / 2003
Mailing Address 8 Thorn Mountain Road Box 487		Transaction ID: 0406200326C10099
City Jackson	State NH	Zip Code 03846-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)(A)-1)
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Lehigh Cement PAC		Date of Receipt M / D / Y 03 / 03 / 2003
Mailing Address 766D Imperial Way		Transaction ID: 0406200326C10098
City Allentown	State PA	Zip Code 18195-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)(A)-1)
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1500.00</b>
TOTAL This Period (last page this line number only) .....	▶	<b>3500.00</b>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 25	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Robert Boeding</b>		Date of Receipt M / D / Y 02 / 03 / 2003
Mailing Address R.R. 1, Box 61		Transaction ID: 0406200326C10092
City	State	Zip Code
Lawler	IA	52154-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer Information Requested	Occupation Information Requested	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>250.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Winifred A. Frye</b>		Date of Receipt M / D / Y 02 / 03 / 2003
Mailing Address 1505 E Nevada Street		Transaction ID: 0406200326C10093
City	State	Zip Code
Marshalltown	IA	50158-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2.00</b>
Name of Employer retired	Occupation Information Requested	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>2.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Willie Hansen</b>		Date of Receipt M / D / Y 02 / 03 / 2003
Mailing Address 2050 Woodland Drive		Transaction ID: 0406200326C10091
City	State	Zip Code
New Hampton	IA	50659-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer State Bank of Lawler	Occupation Banker	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>752.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 25	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Zareen Taj Mirza</b>		Date of Receipt M / D / Y 03 / 03 / 2003
Mailing Address 19 Foreside Common Dr		Transaction ID: 0408200326C10097
City Falmouth	State ME	Zip Code 04105-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Information Requested	Occupation Information Requested	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441af)(441a-1)
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 25.00	

Full Name (Last, First, Middle Initial) <b>B. William Van Orsdel</b>		Date of Receipt M / D / Y 01 / 08 / 2003
Mailing Address 1776 West Lakes Parkway		Transaction ID: 0105200352C10084
City West Des Moines	State IA	Zip Code 50398-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested	Occupation Information Requested	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441af)(441a-1)
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1025.00</b>
TOTAL This Period (last page this line number only) .....	▶	<b>1777.00</b>



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 / 25	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)  
 Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Bank Card Services</b>		Date of Receipt M / D / Y 01 / 21 / 2003
Mailing Address Security Natl Bank Payment Processing		Transaction ID: 0128200352C10086
City Milwaukee	State WI	Zip Code 53288-0200
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 8.75
Name of Employer	Occupation	Offsets to Operating Expenditure Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)(A-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 8.75	

Full Name (Last, First, Middle Initial) <b>B. Qwest</b>		Date of Receipt M / D / Y 01 / 08 / 2003
Mailing Address PO Box 737		Transaction ID: 0105200352C10083
City Des Moines	State IA	Zip Code 50338-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2109.75
Name of Employer	Occupation	Offsets to Operating Expenditure Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)(A-1))
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 2109.75	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>2118.50</b>
TOTAL This Period (last page this line number only) .....	▶	<b>2118.50</b>

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

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

FOR LINE NUMBER: PAGE 10 / 25

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) A. First Citizens Net		Date of Receipt M / D / Y 01 / 31 / 2003
Mailing Address P.O. Box 288		Transaction ID: 0406200326C10101
City Clarion	State IA	Zip Code 50525-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 28.81
Name of Employer Information Requested	Occupation Information Requested	Other Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 91.82	

Full Name (Last, First, Middle Initial) B. First Citizens Net		Date of Receipt M / D / Y 02 / 28 / 2003
Mailing Address P.O. Box 288		Transaction ID: 0406200326C10102
City Clarion	State IA	Zip Code 50525-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.33
Name of Employer Information Requested	Occupation Information Requested	Other Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 117.15	

Full Name (Last, First, Middle Initial) C. First Citizens Net		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address P.O. Box 288		Transaction ID: 0406200326C10103
City Clarion	State IA	Zip Code 50525-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.24
Name of Employer Information Requested	Occupation Information Requested	Other Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 137.39	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>74.38</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 / 25	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		Date of Receipt M / D / Y 02 / 03 / 2003
Mailing Address		Transaction ID: 0406200326C10094
City	State	Zip Code
Kansas City	MO	64609-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 4.15
Name of Employer	Occupation	Other Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼	4.15

Full Name (Last, First, Middle Initial) <b>B. JS Day &amp; Associates</b>		Date of Receipt M / D / Y 01 / 21 / 2003
Mailing Address 2716 144th Street		Transaction ID: 0406200326C10095
City	State	Zip Code
Urbandale	IA	50322-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 956.25
Name of Employer	Occupation	Other Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼	956.25

Full Name (Last, First, Middle Initial) <b>C. JS Day &amp; Associates</b>		Date of Receipt M / D / Y 02 / 13 / 2003
Mailing Address 2716 144th Street		Transaction ID: 0406200326C10099
City	State	Zip Code
Urbandale	IA	50322-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 595.00
Name of Employer	Occupation	Other Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼	1551.25

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1555.40</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>1629.78</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 12 / 25
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) A. Aristotle		Transaction ID: D128200352E2520 Date of Disbursement 01 / 28 / 2003	
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 2000.00	
City Washington	State DC	Zip Code 20003-1184	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FEC SOFTWARE
Purpose of Disbursement FEC SOFTWARE		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Arthur-Meinders & Associates		Transaction ID: D408200327E2593 Date of Disbursement 03 / 15 / 2003	
Mailing Address 106 Central Avenue East		Amount of Each Disbursement this Period 101.00	
City Clarion	State IA	Zip Code 50525-	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WORKERS COMP
Purpose of Disbursement WORKERS COMP		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Bank Card Services		Transaction ID: D128200352E2524 Date of Disbursement 01 / 28 / 2003	
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period 318.00	
City Milwaukee	State WI	Zip Code 53288-0200	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SEE BELOW
Purpose of Disbursement SEE BELOW		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional) .....	▶	<b>2419.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 13 / 25
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) A. Koch Brothers		Transaction ID: D12820034E253D Date of Disbursement 12 / 12 / 2002
Mailing Address 301 East Locust		Amount of Each Disbursement this Period  318.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: COPIER LEASE
City Des Moines	State IA Zip Code 50309-	
Purpose of Disbursement COPIER LEASE	Candidate Name  Category/ Type	
Office Sought: House Senate President State: District		

Full Name (Last, First, Middle Initial) B. Bank Card Services		Transaction ID: D128200352E2523 Date of Disbursement 01 / 28 / 2003
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period  48.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SEE BELOW
City Milwaukee	State WI Zip Code 53288-0200	
Purpose of Disbursement SEE BELOW	Candidate Name  Category/ Type	
Office Sought: House Senate President State: District		

Full Name (Last, First, Middle Initial) C. Atlantech		Transaction ID: D12820034E2531 Date of Disbursement 01 / 02 / 2003
Mailing Address 1010 Wayne Avenue Suite 630		Amount of Each Disbursement this Period  48.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: ONLINE SERVICES
City Silver Spring	State MD Zip Code 20910-	
Purpose of Disbursement ONLINE SERVICES	Candidate Name  Category/ Type	
Office Sought: House Senate President State: District		

SUBTOTAL of Disbursements This Page (optional) .....	▶	49.00
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17 20a	<input type="checkbox"/>	18 20b	<input type="checkbox"/>	19a 20c	<input type="checkbox"/>	19b 21
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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Bank Card Services</b>		Transaction ID: D408200327E2580 Date of Disbursement 02 / 22 / 2003	
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period  49.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SEE BELOW	
City Milwaukee	State WI		Zip Code 53288-0200
Purpose of Disbursement SEE BELOW			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>B. Atlantech</b>		Transaction ID: D408200327E2580 Date of Disbursement 01 / 31 / 2003	
Mailing Address 1010 Wayne Avenue Suite 830		Amount of Each Disbursement this Period  49.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>[MEMO ITEM]</b> MEMO: ONLINE SERVICE	
City Silver Spring	State MD		Zip Code 20910
Purpose of Disbursement ONLINE SERVICE			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>C. Bank Card Services</b>		Transaction ID: D408200327E2580 Date of Disbursement 03 / 29 / 2003	
Mailing Address Security Natl Bank Payment Processing		Amount of Each Disbursement this Period  49.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SEE BELOW	
City Milwaukee	State WI		Zip Code 53288-0200
Purpose of Disbursement SEE BELOW			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>98.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 15 / 25
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) A. Atlantech		Transaction ID: D408200327E26D0 Date of Disbursement 03 / 03 / 2003		
Mailing Address 1010 Wayne Avenue Suite 63D		Amount of Each Disbursement this Period  49.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: ONLINE SERVICES		
City Silver Spring	State MD			Zip Code 20910-
Purpose of Disbursement ONLINE SERVICES				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼			
State: District				

Full Name (Last, First, Middle Initial) B. Friends of John Boehner		Transaction ID: D408200327E2585 Date of Disbursement 02 / 22 / 2003		
Mailing Address 7908 Cincinnati Dayton Road		Amount of Each Disbursement this Period  1000.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  CONTRIBUTION		
City West Chester	State OH			Zip Code 45060-
Purpose of Disbursement CONTRIBUTION				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼			
State: District				

Full Name (Last, First, Middle Initial) C. Budget Storage		Transaction ID: D408200327E2585 Date of Disbursement 02 / 17 / 2003		
Mailing Address 80 E. Venture Drive		Amount of Each Disbursement this Period  93.25  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  STORAGE RENTAL		
City Waukeee	State IA			Zip Code 50263-
Purpose of Disbursement STORAGE RENTAL				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼			
State: District				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1093.25</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 16 / 25
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Budget Storage</b>		Transaction ID: D408200327E2594 Date of Disbursement 03 / 15 / 2003	
Mailing Address 60 E. Venture Drive		Amount of Each Disbursement this Period  68.25  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  STORAGE RENTAL	
City Waukees	State IA		Zip Code 50263-
Purpose of Disbursement STORAGE RENTAL			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>B. Budget Storage</b>		Transaction ID: D408200327E2598 Date of Disbursement 03 / 29 / 2003	
Mailing Address 60 E. Venture Drive		Amount of Each Disbursement this Period  78.25  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  STORAGE	
City Waukees	State IA		Zip Code 50263-
Purpose of Disbursement STORAGE			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) <b>C. Calhoun Co. Auditor</b>		Transaction ID: D408200327E2591 Date of Disbursement 02 / 22 / 2003	
Mailing Address 418 Fourth Street		Amount of Each Disbursement this Period  15.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  COPY CHARGE	
City Rockwell City	State IA		Zip Code 50579-
Purpose of Disbursement COPY CHARGE			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<b>161.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 17 / 25
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Comfort Suites</b>		Transaction ID: D13120038E2571 Date of Disbursement 01 / 31 / 2003	
Mailing Address 2609 Elwood Drive		Amount of Each Disbursement this Period  1081.70  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  FUNDRAISER	
City Ames	State IA		Zip Code 50010-
Purpose of Disbursement FUNDRAISER			Category/ Type
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. The Congressional Institute</b>		Transaction ID: D128200352E2518 Date of Disbursement 01 / 10 / 2003	
Mailing Address 316 Pennsylvania Ave. SE #403		Amount of Each Disbursement this Period  2256.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  REGISTRATION	
City Washington	State DC		Zip Code 20003-1146
Purpose of Disbursement REGISTRATION			Category/ Type
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Eisentrager Consulting</b>		Transaction ID: 0408200327E2598 Date of Disbursement 03 / 15 / 2003	
Mailing Address 1845 Jackson Avenue		Amount of Each Disbursement this Period  864.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  CONSULTING	
City Clarion	State IA		Zip Code 50525-
Purpose of Disbursement CONSULTING			Category/ Type
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4201.70</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 18 / 25
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) A. First Citizens Natl		Transaction ID: D408200327E26D1 Date of Disbursement 01 / 31 / 2003	
Mailing Address P.O. Box 268			
City Clarion	State IA	Zip Code 50525-	Amount of Each Disbursement this Period  14.24  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SERVICE CHARGE
Purpose of Disbursement SERVICE CHARGE		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. First Citizens Natl		Transaction ID: D408200327E26D2 Date of Disbursement 02 / 28 / 2003	
Mailing Address P.O. Box 268			
City Clarion	State IA	Zip Code 50525-	Amount of Each Disbursement this Period  31.74  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SERVICE CHARGE
Purpose of Disbursement SERVICE CHARGE		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. First Citizens Natl		Transaction ID: D408200327E26D3 Date of Disbursement 03 / 31 / 2003	
Mailing Address P.O. Box 268			
City Clarion	State IA	Zip Code 50525-	Amount of Each Disbursement this Period  14.24  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SERVICE CHARGE
Purpose of Disbursement SERVICE CHARGE		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) .....	▶	60.22
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 19 / 25
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) A. IA Workforce Development		Transaction ID: D128200352E2528 Date of Disbursement 01 / 28 / 2003	
Mailing Address 1000 East Grand Avenue		Amount of Each Disbursement this Period 314.09	
City Des Moines	State IA	Zip Code 50309-	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  UNEMPLOYMENT
Purpose of Disbursement UNEMPLOYMENT		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Transaction ID: D128200352E2525 Date of Disbursement 01 / 28 / 2003	
Mailing Address		Amount of Each Disbursement this Period 5410.12	
City Kansas City	State MO	Zip Code 64609-	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  FORM 941
Purpose of Disbursement FORM 941		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Internal Revenue Service		Transaction ID: D128200352E2526 Date of Disbursement 01 / 28 / 2003	
Mailing Address		Amount of Each Disbursement this Period 188.00	
City Kansas City	State MO	Zip Code 64609-	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  940-EZ
Purpose of Disbursement 940-EZ		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) .....	▶	5901.21
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 20 / 25
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Transaction ID: D128200352E2527 Date of Disbursement 01 / 28 / 2003
Mailing Address		Amount of Each Disbursement this Period  948.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  1120-POL
City Kansas City	State MO	
Zip Code 64999-	Category/ Type	
Purpose of Disbursement 1120-POL	Candidate Name	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Iowa Dept. Revenue & Finance		Transaction ID: D128200352E2528 Date of Disbursement 01 / 28 / 2003
Mailing Address P.O. Box 10411		Amount of Each Disbursement this Period  297.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  1120
City Des Moines	State IA	
Zip Code 50306-	Category/ Type	
Purpose of Disbursement 1120	Candidate Name	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Iowa Dept. Revenue & Finance		Transaction ID: 0408200327E2595 Date of Disbursement 03 / 15 / 2003
Mailing Address P.O. Box 10411		Amount of Each Disbursement this Period  108.64 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  CORPORATION TAX
City Des Moines	State IA	
Zip Code 50306-	Category/ Type	
Purpose of Disbursement CORPORATION TAX	Candidate Name	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) .....	▶	<b>1353.64</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

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17 20a     18 20b     19a 20c     19b 21

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. JS Day &amp; Associates</b>		Transaction ID: D4082D0327E2597 Date of Disbursement 03 / 29 / 2003
Mailing Address 2710 144th Street		Amount of Each Disbursement this Period  240.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  STORAGE
City Urbandale	State IA	
Zip Code 50922-	Category/ Type	
Purpose of Disbursement STORAGE	Candidate Name	
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) <b>B. NRCC-Natl Republican Congressional Com</b>		Transaction ID: D4082D0327E2586 Date of Disbursement 02 / 17 / 2003
Mailing Address 320 1st St SE		Amount of Each Disbursement this Period  1990.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SPEAKER HASTERT TRAVEL EXPENSE
City Washington	State DC	
Zip Code 20003-	Category/ Type	
Purpose of Disbursement SPEAKER HASTERT TRAVEL EXPENSE	Candidate Name	
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) <b>C. United States Post Office</b>		Transaction ID: 0128200352E2521 Date of Disbursement 01 / 28 / 2003
Mailing Address		Amount of Each Disbursement this Period  126.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  BOX RENTAL
City Clarion	State IA	
Zip Code 50525-	Category/ Type	
Purpose of Disbursement BOX RENTAL	Candidate Name	
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2356.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 22 / 25
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
Latham For Congress

Full Name (Last, First, Middle Initial) <b>A. Qwest</b>		Transaction ID: D128200352E2522	
Mailing Address PO Box 737		Date of Disbursement 01 / 28 / 2003	
City Des Moines	State IA	Zip Code 50338-0001	Amount of Each Disbursement this Period  452.30  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  CAMPAIGN TELEPHONE
Purpose of Disbursement CAMPAIGN TELEPHONE		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Clarke Scanlon</b>		Transaction ID: D408200327E2592	
Mailing Address 8619 Oakwood Drive		Date of Disbursement 03 / 15 / 2003	
City Urbandale	State IA	Zip Code 50322-	Amount of Each Disbursement this Period  72.32  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  EXPENSE REIMBURSEMENT
Purpose of Disbursement EXPENSE REIMBURSEMENT		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Story Co. Auditor</b>		Transaction ID: D408200327E2587	
Mailing Address 800 Sixth Street		Date of Disbursement 02 / 17 / 2003	
City Nevada	State IA	Zip Code 50201-	Amount of Each Disbursement this Period  50.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  ELECTION LIST
Purpose of Disbursement ELECTION LIST		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>574.62</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>18268.14</b>

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

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

FOR LINE NUMBER:  
 (check only one)

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

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NAME OF COMMITTEE (In Full)  
 Latham For Congress

Full Name (Last, First, Middle Initial) A. Friends of Bill Zeliff		Transaction ID: D128200345E2535	
Mailing Address 6 Thom Mountain Road Box 487		Date of Disbursement 01 / 28 / 2003	
City Jackson	State NH	Zip Code 03846-	Amount of Each Disbursement this Period  1000.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Refund of Contribution Contribution refu		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
 Latham For Congress

Full Name (Last, First, Middle Initial) A. Winifred A. Frye		Transaction ID: D1282D0345E2536 Date of Disbursement 01 / 28 / 2003		
Mailing Address 1505 E Nevada Street		Amount of Each Disbursement this Period  2.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Marshalltown	State IA			Zip Code 50158-
Purpose of Disbursement Refund of Contribution Contribution refu				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 X Primary           General Other (specify) ▼	State: District		

Full Name (Last, First, Middle Initial) B. Barbara Nicholas Utne		Transaction ID: D1282D0345E2537 Date of Disbursement 01 / 28 / 2003		
Mailing Address 1105 North Shore Drive		Amount of Each Disbursement this Period  25.00  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Clear Lake	State IA			Zip Code 50428-
Purpose of Disbursement Refund of Contribution Contribution refu				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2004 X Primary           General Other (specify) ▼	State: District		

SUBTOTAL of Disbursements This Page (optional) .....	▶	27.00
TOTAL This Period (last page this line number only) .....	▶	27.00



