

Latham

CONGRESS

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 APR 22 A 10:08

April 14, 2000

**VIA CERTIFIED MAIL -
RETURN RECEIPT REQUESTED**

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

Attn: R. Adam Ragan
Reports Analyst
Reports Analysis Division

Re: **Latham for Congress Committee**
Identification No. C00287045
First Quarterly Report 2000

Dear Mr. Ragan,

We enclose the First Quarterly Report for 2000 for the above committee.
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: —

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (in full)

Latham for Congress

ADDRESS (number and street) Check if different than previously reported.
PO Box 174

CITY, STATE and ZIP CODE STATE/DISTRICT
Sioux City, IA 511020174 IA 5

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2. FEED IDENTIFICATION NUMBER
C00287045

3. IS THIS REPORT AN AMENDMENT?
2000 APR 22 - A 10:08
 YES NO

4. TYPE OF REPORT

- April 15 Quarterly Report Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
- July 15 Quarterly Report
- October 15 Quarterly Report Thirtieth day report following the General Election on _____
in the State of _____
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only) Termination Report

This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period <u>01/01/2000</u> through <u>03/31/2000</u>	COLUMN A This Period	COLUMN B Calendar Year-to-date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	\$36006.00	\$36006.00
(b) Total Contribution Refunds (From Line 20(d))	\$0.00	\$0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$36006.00	\$36006.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$36372.35	\$36372.35
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$0.00
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	\$36372.35	\$36372.35
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$164213.37	
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$0.00	

For further information:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3423

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
John W. Mayne

Signature of Treasurer Date 4/14/00

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

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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: 01/01/2000 To: 08/31/2000	
I. RECEIPTS	Column A Total This Period	Column B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees:		
(i) Itemized (Use Schedule A)	\$4000.00	
(ii) Unitemized	\$3050.00	
(iii) Total of contributions from individual	\$7050.00	\$7050.00
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$28958.00	\$28958.00
(d) The Candidate	\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c) and (d))	\$36006.00	\$36006.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) All Other Loans	\$0.00	\$0.00
(c) TOTAL LOANS (add 13(a) and (b))	\$0.00	\$0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	\$0.00	\$0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	\$1370.05	\$1370.05
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	\$37376.05	\$37376.05
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	\$36372.35	\$36372.35
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) Of All Other Loans	\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	\$0.00	\$0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	\$0.00	\$0.00
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$0.00	\$0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	\$0.00	\$0.00
21. OTHER DISBURSEMENTS	\$0.00	\$0.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	\$36372.35	\$36372.35
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$163209.67
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$37376.05
25. SUBTOTAL (add Line 23 and Line 24)		\$200685.72
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		\$36372.35
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		\$164213.37

SCHEDULE A

ITEMIZED RECEIPTS

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

Any information printed 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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stanley & Janet Anderson 17394 Concord Avenue Akron, IA 51001-		01/12/200	\$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$50.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert P & Gwen Bergendorff 118 Scott St Casino Beach Storm Lake, IA 50588-	retired	02/15/2001	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired		
	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
Del & Charin Brockshus 1800 11th St SE Spencer, IA 51301-	Del's Garden Center	02/18/200	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Horticulturist		
	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
Rosemary Brown Post Office Box 285-C Milford, IA 51351-		02/29/200	\$30.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired		
	Aggregate Year-to-Date ->	\$30.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Norma & Everett Casperson Box 632 601 S Akir Latimer, IA 50452-		03/16/200	\$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired		
	Aggregate Year-to-Date ->	\$50.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Clayton L & Marthe Christensen 3010 Leona Dr Storm Lake, IA 50588-		02/14/200	\$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired		
	Aggregate Year-to-Date ->	\$50.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Verv & Gloria Davidson 2412 Linden Iowa Falls, IA 50126-	retired	01/12/200	\$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$25.00	

SUBTOTAL of Receipts This Page (optional)	\$405.00
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

PAGE 2 OF 7

FOR LINE NUMBER 11(a) (i)

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NAME OF COMMITTEE (In Full)

Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code Ron & Gladys Drenkow 1670 Pleasant Ct Dr Sheldon, IA 51201-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Drenkow Motors</p> <p>Occupation Auto Dealer</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Date (month, day, year) 02/18/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>B. Full Name, Mailing Address and Zip Code Sylvia Elerick PO Box 994 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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$50.00</p>	<p>Date (month, day, year) 01/12/200</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>C. Full Name, Mailing Address and Zip Code Louie Ervin 3519 Raven Ln NE Cedar Rapids, IA 52402-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Latham & Associates</p> <p>Occupation Energy Consultant</p> <p>Aggregate Year-to-Date -> \$50.00</p>	<p>Date (month, day, year) 03/10/200</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>D. Full Name, Mailing Address and Zip Code Del Farrer Box 575 202 Harriman Latimer, IA 50452-0669</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Kearney Construction</p> <p>Occupation Sales</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Date (month, day, year) 01/12/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>E. Full Name, Mailing Address and Zip Code Leo Fitzgibbons Post Office Box 496 Estherville, IA 51334-</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 -> \$100.00</p>	<p>Date (month, day, year) 02/18/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>F. Full Name, Mailing Address and Zip Code Howard & Ann Garlob PO Box 125 West Bend, IA 50597-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Iowa State Bank</p> <p>Occupation Banker</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Date (month, day, year) 02/14/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>G. Full Name, Mailing Address and Zip Code Hugh Greig 103 North 8th, Box 157 Estherville, IA 51334-</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 Retired</p> <p>Aggregate Year-to-Date -> \$50.00</p>	<p>Date (month, day, year) 02/14/200</p>	<p>Amount of Each Receipt this Period \$50.00</p>

SUBTOTAL of Receipts This Page (optional)

\$550.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code Janis A Hamilton 1065 9 Ave Jefferson, IA 50129-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer People Trust & Savings Bank</p> <p>Occupation Secretary</p> <p>Aggregate Year-to-Date -> \$20,000</p>	<p>Date (month, day, year) 01/12/200</p>	<p>Amount of Each Receipt this Period \$25.00</p>
<p>B. Full Name, Mailing Address and Zip Code Grace & Corrie Hartoy 201 Floyd St Sanborn, IA 51248-</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 -> \$10.00</p>	<p>Date (month, day, year) 02/15/200</p>	<p>Amount of Each Receipt this Period \$10.00</p>
<p>C. Full Name, Mailing Address and Zip Code Betsy Hoelscher 401 Spruce St. Williams, IA 50271-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Hoelscher Ag Dist. Inc.</p> <p>Occupation Sales</p> <p>Aggregate Year-to-Date -> \$50.00</p>	<p>Date (month, day, year) 01/27/200</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>D. Full Name, Mailing Address and Zip Code Robert & Wanda Jacobson 34924 320th St 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 Self Employed</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Date (month, day, year) 02/18/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>E. Full Name, Mailing Address and Zip Code Jim Ladegaard 2613 1st St Arnolds Park, IA 51331-</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 Lawyer</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Date (month, day, year) 03/03/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>F. Full Name, Mailing Address and Zip Code Robert & Sharon Lutes Box 725 Conrad, IA 50621-0725</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 Self-employed</p> <p>Aggregate Year-to-Date -> \$50.00</p>	<p>Date (month, day, year) 01/27/200</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>G. Full Name, Mailing Address and Zip Code Gene & Gloria Lyster 123 Sundown Rd Storm Lake, IA 50588-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Bargloff & Co</p> <p>Occupation Self-employed</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Date (month, day, year) 02/14/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>

SUBTOTAL of Receipts This Page (optional)	\$435.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each delivery 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 George and Mary Maybee 1216 Country Club Dr Boone, IA 50036-</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 -> \$100.00</p>	<p>Date (month, day, year) 01/27/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>B. Full Name, Mailing Address and Zip Code Scott Mc Allister PO Box 110 Mt Pleasant, IA 52641-</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 Farmer</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Date (month, day, year) 01/06/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>C. Full Name, Mailing Address and Zip Code Gene Metzger 1107 S Carroll Rock Rapids, IA 51246-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Mercantile Bank Occupation Banking</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Date (month, day, year) 03/28/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>D. Full Name, Mailing Address and Zip Code Albert & Helen Miller 501 NW 2nd St Box D Ogden, IA 50212-0804</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 Farmer</p> <p>Aggregate Year-to-Date -> \$30.00</p>	<p>Date (month, day, year) 02/08/200</p>	<p>Amount of Each Receipt this Period \$30.00</p>
<p>E. Full Name, Mailing Address and Zip Code Vernelle & Eunice Miller 1804 S Clinch St Sioux City, IA 51105-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Siouxland Aging Service Occupation Accountant</p> <p>Aggregate Year-to-Date -> \$25.00</p>	<p>Date (month, day, year) 02/22/200</p>	<p>Amount of Each Receipt this Period \$25.00</p>
<p>F. Full Name, Mailing Address and Zip Code Fred & Susan Moore 1700 Shoreway Rd Storm Lake, IA 50588-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Buena Vista University Occupation President</p> <p>Aggregate Year-to-Date -> \$25.00</p>	<p>Date (month, day, year) 02/25/200</p>	<p>Amount of Each Receipt this Period \$25.00</p>
<p>G. Full Name, Mailing Address and Zip Code Peter Narey Rural Route, Box 7213 Spirit Lake, IA 51360-</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 -> \$100.00</p>	<p>Date (month, day, year) 03/16/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$480.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 7
FOR LINE NUMBER 11(a) (2)

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NAME OF COMMITTEE (In Full)
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code Eugene Pals 3070 110th Street Belmond, IA 50421-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation M.D.</p> <p>Aggregate Year-to-Date -> \$25.00</p>	<p>Date (month, day, year) 01/06/200</p>	<p>Amount of Each Receipt this Period \$25.00</p>
<p>B. Full Name, Mailing Address and Zip Code Gary Warker 243 West Broadway Arnolds Park, IA 51331-</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 -> \$100.00</p>	<p>Date (month, day, year) 03/03/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>C. Full Name, Mailing Address and Zip Code Loren Reit 2507 W. 13th St. Spencer, IA 51301-</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 -> \$100.00</p>	<p>Date (month, day, year) 03/03/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>D. Full Name, Mailing Address and Zip Code Emil & Sue Richter Box 499 Milford, IA 51951-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer The Three Sons Occupation OWNER</p> <p>Aggregate Year-to-Date -> \$25.00</p>	<p>Date (month, day, year) 01/27/200</p>	<p>Amount of Each Receipt this Period \$25.00</p>
<p>E. Full Name, Mailing Address and Zip Code Emil & Sue Richter Box 499 Milford, IA 51351-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer The Three Sons Occupation Owner</p> <p>Aggregate Year-to-Date -> \$125.00</p>	<p>Date (month, day, year) 03/03/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>F. Full Name, Mailing Address and Zip Code Gary & Barbara Rosenboom 3039 McKinley Ave Sheldon, IA 51201-</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 -> \$100.00</p>	<p>Date (month, day, year) 07/27/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>G. Full Name, Mailing Address and Zip Code Arnold & Doris Schaepp 1122 Start Avenue Ackley, IA 50601-</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 -> \$25.00</p>	<p>Date (month, day, year) 03/28/200</p>	<p>Amount of Each Receipt this Period \$25.00</p>

SUBTOTAL of Receipts This Page (optional)

\$475.00

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 T.S. & Marial Schoelerman 2107 W 11th St Spencer, IA 51301-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Petersen Sheep & Cattle Co Occupation Livestock Buyer</p> <p>Date (month, day, year) 03/10/200</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>B. Full Name, Mailing Address and Zip Code Ivan T Schultz 1807 W River Dr #1 Humboldt, IA 50548-1029</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>Date (month, day, year) 01/12/200</p> <p>Aggregate Year-to-Date -> \$50.00</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>C. Full Name, Mailing Address and Zip Code Hazel Sevatsch 2009 Iowa State Hwy., No. 327 Spirit Lake, IA 51360-</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) 02/15/200</p> <p>Aggregate Year-to-Date -> \$30.00</p>	<p>Amount of Each Receipt this Period \$30.00</p>
<p>D. Full Name, Mailing Address and Zip Code Warren & Barbara Smith 1610 Club View Drive Hampton, IA 50441-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Fareway Stores, Inc. Occupation </p> <p>Date (month, day, year) 03/10/200</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>E. Full Name, Mailing Address and Zip Code Zareen Taj Mirza 18 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>Date (month, day, year) 03/16/200</p> <p>Aggregate Year-to-Date -> \$10.00</p>	<p>Amount of Each Receipt this Period \$10.00</p>
<p>F. Full Name, Mailing Address and Zip Code Charles Tarvin 2106 Nebraska 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 Occupation </p> <p>Date (month, day, year) 01/27/200</p> <p>Aggregate Year-to-Date -> \$20.00</p>	<p>Amount of Each Receipt this Period \$20.00</p>
<p>G. Full Name, Mailing Address and Zip Code Murray & Underwood Box 248 Spencer, IA 51301-0248</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 Retired</p> <p>Date (month, day, year) 02/22/200</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Amount of Each Receipt this Period \$100.00</p>

SUBTOTAL of Receipts This Page (optional)

\$410.00

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

PAGE OF

7 7

FOR LINE NUMBER

11(a) (i)

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NAME OF COMMITTEE (In Full)

Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code Allen Van Raalte 1434 Coolidge Larchwood, IA 51241-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Farmer</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 02/22/200</p> <p>Aggregate Year-to-Date -> \$20.00</p>	<p>Amount of Each Receipt this Period \$20.00</p>
<p>B. Full Name, Mailing Address and Zip Code Lawrence Vander Esch 1206 6th street Hull, IA 51239-</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</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 01/06/200</p> <p>Aggregate Year-to-Date -> \$50.00</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>C. Full Name, Mailing Address and Zip Code John & Ruth Vander Haag 408 Sunrise Ave Box 550 Sanborn, IA 51248-0550</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Vander Haag's Salvage Occupation OWNER</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 02/22/200</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>D. Full Name, Mailing Address and Zip Code Karen & Keith Weber 190 S 7th AVE E Hartley, IA 51346-</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 Veterinarian</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 02/25/200</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>E. Full Name, Mailing Address and Zip Code William B & Beverly Weidemann 105 B Tracy Dows, IA 50071-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Weidemann, Inc. Occupation Grading Contractor</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 01/12/200</p> <p>Aggregate Year-to-Date -> \$25.00</p>	<p>Amount of Each Receipt this Period \$25.00</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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) / /</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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) / /</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional)

\$295.00

TOTAL This Period (last page this line number only)

\$3050.00

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 Donovan & Lois Crouch 701 Winthrop Circle Storm Lake, IA 50588-</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 Optometrist</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 02/15/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>B. Full Name, Mailing Address and Zip Code Terrence A Dully 25 115th St Lorant, IL 60439-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Chicago Metals, Tile & Exchange</p> <p>Occupation VP/Commodity Trader</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 02/29/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>C. Full Name, Mailing Address and Zip Code John R. Huey Post Office Box 769 Okoboji, IA 51355-</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 M.D.</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 02/29/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code George Moriarty 500 W 3rd St Spencer, IA 51301-3301</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Faced Ag Service</p> <p>Occupation Farm Consultant</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 03/03/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>E. Full Name, Mailing Address and Zip Code ED Redfern 1100 Jonquil Circle Great Falls, VA 22066-1824</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 Government relations</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 03/16/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Herman Richter Rural Route 1 Milford, IA 51351-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer The Three Sons</p> <p>Occupation Retail Clothing</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 02/15/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>G. Full Name, Mailing Address and Zip Code Toby & Sylvia Shine 2312 Lake Side Avenue Milford, IA 51351-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Shine Brothers Corp.</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 02/25/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$3000.00</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 Form

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NAME OF COMMITTEE (In Full)
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code John Synhorst, II 15711 213th Ave Spirit Lake, IA 51360-</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 -> \$250.00</p>	<p>Date (month, day, year) 02/15/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>B. Full Name, Mailing Address and Zip Code Lynn Lemisla 2006 23rd Ave. West Spencer, IA 51301-</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 -> \$500.00</p>	<p>Date (month, day, year) 03/03/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>C. Full Name, Mailing Address and Zip Code Michael L & Paula Senor PO Box 317 Spencer, IA 51301</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Senor & Houchins Law Firm</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 02/22/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>D. 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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) / /</p>	<p>Amount of Each Receipt this Period</p>
<p>E. 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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) / /</p>	<p>Amount of Each Receipt this Period</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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) / /</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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) / /</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional)	\$1000.00
TOTAL This Period (last page this line number only)	\$4000.00

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 AMCI 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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 03/16/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code ABC/PAC-Associated Builders & Contractor 1300 N 17th St Rosslyn, 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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 03/10/200</p>	<p>Amount of Each Receipt this Period \$1000.00</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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 01/12/200</p>	<p>Amount of Each Receipt this Period \$500.00</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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 03/28/200</p>	<p>Amount of Each Receipt this Period \$500.00</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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 03/28/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. 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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 03/16/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code Am Maritime 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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 02/15/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

SUBTOTAL of Receipts This Page (optional)

\$4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule (a) for each category of the so-called "Sunshine" Page

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NAME OF COMMITTEE (In Full)
Latham for Congress

<p>A. 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year) 03/16/200</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code 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>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year) 03/03/200</p> <p>Aggregate Year-to-Date -> \$1500.00</p>	<p>Amount of Each Receipt this Period \$1500.00</p>
<p>C. Full Name, Mailing Address and Zip Code 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>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year) 02/29/200</p> <p>Aggregate Year-to-Date -> \$2500.00</p>	<p>Amount of Each Receipt this Period \$2500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Central Soya PAC 1300 Fort Wayne National Bank Bldg Fort Wayne, IN 46802-</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>Date (month, day, year) 03/16/200</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and Zip Code American Assoc. Chiropractic PAC 1701 Clarendon Blvd 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</p> <p>Occupation</p>	<p>Date (month, day, year) 03/16/200</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code College of American Pathologists PAC 1350 "I" St NW Suite 590 Washington, DC 20005-3305</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year) 03/16/200</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code ConAgra Good Government Assoc. One ConAgra Dr Omaha, NE 68102-5501</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year) 03/16/200</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>

SUBTOTAL of Receipts This Page (optional)

\$6500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 7
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)
Latham for Congress

<p>A. Full Name, Mailing Address and Zip Code Cooperative Action For Congressional Trust 1401 New York Ave NW Suite 1100 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 -></p>	<p>Date (month, day, year) 03/16/200</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code DEERE PAC - ILLINOIS John Deere RD Moline, IL 61265-</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 -></p>	<p>Date (month, day, year) 03/28/200</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>C. 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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 03/16/200</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Ewing for Congress Committee PO Box 766 Pontiac, IL 61764-</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 -></p>	<p>Date (month, day, year) 01/27/200</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>E. 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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 03/16/200</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Florida Sugar Cane League PAC 115 South Lopez Street Clewiston, FL 33440-</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 -></p>	<p>Date (month, day, year) 03/28/200</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code Conservative Victory Fund 108 North Carolina Avenue, SE Capitol Hill 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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 03/09/200</p> <p>Aggregate Year-to-Date -> \$456.00</p>	<p>Amount of Each Receipt this Period \$456.00 IN-KIND</p>

SUBTOTAL of Receipts this Page (optional)

\$4456.00

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

PAGE 4 OF 7
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)
Latham for Congress

<p>A. 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</p>	<p>Date (month, day, year) 03/16/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -> \$500.00</p>			
<p>B. Full Name, Mailing Address and Zip Code ING US PAC PO BOX 105006 Atlanta, GA 30346-5006</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) 03/28/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -> \$500.00</p>			
<p>C. Full Name, Mailing Address and Zip Code International Dairy Foods Assoc Connie Tipton 1250 H St NW Ste 900 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) 03/16/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -> \$500.00</p>			
<p>D. Full Name, Mailing Address and Zip Code InsurPac-Independent Insurance Agents Am Maria I. Barthoud, 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>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/28/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -> \$500.00</p>			
<p>E. Full Name, Mailing Address and Zip Code Lumber Dealers PAC 666 Pennsylvania Ave SE Suite 302A 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) 03/16/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -> \$500.00</p>			
<p>F. Full Name, Mailing Address and Zip Code 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>Name of Employer Occupation</p>	<p>Date (month, day, year) 01/12/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -> \$500.00</p>			
<p>G. Full Name, Mailing Address and Zip Code 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>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/16/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -> \$1000.00</p>			

SUBTOTAL of Receipts This Page (optional)

\$3500.00

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

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 MINN-DAK Farmers PAC 7525 Red River Road Wahpeton, ND 58075-</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 -> \$500.00</p>	<p>Date (month, day, year) 03/16/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Manufactured Housing Institute PAC 2101 Wilson Boulevard Suite 610 Arlington, VA 22201-3062</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 -> \$500.00</p>	<p>Date (month, day, year) 03/16/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>C. Full Name, Mailing Address and Zip Code NATSO PAC 1199 N Fairfax Street - Suite 801 PO Box 1285 Alexandria, VA 22313-1285</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 -> \$500.00</p>	<p>Date (month, day, year) 03/28/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code NRA Political Victory Fund-Natl Rifle Ass 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 -> \$1000.00</p>	<p>Date (month, day, year) 03/16/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>E. Full Name, Mailing Address and Zip Code New England Life PAC 501 Boylston St Boston, MA 02116-</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 -> \$500.00</p>	<p>Date (month, day, year) 03/16/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code 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 -> \$500.00</p>	<p>Date (month, day, year) 03/16/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code PMA PAC Paul Magliocchetti Associates 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</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 03/16/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$4000.00</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 "Initial 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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PRINPAC-Principal Financial Grp Stuart Brahs, VP-Fed Govt Relations 711 High St Des Moines, IA 50392-		03/16/200	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$1000.00	
B. Full Name, Mailing Address and Zip Code PHIL-PAC - Philip Morris PAC Beverly E McKittrick 120 Park Ave 25th Floor New York, NY 10017-		03/16/200	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$1000.00	
C. Full Name, Mailing Address and Zip Code Pork PAC / Natl Pork Producers Kirk Farrell PO Box 1023 Des Moines, IA 50306-		03/28/200	\$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	
D. Full Name, Mailing Address and Zip Code RJR PAC / RJR-Nabisco PO Box 718 Winston Salem, NC 27102-		03/16/200	\$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	
E. Full Name, Mailing Address and Zip Code SAPPAC-Society of American Florists 1601 Duke St Alexandria, VA 22314-		03/28/200	\$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 SBC Communications Inc Employees Federal PAC 175 E. Houston, RM 4-R-4 San Antonio, TX 78205-		03/28/200	\$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	
G. Full Name, Mailing Address and Zip Code Assoc. Small Business Investment PAC 666 11th Street NW STE 750 Washington, DC 20001-		03/16/200	\$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	

SUBTOTAL of Receipts This Page (optional)	\$4500.00
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

PAGE 1 OF 1
FOR LINE NUMBER 15

Any information copied from such Reports and Statements may not be used 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 Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147 Receipt For: <input checked="" type="checkbox"/> Salary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	01/31/200	\$23.28
Aggregate Year-to-Date ->		\$23.28	
B. Full Name, Mailing Address and Zip Code Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147 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	01/31/200	\$413.53
Aggregate Year-to-Date ->		\$436.81	
C. Full Name, Mailing Address and Zip Code Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147 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	02/29/200	\$13.83
Aggregate Year-to-Date ->		\$450.64	
D. Full Name, Mailing Address and Zip Code Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147 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	02/29/200	\$415.23
Aggregate Year-to-Date ->		\$865.87	
E. Full Name, Mailing Address and Zip Code Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147 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	03/31/200	\$492.99
Aggregate Year-to-Date ->		\$1358.86	
F. Full Name, Mailing Address and Zip Code Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147 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	03/31/200	\$11.19
Aggregate Year-to-Date ->		\$1370.05	
G. Full Name, Mailing Address and Zip Code Receipt For: <input 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	/ /	
Aggregate Year-to-Date ->			

SUBTOTAL of Receipts This Page (optional)

\$1370.05

TOTAL This Period (last page this line number only)

\$1370.05

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

Any information copied from such reports and statements may not be used by any person for the purpose of soliciting contributions or for other political 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	SEE BELOW Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/29/200	\$373.38
B. Full Name, Mailing Address and Zip Code Action Print West Des Moines, IA 50265-	Purpose of Disbursement Printing campaign materials Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/09/200	\$31.00 MEMO
C. Full Name, Mailing Address and Zip Code West Des Moines Kum & Go	Purpose of Disbursement Travel Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/02/200	\$12.25 MEMO
D. Full Name, Mailing Address and Zip Code West Des Moines Kum & Go	Purpose of Disbursement Travel expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/02/200	\$14.00 MEMO
E. 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)	01/26/200	\$64.00 MEMO
F. Full Name, Mailing Address and Zip Code Postnet 50th Street West Des Moines, IA 50265-	Purpose of Disbursement Shipping Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/01/200	\$30.00 MEMO
G. Full Name, Mailing Address and Zip Code Sloan Texaco	Purpose of Disbursement travel expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/02/200	\$16.50 MEMO

SUBTOTAL of Disbursements This Page (optional)	\$373.38
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

USE SPACE AVAILABLE FOR EACH CATEGORY OF THE DETAILED SUMMARY PAGE

PAGE 2 OF 1
FOR LINE NUMBER 17

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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
US West 925 High Street Des Moines, IA 50309-	Campaign phone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/02/200	\$73.63 MEMO
B. Full Name, Mailing Address and Zip Code United States Postal Service Des Moines, IA 50323-	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/08/200	\$132.00 MEMO
C. Full Name, Mailing Address and Zip Code Bank Card Services Security Nat'l Bank Payment Processing Milwaukee, WI 53288-0200	Purpose of Disbursement see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/01/200	\$687.96
D. Full Name, Mailing Address and Zip Code West Des Moines Kum & Go	Purpose of Disbursement travel expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/23/199	\$22.26 MEMO
E. Full Name, Mailing Address and Zip Code West Des Moines Kum & Go	Purpose of Disbursement travel expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/19/199	\$12.70 MEMO
F. 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)	11/16/199	\$18.88 MEMO
G. 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)	11/18/199	\$47.22 MEMO

SUBTOTAL of Disbursements This Page (optional)	\$687.96
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
United States Postal Service Des Moines, IA 50323-	stamps Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/22/199	\$99.00 MEMO
United States Postal Service Des Moines, IA 50323-	postage for campaign mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/02/199	\$398.75 MEMO
Bank Card Services Security Nat'l Bank Payment Processing Milwaukee, WI 53288-0200	see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/31/200	\$1581.56
Kinko's 10201 University Ave Clive, IA 50325-	photocopies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/14/199	\$7.35 MEMO
Kinko's 10201 University Ave Clive, IA 50325-	copies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/05/200	\$63.21 MEMO
West Des Moines Kum & Go	Travel expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/17/199	\$17.84 MEMO
Office Depot 1550 22nd St West Des Moines, IA 50265-	office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/15/199	\$38.09 MEMO

SUBTOTAL of Disbursements This Page (optional)	\$1581.56
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the detailed Summary Page

Any information supplied 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 under such statutes.

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
Office Depot 1550 22nd St West Des Moines, IA 50265-	office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/16/199	\$20.45 MEMO
Office Depot 1550 22nd St West Des Moines, IA 50265-	office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/05/200	\$15.21 MEMO
US Postmaster West Des Moines, IA 50265-	postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/31/200	\$126.00 MEMO
United States Postal Service Des Moines, IA 50323-	postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/17/199	\$198.00 MEMO
United States Postal Service Des Moines, IA 50323-	shipping Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/04/200	\$62.48 MEMO
United States Postal Service Des Moines, IA 50323-	postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/199	\$396.00 MEMO
Bank Card Services Security National Bank Payment Processing Milwaukee, WI 53288-0200	see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/01/200	\$1083.28

SUBTOTAL of Disbursements This Page (optional)	\$1083.28
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category on the Referred Primary Page

PAGE 5 OF 7
FOR LINE NUMBER 17

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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
Sam Ewing for Congress Committee PO Box 917 Bloomington, IL 61704-	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/31/200	\$1000.00
B. Full Name, Mailing Address and Zip Code Conservative Victory Fund 104 North Carolina Avenue, SE Capitol Hill Washington, DC 20003-	Purpose of Disbursement Fundraising Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/09/200	Amount of Each Disbursement This Period \$456.00 IN KIND
C. Full Name, Mailing Address and Zip Code The Congressional Institute 316 Pennsylvania Ave. SE #408 Washington, DC 20003-	Purpose of Disbursement Conference registration Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/200	Amount of Each Disbursement This Period \$540.00
D. Full Name, Mailing Address and Zip Code JS Day & Associates 2716 144th Street Urbandale, IA 50322-	Purpose of Disbursement Fundraising fees, telephone expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/200	Amount of Each Disbursement This Period \$2676.79
E. Full Name, Mailing Address and Zip Code JS Day & Associates 2716 144th Street Urbandale, IA 50322-	Purpose of Disbursement March Fee, Mailings Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/29/200	Amount of Each Disbursement This Period \$2783.66
F. Full Name, Mailing Address and Zip Code JS Day & Associates 2716 144th Street Urbandale, IA 50322-	Purpose of Disbursement January Fundraising, Organization Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/01/200	Amount of Each Disbursement This Period \$2500.00
G. Full Name, Mailing Address and Zip Code JS Day & Associates 2716 144th Street Urbandale, IA 50322-	Purpose of Disbursement Fundraising Processing Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/04/200	Amount of Each Disbursement This Period \$1727.87

SUBTOTAL of Disbursements This Page (optional)	\$11684.32
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Thomas P Latham 178 180th St Alexandria, IA 50420-	reimbursement for event Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/29/200	\$2690.22
Nancy Maxwell Maxwell & Associates 4010 Franconia Rd Alexandria, VA 22310-	February fee, Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/16/200	\$1476.00
Nancy Maxwell Maxwell & Associates 4010 Franconia Rd Alexandria, VA 22310-	Nov, Dec, January Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/01/200	\$2250.00
Public Opinion Strategies 1033 North Fairfax Street Suite 130 Alexandria, VA 22314-	Research Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/01/200	\$11000.00
Woodbury County Republicans 16 Dearhaven Drive Sioux City, IA 51104-	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/16/200	\$2500.00
Security National Bank 601 Pierce St PO Box 147 Sioux City, IA 51102-0147	check order Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/02/200	\$22.45
The Mail House PO Box 1105 Sioux City, IA 51101-1105	Mailing expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/04/200	\$620.38

SUBTOTAL of Disbursements This Page (optional)	\$20559.05
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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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
Tweeters Catering PO Box 516 Okoboji, IA 51355-	Event Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/29/200	\$402.00
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)	/ /	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)	/ /	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)	/ /	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)	/ /	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)	/ /	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)	/ /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	\$402.00
TOTAL This Period (last page this line number only)	\$36372.35

