

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Friends Of Tim Johnson

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	-32750	630624
(b) Total Contribution Refunds (from Line 20(d))	68071.12	68071.12
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-100821.12	562552.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	60314.59	463542.32
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	2722.81
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	60314.59	460819.51
8. Cash on Hand at Close of Reporting Period (from Line 27).....	293916.67	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Friends Of Tim Johnson

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2012 To: M M / D D / Y Y Y Y 06 / 30 / 2012

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0	14600
(ii) Unitemized	-2250	271996.51
(iii) TOTAL of contributions from individuals	-2250	286596.51
(b) Political Party Committees.....	-10000	5250
(c) Other Political Committees (such as PACs).....	-20500	338777.49
(d) The Candidate	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	-32750	630624
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	0	2722.81
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	508.21	5884.88
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....		
	-32241.79	639231.69

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	60314.59	463542.32
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	22
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	4532.23
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	4532.23
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	13571.12	13571.12
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	54500	54500
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	68071.12	68071.12
21. OTHER DISBURSEMENTS	5000	5643.45
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	133385.71	541811.12

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	459544.17
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	-32241.79
25. SUBTOTAL (add Line 23 and Line 24).....	427302.38
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	133385.71
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	293916.67

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 103
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

A. Full Name (Last, First, Middle Initial)
NRA Political Victory Fund

Mailing Address 11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030-7400

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 19 / 2012

Transaction ID : A-C16604

Amount of Each Receipt this Period
-1500
refund

B. Full Name (Last, First, Middle Initial)
Prosperity PAC

Mailing Address 1006 Pendleton Street

City State Zip Code
Alexandria VA 22314-1837

FEC ID number of contributing federal political committee. **C** C00377689

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 19 / 2012

Transaction ID : A-C16607

Amount of Each Receipt this Period
-3000
refund

C. Full Name (Last, First, Middle Initial)
WAL*PAC

Mailing Address 702 SW 8th Street

City State Zip Code
Bentonville AR 72716-8071

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 19 / 2012

Transaction ID : A-C16610

Amount of Each Receipt this Period
-2500
refund

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

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

-7000.00

-7000.00

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)	PAGE 7 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. BankChampaign, NA		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address PO Box 6897 PO Box 6897		Amount of Each Disbursement this Period 130 Transaction ID : B-E-16621
City Champaign	State IL Zip Code 61826-6897	
Purpose of Disbursement Administrative/Salary/Overhead: Storage		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. BankChampaign, NA		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address PO Box 6897 PO Box 6897		Amount of Each Disbursement this Period 155 Transaction ID : B-E-16622
City Champaign	State IL Zip Code 61826-6897	
Purpose of Disbursement Administrative/Salary/Overhead: Storage		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 320 6th Street		Amount of Each Disbursement this Period 15.45 Transaction ID : B-E-16624
City Charleston	State IL Zip Code 61920-1598	
Purpose of Disbursement Administrative/Salary/Overhead: postage		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	300.45
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 8 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Billy Barooz		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 2521 Village Green Place		Amount of Each Disbursement this Period 98.15 Transaction ID : B-E-16626
City Champaign State IL Zip Code 61822	Purpose of Disbursement Travel: fuel	
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Courier Cafe		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 111 Race Street		Amount of Each Disbursement this Period 12.69 Transaction ID : B-E-16628
City Urbana State IL Zip Code 61801	Purpose of Disbursement Travel: meals	
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Meijer		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 2500 Philo Road		Amount of Each Disbursement this Period 68.04 Transaction ID : B-E-16629
City Urbana State IL Zip Code 61802-8044	Purpose of Disbursement Travel: fuel	
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	178.88
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 9 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Michael Holmes		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 1490 N County Road 1550 E		Amount of Each Disbursement this Period 745 Transaction ID : B-E-16438
City Villa Grove	State IL	
Zip Code 61956-9649	Purpose of Disbursement fundraising consultant	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Michael Holmes		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 1490 N County Road 1550 E		Amount of Each Disbursement this Period 20.4 Transaction ID : B-E-16439
City Villa Grove	State IL	
Zip Code 61956-9649	Purpose of Disbursement Travel: reimbursement, mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Il Dept. of revenue IL Dept. of Revenue		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 101 W. Jefferson		Amount of Each Disbursement this Period 435 Transaction ID : B-E-16692
City Springfield	State IL	
Zip Code 62704	Purpose of Disbursement Administrative/Salary/Overhead: taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1200.40
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 10 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Il Dept. of revenue IL Dept. of Revenue		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 101 W. Jefferson		Amount of Each Disbursement this Period 474.99 Transaction ID : B-E-16764
City Springfield	State IL	
Zip Code 62704	Purpose of Disbursement Administrative/Salary/Overhead: taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. James Zenn		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 2610 Oakton Street Apt. 1W		Amount of Each Disbursement this Period 410 Transaction ID : B-E-16440
City Park Ridge	State IL	
Zip Code 60068-1859	Purpose of Disbursement fundraising consultant	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Alexander's Steakhouse		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2012
Mailing Address 202 W Anthony Drive		Amount of Each Disbursement this Period 128.18 Transaction ID : B-E-16620
City Champaign	State IL	
Zip Code 61822-1218	Purpose of Disbursement Travel: meals	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1013.17
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 11 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Thorntons		Date of Disbursement MM / DD / YYYY 04 / 04 / 2012
Mailing Address 10101 Linn Station Road		Amount of Each Disbursement this Period 64.8 Transaction ID : B-E-16619
City Savoy State IL Zip Code 61874	Purpose of Disbursement Travel: mileage Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Busey Bank		Date of Disbursement MM / DD / YYYY 04 / 05 / 2012
Mailing Address 201 W Main Street		Amount of Each Disbursement this Period 1 Transaction ID : B-E-16634
City Urbana State IL Zip Code 61801-2621	Purpose of Disbursement Administrative/Salary/Overhead: bank fee Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. City of Litchfield		Date of Disbursement MM / DD / YYYY 04 / 05 / 2012
Mailing Address 120 E Ryder Street		Amount of Each Disbursement this Period 29.16 Transaction ID : B-E-16630
City Litchfield State IL Zip Code 62056-2031	Purpose of Disbursement utilities Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	94.96
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 12 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Crane Alley		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address 115 W Main Street		Amount of Each Disbursement this Period 209.34 Transaction ID : B-E-16633
City Urbana State IL Zip Code 61801-2737	Purpose of Disbursement Travel: meals Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Kamakura		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 715 S Neil Street		Amount of Each Disbursement this Period 2025.73 Transaction ID : B-E-16641
City Champaign State IL Zip Code 61820-5283	Purpose of Disbursement Travel: meals Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Marathon Oil		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address Springfield Ave		Amount of Each Disbursement this Period 75 Transaction ID : B-E-16638
City Urbana State IL Zip Code 61820	Purpose of Disbursement Travel: fuel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2310.07
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 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Mongolia		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 301 Neil St		Amount of Each Disbursement this Period 14
City Champaign	State IL Zip Code 61802	
Purpose of Disbursement Travel: meals	Candidate Name	Transaction ID : B-E-16635
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2012 ☐ Primary ☒ General ☐ Other (specify)
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) B. Mongolia		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 301 Neil St		Amount of Each Disbursement this Period 351.82
City Champaign	State IL Zip Code 61802	
Purpose of Disbursement Travel: meals	Candidate Name	Transaction ID : B-E-16640
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2012 ☐ Primary ☒ General ☐ Other (specify)
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) c. Walmart		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 2040 Lawn Dr		Amount of Each Disbursement this Period 40.35
City Rantoul	State IL Zip Code 61866	
Purpose of Disbursement office supplies	Candidate Name	Transaction ID : B-E-16636
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2012 ☐ Primary ☒ General ☐ Other (specify)
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	..... 406.17
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 14 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Robert E Johnson		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 902 Crestwood Drive		Amount of Each Disbursement this Period 202.5 Transaction ID : B-E-16639
City Urbana State IL Zip Code 61801-5202	Purpose of Disbursement Travel: travel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012
Mailing Address 407A N Dunlap Avenue		Amount of Each Disbursement this Period 68.65 Transaction ID : B-E-16644
City Savoy State IL Zip Code 61874-8049	Purpose of Disbursement Travel: fuel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Red Star Liquor		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012
Mailing Address 114 S Race		Amount of Each Disbursement this Period 280.25 Transaction ID : B-E-16647
City Champaign State IL Zip Code 61802	Purpose of Disbursement Travel: meals Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	551.40
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 15 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Thorntons		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012
Mailing Address 10101 Linn Station Road		Amount of Each Disbursement this Period 84.17 Transaction ID : B-E-16645
City Savoy State IL Zip Code 61874	Purpose of Disbursement Travel: fuel 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 21.58 Transaction ID : B-E-16648
City Springfield State IL Zip Code 62702-6012	Purpose of Disbursement Travel: fuel 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Decker Consulting Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address 244 14th Place NE Suite 2		Amount of Each Disbursement this Period 2035.24 Transaction ID : B-E-16478
City Washington State DC Zip Code 20002-8448	Purpose of Disbursement fundraising consultant 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2140.99
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 16 OF 103	
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Jen Dillman Consulting			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012	
Mailing Address 1801 Dial Court			Amount of Each Disbursement this Period 3500	
City Springfield	State IL	Zip Code 62704-3503	Transaction ID : B-E-16479	
Purpose of Disbursement fundraising consultant		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Meijer			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012	
Mailing Address 2500 Philo Road			Amount of Each Disbursement this Period 56.99	
City Urbana	State IL	Zip Code 61802-8044	Transaction ID : B-E-16650	
Purpose of Disbursement Travel: fuel		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. US Postmaster			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012	
Mailing Address 320 6th Street			Amount of Each Disbursement this Period 1.1	
City Charleston	State IL	Zip Code 61920-1598	Transaction ID : B-E-16651	
Purpose of Disbursement Administrative/Salary/Overhead: postage		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3558.09
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 17 OF 103	
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address 320 6th Street		Amount of Each Disbursement this Period 70 Transaction ID : B-E-16690
City Charleston	State IL	
Zip Code 61920-1598	Purpose of Disbursement Administrative/Salary/Overhead: Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. US Treasury		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address Irs		Amount of Each Disbursement this Period 2506.24 Transaction ID : B-E-16688
City Cincinnati	State OH	
Zip Code 45999-0001	Purpose of Disbursement Payroll Taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address PO Box 6170		Amount of Each Disbursement this Period 522.01 Transaction ID : B-E-16689
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Administrative/Salary/Overhead: Phone	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3098.25
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 18 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. William Kyles			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012		
Mailing Address 408 Taylor Thomas Lane			Amount of Each Disbursement this Period 229.5		
City Champaign	State IL	Zip Code 61821	Transaction ID : B-E-16477		
Purpose of Disbursement Travel: reimbursement, mileage		002 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Randi L Parr			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012		
Mailing Address 2020 10th Street Apt. 304			Amount of Each Disbursement this Period 56.1		
City Charleston	State IL	Zip Code 61920-3435	Transaction ID : B-E-16687		
Purpose of Disbursement Travel: mileage		002 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Crane Alley			Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012		
Mailing Address 115 W Main Street			Amount of Each Disbursement this Period 25.75		
City Urbana	State IL	Zip Code 61801-2737	Transaction ID : B-E-16653		
Purpose of Disbursement Travel: meals		002 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	311.35
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 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Crane Alley		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 115 W Main Street		Amount of Each Disbursement this Period 159.74 Transaction ID : B-E-16654
City Urbana State IL Zip Code 61801-2737	Purpose of Disbursement Travel: meals Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Decker Consulting Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 244 14th Place NE Suite 2		Amount of Each Disbursement this Period 8611.37 Transaction ID : B-E-16488
City Washington State DC Zip Code 20002-8448	Purpose of Disbursement fundraising consultant Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Jen Dillman Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 1801 Dial Court		Amount of Each Disbursement this Period 3500 Transaction ID : B-E-16487
City Springfield State IL Zip Code 62704-3503	Purpose of Disbursement fundraising consultant Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	12271.11
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 OF 103	
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Robert E Johnson		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 902 Crestwood Drive		Amount of Each Disbursement this Period 2594.59
City Urbana	State IL Zip Code 61801-5202	
Purpose of Disbursement Administrative/Salary/Overhead: salary	Candidate Name	Transaction ID : B-E-16655
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Category/Type 001
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Randi L Parr		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 2020 10th Street Apt. 304		Amount of Each Disbursement this Period 140.2
City Charleston	State IL Zip Code 61920-3435	
Purpose of Disbursement Travel: Mileage	Candidate Name	Transaction ID : B-E-16691
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Category/Type 002
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Bizou		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 259 N. Main		Amount of Each Disbursement this Period 101.03
City Decatur	State IL Zip Code 62523	
Purpose of Disbursement Travel: meals	Candidate Name	Transaction ID : B-E-16658
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Category/Type 002
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2835.82
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 21 OF 103	
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Marathon Oil		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address Springfield Ave		Amount of Each Disbursement this Period 64.95
City Urbana State IL Zip Code 61820	Purpose of Disbursement Travel: meals	
Candidate Name	Category/Type 002	Transaction ID : B-E-16657
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Busey Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 201 W Main Street		Amount of Each Disbursement this Period 1
City Urbana State IL Zip Code 61801-2621	Purpose of Disbursement Administrative/Salary/Overhead: bank fee	
Candidate Name	Category/Type 001	Transaction ID : B-E-16659
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 407A N Dunlap Avenue		Amount of Each Disbursement this Period 70.4
City Savoy State IL Zip Code 61874-8049	Purpose of Disbursement Travel: fuel	
Candidate Name	Category/Type 002	Transaction ID : B-E-16665
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	136.35
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 22 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Marriott Hotel		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 10700 Pear Tree Lane		Amount of Each Disbursement this Period 368.87
City Saint Louis	State MO	
Zip Code 63134-4100	Purpose of Disbursement Travel: travel	Transaction ID : B-E-16667
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mongolia		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 301 Neil St		Amount of Each Disbursement this Period 94.18
City Champaign	State IL	
Zip Code 61802	Purpose of Disbursement Travel: meals	Transaction ID : B-E-16666
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Thorntons		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 10101 Linn Station Road		Amount of Each Disbursement this Period 38.89
City Savoy	State IL	
Zip Code 61874	Purpose of Disbursement Travel: fuel	Transaction ID : B-E-16664
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	501.94
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 23 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Robert E Johnson		Date of Disbursement MM / DD / YYYY 04 / 16 / 2012
Mailing Address 902 Crestwood Drive		Amount of Each Disbursement this Period 504 Transaction ID : B-E-16668
City Urbana	State IL Zip Code 61801-5202	
Purpose of Disbursement Travel: Travel	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Aristotle International		Date of Disbursement MM / DD / YYYY 04 / 17 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1500 Transaction ID : B-E-16589
City Washington	State DC Zip Code 20003-1164	
Purpose of Disbursement Database program	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Marathon Oil		Date of Disbursement MM / DD / YYYY 04 / 17 / 2012
Mailing Address Springfield Ave		Amount of Each Disbursement this Period 60.48 Transaction ID : B-E-16670
City Urbana	State IL Zip Code 61820	
Purpose of Disbursement Travel: fuel	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2064.48
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 24 OF 103	
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. James Zenn		Date of Disbursement MM / DD / YYYY 04 / 17 / 2012
Mailing Address 2610 Oakton Street Apt. 1W		Amount of Each Disbursement this Period 760 Transaction ID : B-E-16591
City Park Ridge	State IL	
Zip Code 60068-1859	Purpose of Disbursement fundraising consultant	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Exxon Mobile		Date of Disbursement MM / DD / YYYY 04 / 18 / 2012
Mailing Address 407A N Dunlap Avenue		Amount of Each Disbursement this Period 59.98 Transaction ID : B-E-16671
City Savoy	State IL	
Zip Code 61874-8049	Purpose of Disbursement Travel: fuel	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Thorntons		Date of Disbursement MM / DD / YYYY 04 / 18 / 2012
Mailing Address 10101 Linn Station Road		Amount of Each Disbursement this Period 61.85 Transaction ID : B-E-16672
City Savoy	State IL	
Zip Code 61874	Purpose of Disbursement Travel: fuel	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	881.85
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 25 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Urbana Express		Date of Disbursement MM / DD / YYYY 04 / 18 / 2012
Mailing Address 306 E Main Street		Amount of Each Disbursement this Period 75.95
City Urbana	State IL	
Zip Code 61802-2730	Purpose of Disbursement Travel: fuel	Transaction ID : B-E-16673
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Shell Oil		Date of Disbursement MM / DD / YYYY 04 / 20 / 2012
Mailing Address 4 Corvette Drive		Amount of Each Disbursement this Period 113.99
City Litchfield	State IL	
Zip Code 62056-1090	Purpose of Disbursement Travel: fuel	Transaction ID : B-E-16674
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Alexander's Steakhouse		Date of Disbursement MM / DD / YYYY 04 / 23 / 2012
Mailing Address 202 W Anthony Drive		Amount of Each Disbursement this Period 217.26
City Champaign	State IL	
Zip Code 61822-1218	Purpose of Disbursement Travel: meals	Transaction ID : B-E-16679
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	407.20
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 26 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Casey's General Store			Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address 3001 E Clear Lake Avenue			Amount of Each Disbursement this Period 30.08
City Springfield	State IL	Zip Code 62702-6012	
Purpose of Disbursement Travel: fuel		Category/ Type 002	Transaction ID : B-E-16676
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Casey's General Store			Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address 3001 E Clear Lake Avenue			Amount of Each Disbursement this Period 67.06
City Springfield	State IL	Zip Code 62702-6012	
Purpose of Disbursement Travel: fuel		Category/ Type 002	Transaction ID : B-E-16680
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. Circle K			Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address 2011 N Lincoln Avenue			Amount of Each Disbursement this Period 68.74
City Urbana	State IL	Zip Code 61801-1026	
Purpose of Disbursement Travel: fuel		Category/ Type 002	Transaction ID : B-E-16678
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	165.88
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 27 OF 103	
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address 407A N Dunlap Avenue		Amount of Each Disbursement this Period 67.8 Transaction ID : B-E-16677
City Savoy State IL Zip Code 61874-8049	Purpose of Disbursement Travel: fuel 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 41.28 Transaction ID : B-E-16682
City Springfield State IL Zip Code 62702-6012	Purpose of Disbursement Travel: fuel 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Marathon Oil		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2012
Mailing Address Springfield Ave		Amount of Each Disbursement this Period 65.29 Transaction ID : B-E-16686
City Urbana State IL Zip Code 61820	Purpose of Disbursement Travel: fuel 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	174.37
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 28 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Robert E Johnson		Date of Disbursement MM / DD / YYYY 04 / 27 / 2012
Mailing Address 902 Crestwood Drive		Amount of Each Disbursement this Period 24.95 Transaction ID : B-E-16684
City Urbana State IL Zip Code 61801-5202	Purpose of Disbursement reimbursement office supplies Candidate Name Category/Type 001	
Office Sought: House Senate President Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Tony Ashby		Date of Disbursement MM / DD / YYYY 04 / 30 / 2012
Mailing Address 603 Mitchell Court		Amount of Each Disbursement this Period 100 Transaction ID : B-E-16685
City Champaign State IL Zip Code 61821-3533	Purpose of Disbursement newspaper service Candidate Name Category/Type 001	
Office Sought: House Senate President Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Casey's General Store		Date of Disbursement MM / DD / YYYY 05 / 01 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 66.7 Transaction ID : B-E-16696
City Springfield State IL Zip Code 62702-6012	Purpose of Disbursement Travel: fuel Candidate Name Category/Type 002	
Office Sought: House Senate President Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	191.65
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 29 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. The Ariston Cafe		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address PO Box 453		Amount of Each Disbursement this Period 120 Transaction ID : B-E-16614
City Litchfield State IL Zip Code 62056-0453	Purpose of Disbursement Travel: meals Candidate Name Category/Type 002	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Randi L Parr		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 2020 10th Street Apt. 304		Amount of Each Disbursement this Period 750 Transaction ID : B-E-16765
City Charleston State IL Zip Code 61920-3435	Purpose of Disbursement fundraising consulting fee Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Alamo Steakhouse		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 700 Broadway East		Amount of Each Disbursement this Period 57.25 Transaction ID : B-E-16698
City Mattoon State IL Zip Code 61938	Purpose of Disbursement Travel: meals Candidate Name Category/Type 002	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	927.25
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 30 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 407A N Dunlap Avenue		Amount of Each Disbursement this Period 73.71
City Savoy State IL Zip Code 61874-8049	Purpose of Disbursement Travel: fuel 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-16699
State: District:		

Full Name (Last, First, Middle Initial) B. Business Technology Center		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2012
Mailing Address 701 Devonshire Drive		Amount of Each Disbursement this Period 285
City Champaign State IL Zip Code 61820-7337	Purpose of Disbursement office rent 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-16701
State: District:		

Full Name (Last, First, Middle Initial) c. The Ariston Cafe		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2012
Mailing Address PO Box 453		Amount of Each Disbursement this Period 120
City Litchfield State IL Zip Code 62056-0453	Purpose of Disbursement Travel: meals 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-16700
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	478.71
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 31 OF 103	
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. James Zenn		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2012
Mailing Address 2610 Oakton Street Apt. 1W		Amount of Each Disbursement this Period 370 Transaction ID : B-E-16702
City Park Ridge	State IL	
Zip Code 60068-1859	Purpose of Disbursement Consulting fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Buffalo Wild Wings		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2012
Mailing Address 1335 Savoy Plaza Drive		Amount of Each Disbursement this Period 12 Transaction ID : B-E-16703
City Savoy	State IL	
Zip Code 61874	Purpose of Disbursement Travel: meals	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 56.54 Transaction ID : B-E-16704
City Springfield	State IL	
Zip Code 62702-6012	Purpose of Disbursement Travel: fuel	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	438.54
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 32 OF 103	
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement MM / DD / YYYY 05 / 07 / 2012
Mailing Address PO Box 6170		Amount of Each Disbursement this Period 655.52
City Carol Stream	State IL	
Zip Code 60197	Category/ Type 001	Transaction ID : B-E-16705
Purpose of Disbursement Administrative/Salary/Overhead: phone		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Billy Barooz		Date of Disbursement MM / DD / YYYY 05 / 09 / 2012
Mailing Address 2521 Village Green Place		Amount of Each Disbursement this Period 58
City Champaign	State IL	
Zip Code 61822	Category/ Type 002	Transaction ID : B-E-16707
Purpose of Disbursement Travel: meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Casey's General Store		Date of Disbursement MM / DD / YYYY 05 / 09 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 66.62
City Springfield	State IL	
Zip Code 62702-6012	Category/ Type 002	Transaction ID : B-E-16710
Purpose of Disbursement Travel: fuel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	780.14
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 33 OF 103	
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address 407A N Dunlap Avenue		Amount of Each Disbursement this Period 61.9 Transaction ID : B-E-16709
City Savoy State IL Zip Code 61874-8049	Purpose of Disbursement Travel: fuel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Macoupin County Central Committee		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address PO Box 27		Amount of Each Disbursement this Period 300 Transaction ID : B-E-16767
City Carlinville State IL Zip Code 62626-0027	Purpose of Disbursement Political Contribution: contribution Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Thorntons		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address 10101 Linn Station Road		Amount of Each Disbursement this Period 59.16 Transaction ID : B-E-16708
City Savoy State IL Zip Code 61874	Purpose of Disbursement Travel: fuel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	421.06
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 34 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Alexander's Steakhouse		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 202 W Anthony Drive		Amount of Each Disbursement this Period 157.96
City Champaign	State IL	Zip Code 61822-1218
Purpose of Disbursement Travel: meals	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) B. Business Technology Center		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 701 Devonshire Drive		Amount of Each Disbursement this Period 293.5
City Champaign	State IL	Zip Code 61820-7337
Purpose of Disbursement Office rent	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) C. Consolidated Communications		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address PO Box 2564		Amount of Each Disbursement this Period 43.07
City Decatur	State IL	Zip Code 62525-2564
Purpose of Disbursement Administrative/Salary/Overhead: Phone	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

SUBTOTAL of Disbursements This Page (optional).....	494.53
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 35 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Decker Consulting Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 244 14th Place NE Suite 2		Amount of Each Disbursement this Period 2000 Transaction ID : B-E-16717
City Washington State DC Zip Code 20002-8448	Purpose of Disbursement fundraising consultant Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. DirecTV		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address PO Box 9001069		Amount of Each Disbursement this Period 192.96 Transaction ID : B-E-16716
City Louisville State KY Zip Code 40290-1069	Purpose of Disbursement Administrative/Salary/Overhead: cable Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Thorntons		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 10101 Linn Station Road		Amount of Each Disbursement this Period 89.66 Transaction ID : B-E-16714
City Savoy State IL Zip Code 61874	Purpose of Disbursement Travel: fuel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2282.62
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 36 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Randi L Parr		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 2020 10th Street Apt. 304		Amount of Each Disbursement this Period 56.1 Transaction ID : B-E-16768
City Charleston	State IL Zip Code 61920-3435	
Purpose of Disbursement Travel: fuel	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 43.29 Transaction ID : B-E-16720
City Springfield	State IL Zip Code 62702-6012	
Purpose of Disbursement Travel: fuel	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 91.23 Transaction ID : B-E-16722
City Springfield	State IL Zip Code 62702-6012	
Purpose of Disbursement Travel: fuel	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	190.62
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 37 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Courier Cafe		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 111 Race Street		Amount of Each Disbursement this Period 17 Transaction ID : B-E-16719
City Urbana State IL Zip Code 61801	Purpose of Disbursement Travel: meals	
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Marathon Oil		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address Springfield Ave		Amount of Each Disbursement this Period 69.35 Transaction ID : B-E-16721
City Urbana State IL Zip Code 61820	Purpose of Disbursement Travel: fuel	
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Courier Cafe		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 111 Race Street		Amount of Each Disbursement this Period 4 Transaction ID : B-E-16723
City Urbana State IL Zip Code 61801	Purpose of Disbursement Travel: meals	
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	..... 90.35
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 38 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012
Mailing Address 407A N Dunlap Avenue		Amount of Each Disbursement this Period 66.4
City Savoy State IL Zip Code 61874-8049	Purpose of Disbursement Travel: fuel	
Candidate Name	002 Category/Type	Transaction ID : B-E-16724
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Thorntons		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012
Mailing Address 10101 Linn Station Road		Amount of Each Disbursement this Period 76.91
City Savoy State IL Zip Code 61874	Purpose of Disbursement Travel: fuel	
Candidate Name	002 Category/Type	Transaction ID : B-E-16725
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Marathon Oil		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address Springfield Ave		Amount of Each Disbursement this Period 76.85
City Urbana State IL Zip Code 61820	Purpose of Disbursement Travel: fuel	
Candidate Name	002 Category/Type	Transaction ID : B-E-16729
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	220.16
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 39 OF 103	
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Robert E Johnson		Date of Disbursement MM / DD / YYYY 05 / 17 / 2012
Mailing Address 902 Crestwood Drive		Amount of Each Disbursement this Period 2594.59
City Urbana	State IL Zip Code 61801-5202	
Purpose of Disbursement Administrative/Salary/Overhead: salary		Transaction ID : B-E-16730
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type 001
State: District:		

Full Name (Last, First, Middle Initial) B. Alexander's Steakhouse		Date of Disbursement MM / DD / YYYY 05 / 18 / 2012
Mailing Address 202 W Anthony Drive		Amount of Each Disbursement this Period 46.36
City Champaign	State IL Zip Code 61822-1218	
Purpose of Disbursement Travel: meals		Transaction ID : B-E-16732
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type 002
State: District:		

Full Name (Last, First, Middle Initial) c. Buffalo Wild Wings		Date of Disbursement MM / DD / YYYY 05 / 18 / 2012
Mailing Address 1335 Savoy Plaza Drive		Amount of Each Disbursement this Period 13.28
City Savoy	State IL Zip Code 61874	
Purpose of Disbursement Travel: meals		Transaction ID : B-E-16734
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type 002
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2654.23
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 40 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 57.94 Transaction ID : B-E-16733
City Springfield State IL Zip Code 62702-6012	Purpose of Disbursement Travel: fuel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CASSPAC		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address PO Box 80694		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-16616
City Baton Rouge State LA Zip Code 70898-0694	Purpose of Disbursement contribution refund Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Alexander's Steakhouse		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 202 W Anthony Drive		Amount of Each Disbursement this Period 86.48 Transaction ID : B-E-16741
City Champaign State IL Zip Code 61822-1218	Purpose of Disbursement Travel: meals Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1144.48
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 41 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Angus Bailey's		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 510 N Side Square		Amount of Each Disbursement this Period 30.38
City Carlinville	State IL	
Zip Code 62626-1749	Purpose of Disbursement Travel: meals	Transaction ID : B-E-16737
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 29.46
City Springfield	State IL	
Zip Code 62702-6012	Purpose of Disbursement Travel: fuel	Transaction ID : B-E-16736
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Jim's Steakhouse		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 2307 E Washington		Amount of Each Disbursement this Period 72.5
City Bloomington	State IL	
Zip Code 61901	Purpose of Disbursement Travel: meals	Transaction ID : B-E-16740
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	132.34
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 42 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 4 Corvette Drive		Amount of Each Disbursement this Period 66.77
City Litchfield	State IL Zip Code 62056-1090	
Purpose of Disbursement Travel: fuel	Category/Type 002	Transaction ID : B-E-16739
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 65.19
City Springfield	State IL Zip Code 62702-6012	
Purpose of Disbursement Travel: fuel	Category/Type 002	Transaction ID : B-E-16743
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 64.5
City Springfield	State IL Zip Code 62702-6012	
Purpose of Disbursement Travel: fuel	Category/Type 002	Transaction ID : B-E-16745
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	196.46
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 43 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Courier Cafe		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address 111 Race Street		Amount of Each Disbursement this Period 96 Transaction ID : B-E-16746
City Urbana State IL Zip Code 61801	Purpose of Disbursement Travel: meals Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Urbana Express		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address 306 E Main Street		Amount of Each Disbursement this Period 62.3 Transaction ID : B-E-16742
City Urbana State IL Zip Code 61802-2730	Purpose of Disbursement Travel: fuel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Courier Cafe		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address 111 Race Street		Amount of Each Disbursement this Period 21.61 Transaction ID : B-E-16749
City Urbana State IL Zip Code 61801	Purpose of Disbursement Travel: meals Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	179.91
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 44 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 72.72
City Springfield State IL Zip Code 62702-6012	Purpose of Disbursement Travel: fuel	
Candidate Name	Category/Type 002	Transaction ID : B-E-16754
Office Sought: House Senate President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 73.93
City Springfield State IL Zip Code 62702-6012	Purpose of Disbursement Travel: fuel	
Candidate Name	Category/Type 002	Transaction ID : B-E-16755
Office Sought: House Senate President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Consolidated Communications		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address PO Box 2564		Amount of Each Disbursement this Period 43.07
City Decatur State IL Zip Code 62525-2564	Purpose of Disbursement Administrative/Salary/Overhead: phone	
Candidate Name	Category/Type 001	Transaction ID : B-E-16753
Office Sought: House Senate President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	189.72
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 45 OF 103	
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Courier Cafe		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 111 Race Street		Amount of Each Disbursement this Period 15
City Urbana	State IL Zip Code 61801	
Purpose of Disbursement Travel: meals	Candidate Name	Transaction ID : B-E-16752
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Category/Type 002
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address PO Box 6170		Amount of Each Disbursement this Period 636.97
City Carol Stream	State IL Zip Code 60197	
Purpose of Disbursement Administrative/Salary/Overhead: phone	Candidate Name	Transaction ID : B-E-16757
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Category/Type 001
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 39.13
City Springfield	State IL Zip Code 62702-6012	
Purpose of Disbursement Travel: fuel	Candidate Name	Transaction ID : B-E-16760
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Category/Type 002
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	..... 691.10
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 46 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Crane Alley		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 115 W Main Street		Amount of Each Disbursement this Period 333.69 Transaction ID : B-E-16763
City Urbana State IL Zip Code 61801-2737	Purpose of Disbursement Travel: meals	
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 407A N Dunlap Avenue		Amount of Each Disbursement this Period 55.16 Transaction ID : B-E-16761
City Savoy State IL Zip Code 61874-8049	Purpose of Disbursement Travel: fuel	
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Murphy		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 511 S Dunlap Avenue		Amount of Each Disbursement this Period 48.43 Transaction ID : B-E-16758
City Savoy State IL Zip Code 61874-8720	Purpose of Disbursement Travel: fuel	
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	333.69
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 47 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Urbana Express		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 306 E Main Street		Amount of Each Disbursement this Period 70.8
City Urbana	State IL Zip Code 61802-2730	
Purpose of Disbursement Travel: fuel	Category/Type 002	Transaction ID : B-E-16759
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Tony Ashby		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 603 Mitchell Court		Amount of Each Disbursement this Period 100
City Champaign	State IL Zip Code 61821-3533	
Purpose of Disbursement Newspaper service	Category/Type 001	Transaction ID : B-E-16762
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Randi L Parr		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 2020 10th Street Apt. 304		Amount of Each Disbursement this Period 200
City Charleston	State IL Zip Code 61920-3435	
Purpose of Disbursement Fundraising Consultant Fee	Category/Type 001	Transaction ID : B-E-16769
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	370.80
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 48 OF 103	
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Marathon Oil		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address Springfield Ave		Amount of Each Disbursement this Period 28.3
City Urbana	State IL Zip Code 61820	
Purpose of Disbursement Travel: fuel	Category/Type 002	Transaction ID : B-E-16772
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 71.57
City Springfield	State IL Zip Code 62702-6012	
Purpose of Disbursement Travel: fuel	Category/Type 002	Transaction ID : B-E-16774
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Courier Cafe		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 111 Race Street		Amount of Each Disbursement this Period 14.5
City Urbana	State IL Zip Code 61801	
Purpose of Disbursement Travel: meals	Category/Type 002	Transaction ID : B-E-16773
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	114.37
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 49 OF 103	
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 62.63 Transaction ID : B-E-16776
City Springfield	State IL Zip Code 62702-6012	
Purpose of Disbursement Travel: fuel	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Meijer		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address 2500 Philo Road		Amount of Each Disbursement this Period 64.32 Transaction ID : B-E-16779
City Urbana	State IL Zip Code 61802-8044	
Purpose of Disbursement Travel: fuel	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Urbana Express		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address 306 E Main Street		Amount of Each Disbursement this Period 74.53 Transaction ID : B-E-16777
City Urbana	State IL Zip Code 61802-2730	
Purpose of Disbursement Travel: fuel	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	201.48
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 50 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address PO Box 6170		Amount of Each Disbursement this Period 730.77
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Administrative/Salary/Overhead: phone	Transaction ID : B-E-16778
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Walmart		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address 2040 Lawn Dr		Amount of Each Disbursement this Period 23.78
City Rantoul	State IL	
Zip Code 61866	Purpose of Disbursement office supplies	Transaction ID : B-E-16775
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Crane Alley		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address 115 W Main Street		Amount of Each Disbursement this Period 86.64
City Urbana	State IL	
Zip Code 61801-2737	Purpose of Disbursement Travel: fuel	Transaction ID : B-E-16780
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	841.19
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 51 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 49.5 Transaction ID : B-E-16784
City Springfield State IL Zip Code 62702-6012	Purpose of Disbursement Travel: fuel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 55.14 Transaction ID : B-E-16785
City Springfield State IL Zip Code 62702-6012	Purpose of Disbursement Travel: fuel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 61.05 Transaction ID : B-E-16786
City Springfield State IL Zip Code 62702-6012	Purpose of Disbursement Travel: fuel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	165.69
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 52 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 65.76 Transaction ID : B-E-16787
City Springfield	State IL Zip Code 62702-6012	
Purpose of Disbursement Travel: fuel	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Alexander's Steakhouse		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 202 W Anthony Drive		Amount of Each Disbursement this Period 87.61 Transaction ID : B-E-16788
City Champaign	State IL Zip Code 61822-1218	
Purpose of Disbursement Travel: meals	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Courier Cafe		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2012
Mailing Address 111 Race Street		Amount of Each Disbursement this Period 6.37 Transaction ID : B-E-16789
City Urbana	State IL Zip Code 61801	
Purpose of Disbursement Travel: meals	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	159.74
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 53 OF 103	
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. ICE PAC		Date of Disbursement MM / DD / YYYY 06 / 13 / 2012
Mailing Address 9518 E Staring Lane		Amount of Each Disbursement this Period 500 Transaction ID : B-E-16617
City Eden Prairie	State MN	
Zip Code 55347	Purpose of Disbursement Administrative/Salary/Overhead: refund	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Casey's General Store		Date of Disbursement MM / DD / YYYY 06 / 14 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 48.54 Transaction ID : B-E-16791
City Springfield	State IL	
Zip Code 62702-6012	Purpose of Disbursement Travel: fuel	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Alexander's Steakhouse		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 202 W Anthony Drive		Amount of Each Disbursement this Period 18.19 Transaction ID : B-E-16793
City Champaign	State IL	
Zip Code 61822-1218	Purpose of Disbursement Travel: meals	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	566.73
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 54 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 73.35 Transaction ID : B-E-16795
City Springfield State IL Zip Code 62702-6012	Purpose of Disbursement Travel: fuel Candidate Name Category/Type 002	
Office Sought: House Senate President Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 59.73 Transaction ID : B-E-16801
City Springfield State IL Zip Code 62702-6012	Purpose of Disbursement Travel: fuel Candidate Name Category/Type 002	
Office Sought: House Senate President Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Decker Consulting Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 244 14th Place NE Suite 2		Amount of Each Disbursement this Period 2000 Transaction ID : B-E-16798
City Washington State DC Zip Code 20002-8448	Purpose of Disbursement fundraising consultant Candidate Name Category/Type 001	
Office Sought: House Senate President Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2133.08
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 55 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Decker Consulting Services			Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 244 14th Place NE Suite 2			Amount of Each Disbursement this Period 2800 Transaction ID : B-E-16799
City Washington	State DC	Zip Code 20002-8448	
Purpose of Disbursement fundraising consultant		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Robert E Johnson			Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 902 Crestwood Drive			Amount of Each Disbursement this Period 2594.59 Transaction ID : B-E-16797
City Urbana	State IL	Zip Code 61801-5202	
Purpose of Disbursement Administrative/Salary/Overhead: salary		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Alexander's Steakhouse			Date of Disbursement MM / DD / YYYY 06 / 18 / 2012
Mailing Address 202 W Anthony Drive			Amount of Each Disbursement this Period 80.48 Transaction ID : B-E-16803
City Champaign	State IL	Zip Code 61822-1218	
Purpose of Disbursement Travel: melas		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	5475.07
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 56 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Marathon Oil		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address Springfield Ave		Amount of Each Disbursement this Period 62.12 Transaction ID : B-E-16802
City Urbana State IL Zip Code 61820	Purpose of Disbursement Travel: fuel 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Marathon Oil		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012
Mailing Address Springfield Ave		Amount of Each Disbursement this Period 72.68 Transaction ID : B-E-16805
City Urbana State IL Zip Code 61820	Purpose of Disbursement Travel: fuel 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Meijer		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 2500 Philo Road		Amount of Each Disbursement this Period 69.95 Transaction ID : B-E-16806
City Urbana State IL Zip Code 61802-8044	Purpose of Disbursement Travel: fuel 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	204.75
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 57 OF 103		
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Alexander's Steakhouse		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012
Mailing Address 202 W Anthony Drive		Amount of Each Disbursement this Period 87.92
City Champaign	State IL	
Zip Code 61822-1218	Purpose of Disbursement Travel: meals	Transaction ID : B-E-16816
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Buffalo Wild Wings		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012
Mailing Address 1335 Savoy Plaza Drive		Amount of Each Disbursement this Period 51.24
City Savoy	State IL	
Zip Code 61874	Purpose of Disbursement Travel: meals	Transaction ID : B-E-16812
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Casey's General Store		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 71.6
City Springfield	State IL	
Zip Code 62702-6012	Purpose of Disbursement Travel: fuel	Transaction ID : B-E-16815
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	210.76
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 58 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 407A N Dunlap Avenue		Amount of Each Disbursement this Period 49.23
City Savoy State IL Zip Code 61874-8049	Purpose of Disbursement Travel: fuel	
Candidate Name	Category/Type 002	Transaction ID : B-E-16808
Office Sought: House Senate President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 407A N Dunlap Avenue		Amount of Each Disbursement this Period 60.74
City Savoy State IL Zip Code 61874-8049	Purpose of Disbursement Travel: fuel	
Candidate Name	Category/Type 002	Transaction ID : B-E-16809
Office Sought: House Senate President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Marathon Oil		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address Springfield Ave		Amount of Each Disbursement this Period 69
City Urbana State IL Zip Code 61820	Purpose of Disbursement Travel: fuel	
Candidate Name	Category/Type 002	Transaction ID : B-E-16814
Office Sought: House Senate President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	178.97
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 59 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012
Mailing Address PO Box 6170		Amount of Each Disbursement this Period 195.71 Transaction ID : B-E-16817
City Carol Stream	State IL	
Zip Code 60197	Category/ Type 001	
Purpose of Disbursement Administrative/Salary/Overhead: phones		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Casey's General Store		Date of Disbursement MM / DD / YYYY 06 / 26 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 63.21 Transaction ID : B-E-16819
City Springfield	State IL	
Zip Code 62702-6012	Category/ Type 002	
Purpose of Disbursement Travel: fuel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Busey Bank		Date of Disbursement MM / DD / YYYY 06 / 28 / 2012
Mailing Address 201 W Main Street		Amount of Each Disbursement this Period 0.37 Transaction ID : B-E-16824
City Urbana	State IL	
Zip Code 61801-2621	Category/ Type 001	
Purpose of Disbursement service charge		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	259.29
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 60 OF 103			
	<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)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Casey's General Store			Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address 3001 E Clear Lake Avenue			Amount of Each Disbursement this Period 65.94 Transaction ID : B-E-16821
City Springfield	State IL	Zip Code 62702-6012	
Purpose of Disbursement Travel: fuel		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Crane Alley			Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address 115 W Main Street			Amount of Each Disbursement this Period 140.89 Transaction ID : B-E-16823
City Urbana	State IL	Zip Code 61801-2737	
Purpose of Disbursement Travel: meals		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Tony Ashby			Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address 603 Mitchell Court			Amount of Each Disbursement this Period 100 Transaction ID : B-E-16822
City Champaign	State IL	Zip Code 61821-3533	
Purpose of Disbursement Newspaper service		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	306.83
TOTAL This Period (last page this line number only).....	57829.41

**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 61 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. John and Kay Henriksen			Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address 725 W Vine Street			Amount of Each Disbursement this Period 250 Transaction ID : B-E-16590
City Springfield	State IL	Zip Code 62704-2848	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Jack Chamblin			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 13531 E 600th Ave			Amount of Each Disbursement this Period 500 Transaction ID : B-E-16615
City Robinson	State IL	Zip Code 62454	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Claire Manning			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address 1617 W Leland Avenue			Amount of Each Disbursement this Period 150 Transaction ID : B-E-16825
City Springfield	State IL	Zip Code 62704-3359	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	900.00
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)	PAGE 62 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Jim Capel III		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 8 Greencroft Drive		Amount of Each Disbursement this Period 500 Transaction ID : B-E-16826
City Champaign	State IL	
Zip Code 61821-5118	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Barham Benefit Group		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 919 W Kirby Avenue		Amount of Each Disbursement this Period 150 Transaction ID : B-E-16895
City Champaign	State IL	
Zip Code 61821-5121	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. William Acton		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 29388 Henning Road		Amount of Each Disbursement this Period 100 Transaction ID : B-E-16887
City Alvin	State IL	
Zip Code 61811	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	750.00
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)	PAGE 63 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Charles Adams			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012		
Mailing Address 21 Saint Andrews			Amount of Each Disbursement this Period 500		
City Mattoon	State IL	Zip Code 61938	Transaction ID : B-E-16835		
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) B. Jack Allen			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012		
Mailing Address 108 E. Buckner			Amount of Each Disbursement this Period 50		
City Tuscola	State IL	Zip Code 61953	Transaction ID : B-E-16855		
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) c. John & Joan Atwell			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012		
Mailing Address 12355 E. County Road 210N			Amount of Each Disbursement this Period 25		
City Lerna	State IL	Zip Code 62440	Transaction ID : B-E-16914		
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	575.00
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)	PAGE 64 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Daniel Baechle		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 10 Maple Street		Amount of Each Disbursement this Period 101 Transaction ID : B-E-16839
City Yorkville	State IL Zip Code 60560-9529	
Purpose of Disbursement Contribution Refund: refund	Category/Type 010	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Janice Bahr		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 2506 Stanford Dr		Amount of Each Disbursement this Period 20 Transaction ID : B-E-16911
City Champaign	State IL Zip Code 61820	
Purpose of Disbursement Contribution Refund: refund	Category/Type 010	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. James Bickers		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 1707 Brad		Amount of Each Disbursement this Period 100 Transaction ID : B-E-16857
City Urbana	State IL Zip Code 61802	
Purpose of Disbursement Contribution Refund: refund	Category/Type 010	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	221.00
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)	PAGE 65 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Jack & Susan Blevins			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 912 N. Riverview Ln.			Amount of Each Disbursement this Period 95.12 Transaction ID : B-E-16909
City Mahomet	State IL	Zip Code 61853-9768	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Christopher Burian			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 405 Waltham Street # 383			Amount of Each Disbursement this Period 20.12 Transaction ID : B-E-16897
City Lexington	State MA	Zip Code 02421-7934	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Robert & Shirley Carroll			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 17583 N. 1090 East Road			Amount of Each Disbursement this Period 25 Transaction ID : B-E-16877
City Pontiac	State IL	Zip Code 61764	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	95.12
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 66 OF 103	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Donald and Lavon Cler		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 306 W Central Avenue		Amount of Each Disbursement this Period 100 Transaction ID : B-E-16900
City Thomasboro	State IL	
Zip Code 61878-9667	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Don & Joanne Cochonour		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address PO Box 185		Amount of Each Disbursement this Period 25 Transaction ID : B-E-16899
City Casey	State IL	
Zip Code 62420	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Charles and Dorothy Collins		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 503 McGee Road		Amount of Each Disbursement this Period 200 Transaction ID : B-E-16836
City Urbana	State IL	
Zip Code 61802	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	325.00
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)	PAGE 67 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. David Combs			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012	
Mailing Address 2014 Prairie View			Amount of Each Disbursement this Period 200	
City Urbana	State IL	Zip Code 61802	Transaction ID : B-E-16841	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. Gery Conlin			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012	
Mailing Address 320 Crestwood Drive			Amount of Each Disbursement this Period 250	
City Arthur	State IL	Zip Code 61911	Transaction ID : B-E-16851	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) c. Laurence Crofutt			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012	
Mailing Address 1020 13th Street			Amount of Each Disbursement this Period 25	
City Charleston	State IL	Zip Code 61920-2905	Transaction ID : B-E-16921	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	475.00
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)	PAGE 68 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Paul Curtis		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 3902 South Duncan		Amount of Each Disbursement this Period 25
City Champaign	State IL	
Zip Code 61822	Category/ Type 010	Transaction ID : B-E-16930
Purpose of Disbursement Contribution Refund: refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. L. Daniels		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 105 S York Street Suite 500		Amount of Each Disbursement this Period 250
City Elmhurst	State IL	
Zip Code 60126-3454	Category/ Type 010	Transaction ID : B-E-16864
Purpose of Disbursement Contribution Refund: refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Lloyd and Carol Davis		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 410 W Evergreen Court		Amount of Each Disbursement this Period 200
City Urbana	State IL	
Zip Code 61801-5938	Category/ Type 010	Transaction ID : B-E-16922
Purpose of Disbursement Contribution Refund: refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	..... 475.00
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)	PAGE 69 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Rita Deters			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012		
Mailing Address 2309 A Melrose Drive			Amount of Each Disbursement this Period 35		
City Champaign	State IL	Zip Code 61820	Transaction ID : B-E-16875		
Purpose of Disbursement Contribution Refund: refund		010 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Attorney a Warren Dulski			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012		
Mailing Address 4108 N Cicero Avenue			Amount of Each Disbursement this Period 250		
City Chicago	State IL	Zip Code 60641-2065	Transaction ID : B-E-16885		
Purpose of Disbursement Contribution Refund: refund		010 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. Bill Durre			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012		
Mailing Address 24819 N 600 East Road			Amount of Each Disbursement this Period 25		
City Streator	State IL	Zip Code 61364-8869	Transaction ID : B-E-16832		
Purpose of Disbursement Contribution Refund: refund		010 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	310.00
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)	PAGE 70 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Charles Dyer		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 1521 N. Logan Ave.		Amount of Each Disbursement this Period 10
City Danville	State IL		Transaction ID : B-E-16837
Zip Code 61832	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012 ☐ Primary ☒ General ☐ Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) B. David & Laurie Eckerty		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 225 W. Chestnut		Amount of Each Disbursement this Period 25
City Paxton	State IL		Transaction ID : B-E-16840
Zip Code 60957	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012 ☐ Primary ☒ General ☐ Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) C. J. Andrew Edwards		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 990A County Road 1350 East		Amount of Each Disbursement this Period 400
City Tolono	State IL		Transaction ID : B-E-16853
Zip Code 61880	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012 ☐ Primary ☒ General ☐ Other (specify)
State:	District:	

SUBTOTAL of Disbursements This Page (optional) .....	..... 435.00
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)		PAGE 71 OF 103	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Robert & Betty Fackler		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 310 S. Vorcey		Amount of Each Disbursement this Period 25 Transaction ID : B-E-16876
City Tolono State IL Zip Code 61880	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. James Finnegan		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 201 Imperial Drive		Amount of Each Disbursement this Period 200 Transaction ID : B-E-16858
City Bloomington State IL Zip Code 61701-2029	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Gerald R. Forsythe		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 18240 E 2150th Road		Amount of Each Disbursement this Period 2500 Transaction ID : B-E-16850
City Marshall State IL Zip Code 62441-3423	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2725.00
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)	PAGE 72 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Roger and Kim Frick		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 1801 Trails Drive		Amount of Each Disbursement this Period 25 Transaction ID : B-E-16935
City Urbana	State IL	
Zip Code 61802-7081	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Marjorie Frye		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address PO Box 104		Amount of Each Disbursement this Period 25 Transaction ID : B-E-16924
City Donovan	State IL	
Zip Code 60931	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Jean Gates		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 2317 Brookshire E		Amount of Each Disbursement this Period 25 Transaction ID : B-E-16912
City Champaign	State IL	
Zip Code 61821	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	75.00
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)		PAGE 73 OF 103	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Robert and Barbara Gilhaus		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 2 Oliver Court		Amount of Each Disbursement this Period 10 Transaction ID : B-E-16878
City Downs State IL Zip Code 61736-7595	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Thomas Gooding		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 220 Patterson Drive		Amount of Each Disbursement this Period 100 Transaction ID : B-E-16883
City Hillsboro State IL Zip Code 62049-2016	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Duane and Margaret Goodwin		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 1374 County Road 2125 E		Amount of Each Disbursement this Period 25 Transaction ID : B-E-16846
City Saint Joseph State IL Zip Code 61873-9719	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	135.00
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)	PAGE 74 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Douglas Goodwine		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 1110 W Clark Street		Amount of Each Disbursement this Period 25 Transaction ID : B-E-16901
City Champaign	State IL	
Zip Code 61821-3240	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Stephen Gordon		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 3051B County Road 1300E		Amount of Each Disbursement this Period 125 Transaction ID : B-E-16942
City Rantoul	State IL	
Zip Code 61866	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. John Hamilton		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 18262 N. 1750 East Rd.		Amount of Each Disbursement this Period 50 Transaction ID : B-E-16916
City Pontiac	State IL	
Zip Code 61764	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	200.00
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)	PAGE 75 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Gordon Hannagan		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 2451 County Road 2800 N		Amount of Each Disbursement this Period 50 Transaction ID : B-E-16852
City Penfield	State IL	
Zip Code 61862-9731	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. M.A. Hardy-McCormick		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 7600 W College Drive		Amount of Each Disbursement this Period 25 Transaction ID : B-E-16923
City Palos Heights	State IL	
Zip Code 60463-1001	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Laura Hartman		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 700 W Grand Ave		Amount of Each Disbursement this Period 500 Transaction ID : B-E-16865
City Saint Joseph	State IL	
Zip Code 61873	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	575.00
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)	PAGE 76 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Lola Hayes		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 3874 N 925th St		Amount of Each Disbursement this Period 50 Transaction ID : B-E-16868
City Paris State IL Zip Code 61944	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Morris Hecker		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 1108 Country Ln.		Amount of Each Disbursement this Period 100 Transaction ID : B-E-16926
City Champaign State IL Zip Code 61821	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Charles & Melanie Hepler		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 1617 Maynard		Amount of Each Disbursement this Period 50 Transaction ID : B-E-16896
City Champaign State IL Zip Code 61822-5271	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	200.00
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)	PAGE 77 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Fred & Jane Hocking			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012	
Mailing Address 7190 E 650 Road			Amount of Each Disbursement this Period 50	
City Mount Carmel	State IL	Zip Code 62863-4898	Transaction ID : B-E-16904	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Anita Hodge			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012	
Mailing Address 1828 County Road 50 East			Amount of Each Disbursement this Period 25	
City Seymour	State IL	Zip Code 61875	Transaction ID : B-E-16894	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Donald Hutchens			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012	
Mailing Address 13250 N. 1100th St.			Amount of Each Disbursement this Period 25	
City Martinsville	State IL	Zip Code 62442	Transaction ID : B-E-16844	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional) .....	..... 100.00
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)	PAGE 78 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Russell & Anne Jackson			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012	
Mailing Address 109 E. Parkview			Amount of Each Disbursement this Period 35	
City Forrest	State IL	Zip Code 61741	Transaction ID : B-E-16938	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. Jean Jones			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012	
Mailing Address 930 E. Washington St.			Amount of Each Disbursement this Period 25	
City Pontiac	State IL	Zip Code 61764	Transaction ID : B-E-16860	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) c. Robert Jones			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012	
Mailing Address 1205 E. Main			Amount of Each Disbursement this Period 125	
City Danville	State IL	Zip Code 61832	Transaction ID : B-E-16879	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	..... 185.00
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)	PAGE 79 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Charles W. Jordan		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 321 W South Street		Amount of Each Disbursement this Period 25
City Grayville	State IL	
Zip Code 62844-1534	Purpose of Disbursement Contribution Refund: refund	Transaction ID : B-E-16838
Candidate Name	Category/ Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Richard Kaelin		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 2308 Verona Court		Amount of Each Disbursement this Period 50
City Champaign	State IL	
Zip Code 61821	Purpose of Disbursement Contribution Refund: refund	Transaction ID : B-E-16932
Candidate Name	Category/ Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Lawrence Kanfer		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 3201 Cypress Creek Road		Amount of Each Disbursement this Period 50
City Champaign	State IL	
Zip Code 61822-7595	Purpose of Disbursement Contribution Refund: refund	Transaction ID : B-E-16866
Candidate Name	Category/ Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	..... 125.00
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)		PAGE 80 OF 103	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Joseph Karinattu		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 52 Maywood		Amount of Each Disbursement this Period 100 Transaction ID : B-E-16919
City Danville	State IL	
Zip Code 61832	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Fred & Inga Koester		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 8 6th Drive		Amount of Each Disbursement this Period 25 Transaction ID : B-E-16848
City Decatur	State IL	
Zip Code 62521	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Donald Kruse		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 612 Ventura Road		Amount of Each Disbursement this Period 10 Transaction ID : B-E-16845
City Champaign	State IL	
Zip Code 61820-7036	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	135.00
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)	PAGE 81 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. J.W. Lane		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address PO Box 78		Amount of Each Disbursement this Period 100 Transaction ID : B-E-16854
City Chenoa	State IL	
Zip Code 61726	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Carl Larson		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 411 E Mumford Drive		Amount of Each Disbursement this Period 100 Transaction ID : B-E-16834
City Urbana	State IL	
Zip Code 61801-6230	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Ronald Lenington		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address PO Box 104		Amount of Each Disbursement this Period 10 Transaction ID : B-E-16880
City Buckley	State IL	
Zip Code 60918-0104	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	210.00
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)	PAGE 82 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Mary Ann Luedtke		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 2206 Combes St		Amount of Each Disbursement this Period 34 Transaction ID : B-E-16871
City Urbana	State IL Zip Code 61801	
Purpose of Disbursement Contribution Refund: refund	Category/Type 010	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Donald & Michelle Lukach		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 64 Holliday Drive		Amount of Each Disbursement this Period 30 Transaction ID : B-E-16843
City Clinton	State IL Zip Code 61727	
Purpose of Disbursement Contribution Refund: refund	Category/Type 010	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Richard & Sharon Masel		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 2603 Lakeview Drive		Amount of Each Disbursement this Period 200 Transaction ID : B-E-16873
City Champaign	State IL Zip Code 61822	
Purpose of Disbursement Contribution Refund: refund	Category/Type 010	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	264.00
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)	PAGE 83 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. John and Barbara McKim			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address PO Box 308			Amount of Each Disbursement this Period 100 Transaction ID : B-E-16915
City Lawrenceville	State IL	Zip Code 62439-0308	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Louis Mervis			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 2001 N. Logan			Amount of Each Disbursement this Period 1000 Transaction ID : B-E-16869
City Danville	State IL	Zip Code 61832	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Steven Miller			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 2708 E Perkins Road			Amount of Each Disbursement this Period 100 Transaction ID : B-E-16882
City Urbana	State IL	Zip Code 61802-7736	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1200.00
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)	PAGE 84 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Lloyd Murphy		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 715 Lakeshore Drive		Amount of Each Disbursement this Period \$ 50 Transaction ID : B-E-16867
City Tuscola	State IL	
Zip Code 61953	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Stephen Myers		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 202 W Adams Street		Amount of Each Disbursement this Period \$ 150 Transaction ID : B-E-16943
City Clinton	State IL	
Zip Code 61727-1904	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. John Narmont		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 209 N Bruns Lane		Amount of Each Disbursement this Period \$ 100 Transaction ID : B-E-16861
City Springfield	State IL	
Zip Code 62702-4612	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	\$ 300.00
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)	PAGE 85 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Imogene Newlin		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 1132 E. Clinton Ave.		Amount of Each Disbursement this Period 116 Transaction ID : B-E-16908
City Farmer City	State IL Zip Code 61842	
Purpose of Disbursement Contribution Refund: refund	Category/Type 010	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Richard Niemann		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 2408 Old Orchard Road		Amount of Each Disbursement this Period 500 Transaction ID : B-E-16874
City Quincy	State IL Zip Code 62301	
Purpose of Disbursement Contribution Refund: refund	Category/Type 010	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Stanley and Judith O'Connor		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 1151 County Road 1800 E		Amount of Each Disbursement this Period 25 Transaction ID : B-E-16881
City Urbana	State IL Zip Code 61802-9535	
Purpose of Disbursement Contribution Refund: refund	Category/Type 010	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	641.00
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)	PAGE 86 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Marvarine Pirtle			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012	
Mailing Address 602 E Bradley Avenue			Amount of Each Disbursement this Period 50	
City Champaign	State IL	Zip Code 61820-2409	Transaction ID : B-E-16870	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. Richard Porter			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012	
Mailing Address 4504 Crossgate Drive			Amount of Each Disbursement this Period 25	
City Champaign	State IL	Zip Code 61822-9353	Transaction ID : B-E-16933	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) c. Hastings Printing			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012	
Mailing Address 111 West Sale P O Box 122			Amount of Each Disbursement this Period 75	
City Tuscola	State IL	Zip Code 61953	Transaction ID : B-E-16907	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional) .....	..... 150.00
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)	PAGE 87 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Ronald Prochnow			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012		
Mailing Address P.O. Box 566			Amount of Each Disbursement this Period 50		
City Hudson	State IL	Zip Code 61748	Transaction ID : B-E-16936		
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. June K. Quint			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012		
Mailing Address 624 E Sangamon Avenue			Amount of Each Disbursement this Period 35		
City Rantoul	State IL	Zip Code 61866-2518	Transaction ID : B-E-16920		
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Richard Ramsey			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012		
Mailing Address 5455 Ramsey Road			Amount of Each Disbursement this Period 50		
City Rochester	State IL	Zip Code 62563-8320	Transaction ID : B-E-16934		
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	135.00
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)	PAGE 88 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Gene Randall		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 306 S. Neil Street		Amount of Each Disbursement this Period 200 Transaction ID : B-E-16849
City Champaign	State IL	
Zip Code 61821	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. James Rieger		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 36 Pleasantview Drive Box 82		Amount of Each Disbursement this Period 50 Transaction ID : B-E-16859
City Forrest	State IL	
Zip Code 61741	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. Kenneth and Yvonne Rohr		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address PO Box 282		Amount of Each Disbursement this Period 100 Transaction ID : B-E-16863
City Chebanse	State IL	
Zip Code 60922-0282	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	350.00
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)	PAGE 89 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Melvin Schriefer		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 203 W. Railroad Ave.		Amount of Each Disbursement this Period 250 Transaction ID : B-E-16925
City Alvin	State IL	
Zip Code 61811	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Paul Schroeder		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 915 Bonnie Brae		Amount of Each Disbursement this Period 100 Transaction ID : B-E-16872
City River Forest	State IL	
Zip Code 60305	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Harold Sherline		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 1411 Stinson Avenue		Amount of Each Disbursement this Period 25 Transaction ID : B-E-16906
City Mattoon	State IL	
Zip Code 61938-5939	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	375.00
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)	PAGE 90 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Thomas Shipman			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 2417 Barbour Road			Amount of Each Disbursement this Period 500 Transaction ID : B-E-16884
City Falls Church	State VA	Zip Code 22043-3026	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Ruth Shonk			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 20266 N. 525th St.			Amount of Each Disbursement this Period 25 Transaction ID : B-E-16939
City Annapolis	State IL	Zip Code 62413	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. D.S. Shwayder			Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 1802 S Race			Amount of Each Disbursement this Period 25 Transaction ID : B-E-16898
City Urbana	State IL	Zip Code 61801	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	550.00
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)	PAGE 91 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Sylvia Smith		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 2805 E. Main St.		Amount of Each Disbursement this Period 25 Transaction ID : B-E-16945
City Urbana State IL Zip Code 61802	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Stan & Melissa Stark		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 11 Payne Drive		Amount of Each Disbursement this Period 75 Transaction ID : B-E-16941
City Paris State IL Zip Code 61944	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. James E. Stephens		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 750 W Marion Avenue		Amount of Each Disbursement this Period 35 Transaction ID : B-E-16910
City Forsyth State IL Zip Code 62535-1097	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	..... 135.00
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)	PAGE 92 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. John Stokes		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 500 W Walnut Street		Amount of Each Disbursement this Period 125 Transaction ID : B-E-16918
City Tolono State IL Zip Code 61880-9009	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Abram Turner		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 107 N. Beard		Amount of Each Disbursement this Period 50 Transaction ID : B-E-16891
City Danville State IL Zip Code 61832-6009	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Bradford Wheeler		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 227 E. Woodlawn Avenue		Amount of Each Disbursement this Period 20 Transaction ID : B-E-16833
City Danville State IL Zip Code 61832	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	195.00
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)	PAGE 93 OF 103			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. John Widick		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>04</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		04		2012
M M	/	D D	/	Y Y Y Y								
06		04		2012								
Mailing Address 1703A Coventry		Amount of Each Disbursement this Period <table border="1"> <tr> <td>50</td> </tr> </table>	50									
50												
City Champaign State IL Zip Code 61822	Purpose of Disbursement Contribution Refund: refund Category/Type <table border="1"> <tr> <td>010</td> </tr> </table>	010										
010												
Candidate Name	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:		Transaction ID : B-E-16862										

Full Name (Last, First, Middle Initial) B.		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y								
Mailing Address		Amount of Each Disbursement this Period <table border="1"> <tr> <td></td> </tr> </table>										
City State Zip Code	Purpose of Disbursement Category/Type <table border="1"> <tr> <td></td> </tr> </table>											
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:												

Full Name (Last, First, Middle Initial) C.		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y								
Mailing Address		Amount of Each Disbursement this Period <table border="1"> <tr> <td></td> </tr> </table>										
City State Zip Code	Purpose of Disbursement Category/Type <table border="1"> <tr> <td></td> </tr> </table>											
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	13571.12

**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 94 OF 103	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. For Americas Republican Majority		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address 675 N Washington Street Suite 410		Amount of Each Disbursement this Period 1000
City Alexandria State VA Zip Code 22314-1939	Purpose of Disbursement Contribution Refund: refund	010 Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-E-16592
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. TTX Company Employees PAC		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 101 N Wacker Drive		Amount of Each Disbursement this Period 1000
City Chicago State IL Zip Code 60606-1784	Purpose of Disbursement Contribution Refund: refund	010 Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-E-16613
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. McCaul for Congress, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address 815 Brazos Street Suite A PMB 230		Amount of Each Disbursement this Period 1000
City Austin State TX Zip Code 78701-2514	Purpose of Disbursement Contribution Refund: refund	010 Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-E-16827
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
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)		PAGE 95 OF 103	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Allstate Insurance Company PAC		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 2775 Sanders Road Suite A5		Amount of Each Disbursement this Period 500 Transaction ID : B-E-16892
City Northbrook State IL Zip Code 60062-6110	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Airlines PAC		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 1101 17th St. NW #600		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-16828
City Washington State DC Zip Code 20036	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. American Bankers Association BANKPAC		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 1120 Connecticut Avenue NW		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-16829
City Washington State DC Zip Code 20036-3902	Purpose of Disbursement Contribution Refund: refund Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2500.00
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)	PAGE 96 OF 103			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input checked="" type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. American Sugar Cane League		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address PO Drawer 938		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-16893
City Thibodaux	State LA		Zip Code 70302
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Bayer Corporation Political Action Committee		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 10 Bayer Rd		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-16830
City Pittsburgh	State PA		Zip Code 15205
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. BIKESPAC		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address PO Box 2359		Amount of Each Disbursement this Period 2000 Transaction ID : B-E-16831
City Boulder	State CO		Zip Code 80306-2359
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)	4000.00
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)		PAGE 97 OF 103	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Dealers Election Action Committee		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 8400 Westpark Drive		Amount of Each Disbursement this Period 5000 Transaction ID : B-E-16842
City Mc Lean	State VA	
Zip Code 22102	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Dupont Good Government Fund		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 1007 Market Street Floor 2		Amount of Each Disbursement this Period 2000 Transaction ID : B-E-16902
City Wilmington	State DE	
Zip Code 19898-0001	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. Engineers Political Education Committee		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 1125 Seventeenth Street Northwest		Amount of Each Disbursement this Period 5000 Transaction ID : B-E-16847
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	12000.00
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)		PAGE 98 OF 103	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. ERIC PAC		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 25 E Main Street Suite 200		Amount of Each Disbursement this Period 5000 Transaction ID : B-E-16903
City Richmond	State VA Zip Code 23219-2109	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Friends of John Boehner		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 7908 Cincinnati Dayton Road Suite I2		Amount of Each Disbursement this Period 2000 Transaction ID : B-E-16905
City West Chester	State OH Zip Code 45069-6629	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Jobs, Economy and Budget Fund		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 5000 Transaction ID : B-E-16913
City Bethesda	State MD Zip Code 20824-0844	
Purpose of Disbursement Contribution Refund: refund		Category/ Type 010
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12000.00
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)		PAGE 99 OF 103	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. John S Fund		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address PO Box 853		Amount of Each Disbursement this Period 5000 Transaction ID : B-E-16917
City Edwardsville	State IL	
Zip Code 62025-0853	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. National Air Traffic Controllers Association PAC		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 1325 Massachusetts Avenue NW		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-16927
City Washington	State DC	
Zip Code 20005-4171	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. National Air Traffic Controllers Association PAC		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 1325 Massachusetts Avenue NW		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-16928
City Washington	State DC	
Zip Code 20005-4171	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	7000.00
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)		PAGE 100 OF 103	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. New Pac		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address PO Box 7480		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-16929
City Visalia	State CA	
Zip Code 93290-7480	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Pork Pac		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address PO Box 10383		Amount of Each Disbursement this Period 2500 Transaction ID : B-E-16931
City Des Moines	State IA	
Zip Code 50306	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. ROSKAM PAC		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 610 S Boulevard		Amount of Each Disbursement this Period 5000 Transaction ID : B-E-16937
City Tampa	State FL	
Zip Code 33606-2693	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	8500.00
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)		PAGE 101 OF 103	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Southern Minnesota Sugar Coop. PAC		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address PO Box 500		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-16940
City Renville State MN Zip Code 56284-0500	Purpose of Disbursement Contribution Refund: refund 010 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Sugar Cane Growers Cooperative of Florida		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address PO Box 666		Amount of Each Disbursement this Period 500 Transaction ID : B-E-16944
City Belle Glade State FL Zip Code 33430-0666	Purpose of Disbursement Contribution Refund: refund 010 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Tuesday Group PAC		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address PO Box 11586		Amount of Each Disbursement this Period 2500 Transaction ID : B-E-16946
City Washington State DC Zip Code 20008-0786	Purpose of Disbursement Contribution Refund: refund 010 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
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)		PAGE 102 OF 103	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Valero PAC		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address PO Box 696000		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-16947
City San Antonio	State TX	
Zip Code 78269-6000	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Wild and Wonderful PAC		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address PO Box 651374		Amount of Each Disbursement this Period 500 Transaction ID : B-E-16886
City Potomac Falls	State VA	
Zip Code 20165-1374	Purpose of Disbursement Contribution Refund: refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	54500.00

**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)		PAGE 103 OF 103	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends Of Tim Johnson

Full Name (Last, First, Middle Initial) A. Midwest Region Laborers' Political Leagu		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 117 South 5th Street Suite 720		Amount of Each Disbursement this Period 5000 Transaction ID : B-E-16766
City Springfield State IL Zip Code 62701	Purpose of Disbursement Charitable Donation: contribution 012 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00