

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 17097  
 Check if different than previously reported. (ACC) Urbana IL 61803

2. **FEC IDENTIFICATION NUMBER** C00350421  
**IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)  
**CITY** STATE ZIP CODE STATE DISTRICT  
IL 15

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [ ] [ ] [ ] in the State of [ ]  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 04 01 2009 through 06 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Brian Kelly  
Signature of Treasurer Electronically Filed by Brian Kelly Date 09 23 2009

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

**SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Friends of Tim Johnson

Report Covering the Period:

From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	57098.00	98171.54
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	57098.00	98171.54
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	43523.28	84237.23
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	43523.28	84237.23
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>130354.95</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>4951.41</b>	

**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
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

<b>I. RECEIPTS</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	11140.00	14790.00
(i) Itemized (use Schedule A).....	22958.00	24881.54
(ii) Unitemized.....	34098.00	39671.54
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	23000.00	58500.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	57098.00	98171.54
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	0.00
<b>13. LOANS</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	4.25
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	57098.00	98175.79

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	43523.28	84237.23
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	230.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	43523.28	84467.23

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	116780.23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	57098.00
25. SUBTOTAL (add Line 23 and Line 24).....	173878.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	43523.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	130354.95

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 36  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

**A.** Full Name (Last, First, Middle Initial)  
AFSCME  
Mailing Address 1625 L Street N.W.  
City Washington State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C** C00011114  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt MM / DD / YYYY  
06 / 29 / 2009  
**Transaction ID:** 90715.C8666  
Amount of Each Receipt this Period 1000.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
American Association for Justice PAC  
Mailing Address 1050 31st Street, NW  
City Washington State DC Zip Code 20007  
FEC ID number of contributing federal political committee. **C** C00024521  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00  
Date of Receipt MM / DD / YYYY  
06 / 30 / 2009  
**Transaction ID:** 90715.C8698  
Amount of Each Receipt this Period 1000.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
American Council of Engineering Co. PAC  
Mailing Address 1015 15th Street, NW  
City Washington State DC Zip Code 20005-2605  
FEC ID number of contributing federal political committee. **C** C00010868  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt MM / DD / YYYY  
06 / 30 / 2009  
**Transaction ID:** 90715.C8699  
Amount of Each Receipt this Period 1000.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 3000.00  
**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 36  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

<p><b>A.</b> Full Name (Last, First, Middle Initial) American Crystal Sugar Company PAC</p> <p>Mailing Address 101 North Third Street</p> <p>City State Zip Code Moorhead MN 56560</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C C00110338</span></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">5000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">06 / 19 / 2009</span></p> <p><b>Transaction ID:</b> 90715.C8633</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">5000.00</span></p> <p>Receipt</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) AOPA PAC</p> <p>Mailing Address 421 Aviation Way</p> <p>City State Zip Code Frederick MD 21701</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C C00131185</span></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">05 / 20 / 2009</span></p> <p><b>Transaction ID:</b> 90715.C8623</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p>Receipt</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) AOPA PAC</p> <p>Mailing Address 421 Aviation Way</p> <p>City State Zip Code Frederick MD 21701</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C C00131185</span></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">2000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">05 / 20 / 2009</span></p> <p><b>Transaction ID:</b> 90715.C8624</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p>Receipt</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">7000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 36  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

**A.** Full Name (Last, First, Middle Initial)  
AT&T PAC

Mailing Address 175 E Houston, Rm 7-A-50

City San Antonio State TX Zip Code 78205

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY  
06 / 19 / 2009

**Transaction ID:** 90715.C8636

Amount of Each Receipt this Period 1000.00

Receipt

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

Mailing Address 1201 15th Street N.W.

City Washington State DC Zip Code 20005-2800

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
06 / 30 / 2009

**Transaction ID:** 90715.C8700

Amount of Each Receipt this Period 1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Chicago Mercantile Exchange PAC

Mailing Address 30 S. Wacker Drive

City Chicago State IL Zip Code 60606

FEC ID number of contributing federal political committee. **C** C00076299

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt MM / DD / YYYY  
06 / 19 / 2009

**Transaction ID:** 90715.C8634

Amount of Each Receipt this Period 1500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 3500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 36  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

**A.** Full Name (Last, First, Middle Initial)  
Exelon PAC

Mailing Address PO Box 805379

City State Zip Code  
Chicago IL 60680-5379

FEC ID number of contributing federal political committee. C C00141218

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY  
06 / 19 / 2009

**Transaction ID:** 90715.C8632

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Great Lakes Sugarbeet Growers PAC

Mailing Address 2600 South Euclid Ave.

City State Zip Code  
Bay City MI 48706

FEC ID number of contributing federal political committee. C C00384354

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
06 / 19 / 2009

**Transaction ID:** 90715.C8635

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Trinity Industries Employee PAC

Mailing Address 2525 Stemmons Fwy.

City State Zip Code  
Dallas TX 75207

FEC ID number of contributing federal political committee. C C00268904

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
05 / 20 / 2009

**Transaction ID:** 90715.C8626

Amount of Each Receipt this Period  
1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 3000.00

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



**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 9 / 36
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

<b>A.</b>	Full Name (Last, First, Middle Initial) Tuesday Group PAC		Date of Receipt
	Mailing Address P O Box 40385		<input type="text" value="05"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20016
	FEC ID number of contributing federal political committee.		Transaction ID: 90715.C8627
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010		Election Cycle-to-Date ▼	<input type="text" value="2000.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			Receipt
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="2000.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Tuesday Group PAC		Date of Receipt
	Mailing Address P O Box 40385		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20016
	FEC ID number of contributing federal political committee.		Transaction ID: 90715.C8668
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010		Election Cycle-to-Date ▼	<input type="text" value="2000.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			Receipt
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="4000.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Union Pacific Fund PAC		Date of Receipt
	Mailing Address 600 13th St., NW Suite 340		<input type="text" value="05"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20005
	FEC ID number of contributing federal political committee.		Transaction ID: 90715.C8625
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010		Election Cycle-to-Date ▼	<input type="text" value="1000.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			Receipt
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="1000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 10 / 36  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

A.

Full Name (Last, First, Middle Initial)  
United Pilots PAC

Mailing Address 9550 W. Higgins Road

City State Zip Code  
Des Plaines IL 60018

FEC ID number of contributing federal political committee. **C** C00251009

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 0 / 2 0 0 9

Transaction ID: 90715.C8628

Amount of Each Receipt this Period  
1500.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	23000.00

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 36  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

**A.** Full Name (Last, First, Middle Initial)  
John Albin

Mailing Address PO Box 377

City Newman State IL Zip Code 61942

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

Name of Employer Longview Cap Corp Occupation Farmer

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 19 / 2009  
**Transaction ID:** 90715.C8647  
 Amount of Each Receipt this Period 500.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Helen Ayers

Mailing Address 724 E. 1000 North Road

City Bement State IL Zip Code 61813-3715

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

Name of Employer Requested Info Occupation Requested Info

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt 06 / 29 / 2009  
**Transaction ID:** 90717.C8946  
 Amount of Each Receipt this Period 200.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Paul & Donna Beck

Mailing Address 1807 Cobblefield Court

City Champaign State IL Zip Code 61822

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2009  
**Transaction ID:** 90717.C9094  
 Amount of Each Receipt this Period 300.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

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

**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 12 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

<b>A.</b>	Full Name (Last, First, Middle Initial) Byron & Shirley Boddy		Date of Receipt MM / DD / YYYY 06 / 29 / 2009
	Mailing Address RR 2 Box 167		Transaction ID: 90717.C8719
	City Lovington	State IL	Zip Code 61937
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Self-Employed	Occupation Homemaker	Receipt

Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00
---	------------------------------------

<b>B.</b>	Full Name (Last, First, Middle Initial) Paul Bretz		Date of Receipt MM / DD / YYYY 06 / 29 / 2009
	Mailing Address 1675 E County Rd 1150 N		Transaction ID: 90717.C8917
	City Villa Grove	State IL	Zip Code 61956
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer retired	Occupation Retired	Receipt

Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00
---	------------------------------------

<b>C.</b>	Full Name (Last, First, Middle Initial) Marsha Combs-Skinner		Date of Receipt MM / DD / YYYY 06 / 29 / 2009
	Mailing Address 2275 E. County Road 800 North		Transaction ID: 90717.C9013
	City Newman	State IL	Zip Code 61942
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Law Office of Marsha Combs	Occupation Attorney	Receipt

Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00
---	------------------------------------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 36

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

**A.**

Full Name (Last, First, Middle Initial)  
John Corley

Mailing Address 1727 N State  
PO Box 253

City State Zip Code  
Monticello IL 61856

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

Name of Employer Requested Info

Occupation Requested Info

Receipt For: 2010  
 Primary  
  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 29 / 2009

Transaction ID: 90717.C9015

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Charles & Ruth Craddock

Mailing Address 2801 Willow Bend Road

City State Zip Code  
Champaign IL 61822

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

Name of Employer Information Requested

Occupation Information Requested

Receipt For: 2010  
 Primary  
  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 29 / 2009

Transaction ID: 90717.C9162

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Richard Davidson

Mailing Address 825 N. County Road 1275E

City State Zip Code  
Tuscola IL 61953

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

Name of Employer Self

Occupation Dentist

Receipt For: 2010  
 Primary  
  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 19 / 2009

Transaction ID: 90715.C8645

Amount of Each Receipt this Period

250.00

Receipt

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

650.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 36
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

<b>A.</b>	Full Name (Last, First, Middle Initial) Jack DeAtley		Date of Receipt
	Mailing Address 1003 Harrington		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Champaign	IL	61821
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Information Requested		Occupation Information Requested	Transaction ID: 90717.C9190
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text" value="250.00"/>	Amount of Each Receipt this Period
			<input type="text" value="250.00"/>
			Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) Jerry Devonshire		Date of Receipt
	Mailing Address 1104 Park Forest		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Robinson	IL	62454
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Information Requested		Occupation Information Requested	Transaction ID: 90717.C8861
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text" value="200.00"/>	Amount of Each Receipt this Period
			<input type="text" value="100.00"/>
			Receipt

<b>C.</b>	Full Name (Last, First, Middle Initial) John William Gall		Date of Receipt
	Mailing Address 25971 N. 2000 East Road		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Odell	IL	60460
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Information Requested		Occupation Information Requested	Transaction ID: 90717.C9125
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text" value="200.00"/>	Amount of Each Receipt this Period
			<input type="text" value="200.00"/>
			Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="550.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 36
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

<b>A.</b>	Full Name (Last, First, Middle Initial) Julia Greene		Date of Receipt MM / DD / YYYY 06 / 29 / 2009
	Mailing Address 420 S. Charter		<b>Transaction ID:</b> 90717.C8958
	City Monticello	State IL	Zip Code 61856
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Requested Info Occupation Requested Info		Receipt
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Craig Hays		Date of Receipt MM / DD / YYYY 06 / 29 / 2009
	Mailing Address 28 Greencroft Drive		<b>Transaction ID:</b> 90717.C8712
	City Champaign	State IL	Zip Code 61821
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer Requested Info Occupation Requested Info		Receipt
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 200.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mark & Jana Hines		Date of Receipt MM / DD / YYYY 06 / 29 / 2009
	Mailing Address 23236 E 100 N Road		<b>Transaction ID:</b> 90715.C8680
	City Downs	State IL	Zip Code 61736-9375
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer Requested Info Occupation Requested Info		Receipt
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 36  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

**A.** Full Name (Last, First, Middle Initial)  
Chris Hinesly

Mailing Address 2916 Robeson Park Drive

City State Zip Code  
Champaign IL 61822

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

Name of Employer State of Illinois Occupation State Bank Examiner

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	9	/	2	0	0	9

**Transaction ID:** 90715.C8671

Amount of Each Receipt this Period  
200.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Dona Howe Amdor

Mailing Address 951 E 3300 N Road

City State Zip Code  
Farmer City IL 61842

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

Name of Employer Requested Info Occupation Requested Info

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	9	/	2	0	0	9

**Transaction ID:** 90717.C9031

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
James Karr

Mailing Address 226 County Road 1600 N

City State Zip Code  
Seymour IL 61875

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	9	/	2	0	0	9

**Transaction ID:** 90717.C9083

Amount of Each Receipt this Period  
200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 36  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

**A.** Full Name (Last, First, Middle Initial)  
Patrick Kelleher

Mailing Address 130 Bannon Drive

City State Zip Code  
Dwight IL 60420

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

Name of Employer Requested Info Occupation Requested Info

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 0 9

**Transaction ID:** 90715.C8667

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Russel Kinzinger

Mailing Address 311 Goldenrod

City State Zip Code  
Bloomington IL 61704

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

Name of Employer Home Sweet Home Occupation CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 9 / 2 0 0 9

**Transaction ID:** 90715.C8631

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Norman Kocher

Mailing Address RR2 Box 95

City State Zip Code  
Lawrenceville IL 62439

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

Name of Employer Requested Info Occupation Requested Info

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 0 9

**Transaction ID:** 90717.C8800

Amount of Each Receipt this Period  
1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 36  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

**A.**

Full Name (Last, First, Middle Initial)  
Dave Kuhl

Mailing Address 101 Greencroft Drive

City State Zip Code  
Champaign IL 61821

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

Name of Employer Occupation  
Busey Bank Banker

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 9

**Transaction ID:** 90717.C8789

Amount of Each Receipt this Period  
500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Rick & Pam Lovett

Mailing Address 403 East South Mahomet Road

City State Zip Code  
Mahomet IL 61853

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

Name of Employer Occupation  
Silver Machine Shop Welder

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 9

**Transaction ID:** 90717.C9066

Amount of Each Receipt this Period  
200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Jane Martin

Mailing Address 2205 Valleybrook

City State Zip Code  
Champaign IL 61821

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 9

**Transaction ID:** 90717.C9070

Amount of Each Receipt this Period  
200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 36  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

**A.** Full Name (Last, First, Middle Initial)  
Kay McCulloch

Mailing Address 18617 E 1500th Rd

City Paris State IL Zip Code 61944

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

Name of Employer Self Occupation Farmer

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 06 / 29 / 2009  
**Transaction ID:** 90715.C8678  
 Amount of Each Receipt this Period: 250.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Charles McGrew

Mailing Address 457 E. Jefferson Street

City Arcola State IL Zip Code 61910

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

Name of Employer Douglas County Occupation Sheriff

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 06 / 19 / 2009  
**Transaction ID:** 90715.C8648  
 Amount of Each Receipt this Period: 250.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Louis Mervis

Mailing Address 2001 N. Logan

City Danville State IL Zip Code 61832

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

Name of Employer retired Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 06 / 29 / 2009  
**Transaction ID:** 90717.C8798  
 Amount of Each Receipt this Period: 1000.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 36  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

**A.** Full Name (Last, First, Middle Initial)  
Richard Niemann  
Mailing Address 2408 Old Orchard Road  
City Quincy State IL Zip Code 62301  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Niemann Foods Occupation Chairman  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 250.00  
Date of Receipt 06 / 19 / 2009  
Transaction ID: 90715.C8656  
Amount of Each Receipt this Period 250.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
China Ibsen Oughton  
Mailing Address 404 Old Morris Road  
City Dwight State IL Zip Code 60420-1084  
FEC ID number of contributing federal political committee. **C**  
Name of Employer retired Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 500.00  
Date of Receipt 06 / 29 / 2009  
Transaction ID: 90715.C8672  
Amount of Each Receipt this Period 500.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Wilbur Pflum  
Mailing Address 117 Eldorado Drive  
City Tuscola State IL Zip Code 61953-2110  
FEC ID number of contributing federal political committee. **C**  
Name of Employer retired Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 240.00  
Date of Receipt 06 / 19 / 2009  
Transaction ID: 90715.C8657  
Amount of Each Receipt this Period 40.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 790.00  
**TOTAL** This Period (last page this line number only) ..... ►

**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 21 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard Sheets	Date of Receipt MM / DD / YYYY 06 / 30 / 2009
	Mailing Address 802 County Road 3150 North	<b>Transaction ID:</b> 90715.C8705
	City State Zip Code Dewey IL 61840-9758	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Self Occupation Management Consultant Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Larry Skinner	Date of Receipt MM / DD / YYYY 06 / 29 / 2009
	Mailing Address 2275 E County Road 800 N	<b>Transaction ID:</b> 90717.C9012
	City State Zip Code Newman IL 61942	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer self employed Occupation Farmer Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Joe & Jane Smith	Date of Receipt MM / DD / YYYY 06 / 29 / 2009
	Mailing Address 408 Pond Ridge Lane	<b>Transaction ID:</b> 90715.C8695
	City State Zip Code Urbana IL 61802	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Requested Info Occupation Requested Info Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 36  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

**A.** Full Name (Last, First, Middle Initial)  
Ron Steidinger

Mailing Address 122 Walnut

City Forrest State IL Zip Code 61741

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

Name of Employer Forrest Redi-Mix, Inc. Occupation Owner

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt 06 / 29 / 2009  
**Transaction ID:** 90717.C9161  
 Amount of Each Receipt this Period 200.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Don Yost

Mailing Address 1068 Woodbury Lane

City Charleston State IL Zip Code 61920-3886

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

Name of Employer Self-employed Occupation Entrepreneur

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 29 / 2009  
**Transaction ID:** 90717.C8803  
 Amount of Each Receipt this Period 250.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
David & Michelle Zook

Mailing Address 3607 N. Albemarle St.

City Arlington State VA Zip Code 22207

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

Name of Employer Requested Info Occupation Requested Info

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 19 / 2009  
**Transaction ID:** 90715.C8662  
 Amount of Each Receipt this Period 250.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 700.00

**TOTAL** This Period (last page this line number only) ..... ► 11140.00

# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

<b>A.</b>	Full Name (Last, First, Middle Initial) Champaign County Republican Party <hr/> Mailing Address 106 W Springfield Ave <hr/> City Champaign State IL Zip Code 61820- <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 90715.E3100 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 9	Amount of Each Disbursement this Period 150.00 <hr/> POLITICAL CONTRIBUTION
<b>B.</b>	Full Name (Last, First, Middle Initial) Results Plus Consulting, Inc. <hr/> Mailing Address PO Box 17452 <hr/> City Urbana State IL Zip Code 61803- <hr/> Purpose of Disbursement Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 90715.E3065 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9	Amount of Each Disbursement this Period 2000.00 <hr/> CONSULTING
<b>C.</b>	Full Name (Last, First, Middle Initial) Results Plus Consulting, Inc. <hr/> Mailing Address PO Box 17452 <hr/> City Urbana State IL Zip Code 61803- <hr/> Purpose of Disbursement Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 90715.E3077 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 9	Amount of Each Disbursement this Period 2000.00 <hr/> CONSULTING

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4150.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

A.	Full Name (Last, First, Middle Initial) Results Plus Consulting, Inc.  Mailing Address PO Box 17452  City Urbana State IL Zip Code 61803-  Purpose of Disbursement Consulting Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3094 Date of Disbursement 06 / 01 / 2009  Amount of Each Disbursement this Period 2000.00  CONSULTING	
B.	Full Name (Last, First, Middle Initial) Results Plus Consulting, Inc.  Mailing Address PO Box 17452  City Urbana State IL Zip Code 61803-  Purpose of Disbursement Consulting Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3103 Date of Disbursement 06 / 16 / 2009  Amount of Each Disbursement this Period 3205.59  CONSULTING	
C.	Full Name (Last, First, Middle Initial) Tuscany  Mailing Address 105 E. Southline Road  City Tuscola State IL Zip Code 61953-  Purpose of Disbursement Fundraising Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3090 Date of Disbursement 05 / 28 / 2009  Amount of Each Disbursement this Period 493.83  FUNDRAISING EXPENSE	

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

**5699.42**

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

A.	Full Name (Last, First, Middle Initial) Hunan Dynasty  Mailing Address 215 Pennsylvania Avenue SE  City Washington State DC Zip Code 20003-  Purpose of Disbursement Meeting Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3107 Date of Disbursement 06 / 19 / 2009	Amount of Each Disbursement this Period 362.05  MEETING
B.	Full Name (Last, First, Middle Initial) Adlexx Corporation  Mailing Address PO Box 9594  City Springfield State IL Zip Code 62791-  Purpose of Disbursement Printing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3087 Date of Disbursement 05 / 14 / 2009	Amount of Each Disbursement this Period 434.43  PRINTING
C.	Full Name (Last, First, Middle Initial) Adlexx Corporation  Mailing Address PO Box 9594  City Springfield State IL Zip Code 62791-  Purpose of Disbursement Printing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3110 Date of Disbursement 06 / 19 / 2009	Amount of Each Disbursement this Period 21221.25  PRINTING

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

22017.73

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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

<b>A.</b>	Full Name (Last, First, Middle Initial) AmerenIP  Mailing Address P.O. Box 511  City Decatur State IL Zip Code 62525-  Purpose of Disbursement Utilities Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 90715.E3084 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 9	Amount of Each Disbursement this Period  37.53  UTILITIES
<b>B.</b>	Full Name (Last, First, Middle Initial) AT&T  Mailing Address PO Box 105306  City Atlanta State GA Zip Code 30348-5306  Purpose of Disbursement Phones Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 90715.E3080 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 9	Amount of Each Disbursement this Period  363.01  PHONES
<b>C.</b>	Full Name (Last, First, Middle Initial) AT&T  Mailing Address PO Box 105306  City Atlanta State GA Zip Code 30348-5306  Purpose of Disbursement Phones Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 90715.E3067 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 9	Amount of Each Disbursement this Period  570.48  PHONES

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

971.02

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

A.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: 90715.E3099
	Mailing Address PO Box 105306	Date of Disbursement 06 / 08 / 2009
	City Atlanta State GA Zip Code 30348-5306	Amount of Each Disbursement this Period 613.34
	Purpose of Disbursement Phones Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PHONES

B.	Full Name (Last, First, Middle Initial) Busey Bank	Transaction ID: 90715.E3081
	Mailing Address 201 W. Main	Date of Disbursement 05 / 14 / 2009
	City Urbana State IL Zip Code 61801-	Amount of Each Disbursement this Period 72.97
	Purpose of Disbursement Interest Payment Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		INTEREST PAYMENT

C.	Full Name (Last, First, Middle Initial) Busey Bank	Transaction ID: 90715.E3091
	Mailing Address 201 W. Main	Date of Disbursement 05 / 29 / 2009
	City Urbana State IL Zip Code 61801-	Amount of Each Disbursement this Period 2.01
	Purpose of Disbursement Service fee Candidate Name	009 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SERVICE FEE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>688.32</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Busey Bank</p> <p>Mailing Address 201 W. Main</p> <p>City Urbana State IL Zip Code 61801-</p> <p>Purpose of Disbursement Interest Payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90715.E3109</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="51.68"/></p> <p><b>INTEREST PAYMENT</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Busey Bank</p> <p>Mailing Address 201 W. Main</p> <p>City Urbana State IL Zip Code 61801-</p> <p>Purpose of Disbursement Service fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90715.E3112</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="55.91"/></p> <p><b>SERVICE FEES</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Ross &amp; Susan Merkle</p> <p>Mailing Address 606 S. Staley Road Suite D</p> <p>City Champaign State IL Zip Code 61822-</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90715.E3079</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="90.00"/></p> <p><b>RENT</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="197.59"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

<b>A.</b>	Full Name (Last, First, Middle Initial) Ross & Susan Merkle <hr/> Mailing Address 606 S. Staley Road Suite D <hr/> City Champaign State IL Zip Code 61822- <hr/> Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3095 Date of Disbursement 06 / 03 / 2009	Amount of Each Disbursement this Period 90.00 RENT
<b>B.</b>	Full Name (Last, First, Middle Initial) Michaels Catering <hr/> Mailing Address 720 S. Neil Street <hr/> City Champaign State IL Zip Code 61820- <hr/> Purpose of Disbursement Catering Costs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3106 Date of Disbursement 06 / 19 / 2009	Amount of Each Disbursement this Period 1252.99 CATERING COSTS
<b>C.</b>	Full Name (Last, First, Middle Initial) The Catalyst Group <hr/> Mailing Address 1115 Massachusetts Avenue, NW <hr/> City Washington State DC Zip Code 20005- <hr/> Purpose of Disbursement Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3069 Date of Disbursement 04 / 06 / 2009	Amount of Each Disbursement this Period 2575.24 CONSULTING

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

3918.23

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) The Catalyst Group</p> <p>Mailing Address 1115 Massachusetts Avenue, NW</p> <p>City Washington State DC Zip Code 20005-</p> <p>Purpose of Disbursement Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90715.E3086</p> <p>Date of Disbursement 05 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>001 Category/ Type</p> <p>CONSULTING</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) The Catalyst Group</p> <p>Mailing Address 1115 Massachusetts Avenue, NW</p> <p>City Washington State DC Zip Code 20005-</p> <p>Purpose of Disbursement Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90715.E3105</p> <p>Date of Disbursement 06 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 2456.89</p> <p>001 Category/ Type</p> <p>CONSULTING</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Town and Country Advertising</p> <p>Mailing Address PO Box 5104</p> <p>City Scottsdale State AZ Zip Code 85261-</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90715.E3085</p> <p>Date of Disbursement 05 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 68.00</p> <p>004 Category/ Type</p> <p>ADVERTISING</p>

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

4524.89

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

<b>A.</b>	Full Name (Last, First, Middle Initial) U.S. Postmaster  Mailing Address 2001 N. Mattis  City Champaign State IL Zip Code 61821-  Purpose of Disbursement Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3066 Date of Disbursement MM / DD / YYYY 04 / 02 / 2009  Amount of Each Disbursement this Period 168.00  POSTAGE
<b>B.</b>	Full Name (Last, First, Middle Initial) U.S. Postmaster  Mailing Address 2001 N. Mattis  City Champaign State IL Zip Code 61821-  Purpose of Disbursement Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3097 Date of Disbursement MM / DD / YYYY 06 / 05 / 2009  Amount of Each Disbursement this Period 44.00  POSTAGE
<b>C.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless  Mailing Address PO Box 6170  City Carol Stream State IL Zip Code 60197-  Purpose of Disbursement Phones Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3074 Date of Disbursement MM / DD / YYYY 04 / 17 / 2009  Amount of Each Disbursement this Period 150.00  PHONES

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

**362.00**

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

<b>A.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 6170 City Carol Stream State IL Zip Code 60197- Purpose of Disbursement Phones Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3082 Date of Disbursement 05 / 14 / 2009 Amount of Each Disbursement this Period 49.68 PHONES	001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 6170 City Carol Stream State IL Zip Code 60197- Purpose of Disbursement Phones Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3092 Date of Disbursement 05 / 18 / 2009 Amount of Each Disbursement this Period 150.00 PHONES	001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 6170 City Carol Stream State IL Zip Code 60197- Purpose of Disbursement Phones Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E3089 Date of Disbursement 05 / 30 / 2009 Amount of Each Disbursement this Period 52.95 PHONES	001 Category/ Type

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

**252.63**

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

A.	Full Name (Last, First, Middle Initial) Buffalo Wild Wings		Transaction ID: 90715.E3104	
	Mailing Address 1335 Savoy Plaza Drive		Date of Disbursement 06 / 19 / 2009	
	City Savoy	State IL	Zip Code 61874-	Amount of Each Disbursement this Period 59.00
	Purpose of Disbursement Meeting		007	MEETING
	Candidate Name		Category/ Type	
	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) ..... ►

59.00

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

42840.83

**SCHEDULE C (FEC Form 3)**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 34 / 36
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

**LOANS**

NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

**Transaction ID: LSC7050**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Busey Bank	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary	
Mailing Address 201 W. Main		
City Urbana State IL ZIP Code 61801-		
Original Amount of Loan 100000.00	Cumulative Payment To Date 97569.08	Balance Outstanding at Close of This Period 2430.92

**TERMS**

Date Incurred M M 0 1 D D 2 4 Y Y Y Y 2 0 0 0	Date Due 20080521	Interest Rate 950.00 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial) Timothy V. Johnson	Name of Employer Information Requested
Mailing Address 413 Berringer Circle	Occupation Information Requested
City Urbana State IL ZIP Code 61802-	Amount Guaranteed Outstanding: 2430.92
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional) .....	2430.92
<b>TOTALS</b> This Period (last page in this line only) .....	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

**SCHEDULE C (FEC Form 3)**

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

PAGE 35 / 36

FOR LINE NUMBER: (check only one)  13a  13b

**LOANS**

NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

**Transaction ID: LSC7052**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Busey Bank	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary
Mailing Address 201 W. Main	
City Urbana State IL ZIP Code 61801-	
Original Amount of Loan 40000.00	Cumulative Payment To Date 37529.58
Balance Outstanding at Close of This Period 2470.42	

**TERMS**

Date Incurred MM DD YY 03 03 2000	Date Due 20080521	Interest Rate 950.00 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial) Timothy Johnson	Name of Employer Information Requested
Mailing Address 413 Berringer Circle	Occupation Attorney
City Urbana State IL ZIP Code 61802-	Amount Guaranteed Outstanding: 2470.42
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional) .....	2470.42
<b>TOTALS</b> This Period (last page in this line only) .....	4901.34

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 36 / 36
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 Friends of Tim Johnson

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Busey Bank			Nature of Debt (Purpose): 001 Interest Payment
Mailing Address 201 W. Main			
City Urbana	State IL	ZIP Code 61801-	

Outstanding Balance Beginning This Period		<b>Transaction ID: LS90715.E3081</b>	
174.72			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	124.65	50.07	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	50.07
2) <b>TOTALS</b> This Period (last page this line number only).....	50.07
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	4901.34
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	4951.41