

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Friends Of Tim Johnson

ADDRESS (number and street)

PO Box 17097

Check if different than previously reported. (ACC)

Urbana

IL

61803-7097

2. FEC IDENTIFICATION NUMBER ▼

C C00350421

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

IL

13

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

03

06

2012

in the State of

IL

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

General (30G)

Runoff (30R)

Special (30S)

Election on

03

06

2012

in the State of

IL

5. Covering Period

03

01

2012

through

03

31

2012

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 Randi Parr

Signature of Treasurer Randi Parr

[Electronically Filed]

Date

04

14

2012

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

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))....	102654.61	663374
(b) Total Contribution Refunds (from Line 20(d)) .....	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	102654.61	663374
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	85391.5	380558.21
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	2722.81
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	85391.5	377835.4
8. Cash on Hand at Close of Reporting Period (from Line 27).....	482213.69	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed <b>BY</b> 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 03 / 01 / 2012 To: M M / D D / Y Y Y Y 03 / 31 / 2012

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	14600	72074
(ii) Unitemized.....	13152.12	216772.51
(iii) TOTAL of contributions from individuals ▶	27752.12	288846.51
(b) Political Party Committees.....	10000	15250
(c) Other Political Committees (such as PACs).....	64902.49	359277.49
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	102654.61	663374
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	0
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0	2722.81
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0	5376.67
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	102654.61	671473.48

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	85391.5	380558.21
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 .....	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS .....	0	643.45
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	85391.5	385755.89

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	464950.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	102654.61
25. SUBTOTAL (add Line 23 and Line 24).....	567605.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	85391.5
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	482213.69

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

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

FOR LINE NUMBER: PAGE 5 OF 59  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends Of Tim Johnson**

**A.** Full Name (Last, First, Middle Initial)  
**Shirley Boddy**

Mailing Address RR 2 Box 167

City Lovington State IL Zip Code 61937

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

Name of Employer Self-Employed Occupation Homemaker

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : A-C16164**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Clarence Facer**

Mailing Address 2809 Slayback Road

City Urbana State IL Zip Code 61802

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

Name of Employer Requested Occupation Requested

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : A-C16228**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Gerald R. Forsythe**

Mailing Address 18240 E 2150th Road

City Marshall State IL Zip Code 62441-3423

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **4500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : A-C16162**

Amount of Each Receipt this Period  
**1000**

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

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

**1700.00**

**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 6 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends Of Tim Johnson**

**A.** Full Name (Last, First, Middle Initial)  
**William Graff**

Mailing Address 1172 100th Avenue

City: Middletown State: IL Zip Code: 62666

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

Name of Employer: U.S. Dept. of Agriculture Occupation: State Executive Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **250**

Date of Receipt: **03 / 14 / 2012**

**Transaction ID : A-C16220**

Amount of Each Receipt this Period: **250**

**B.** Full Name (Last, First, Middle Initial)  
**Julia Greene**

Mailing Address 420 S. Charter

City: Monticello State: IL Zip Code: 61856

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

Name of Employer: Requested Info Occupation: Requested Info

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: **03 / 14 / 2012**

**Transaction ID : A-C16227**

Amount of Each Receipt this Period: **250**

**C.** Full Name (Last, First, Middle Initial)  
**Julius Hegeler**

Mailing Address 1716 North Logan Avenue

City: Danville State: IL Zip Code: 61832

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

Name of Employer: information requested Occupation: information requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **400**

Date of Receipt: **03 / 14 / 2012**

**Transaction ID : A-C16225**

Amount of Each Receipt this Period: **200**

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

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

**700.00**

**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 7 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input 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)  
**J. Barry Howell D.D.S, P.C**

Mailing Address 1209 E Colorado Avenue  
Suite 101

City Urbana State IL Zip Code 61801-6393

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

Name of Employer Self Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : A-C16147**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Barbara Johnson**

Mailing Address 318 N. Maple  
PO Box 226

City Elliott State IL Zip Code 60933-0226

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

Name of Employer information requested Occupation information requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : A-C16274**

Amount of Each Receipt this Period  
**125**

**C.** Full Name (Last, First, Middle Initial)  
**John Johnson**

Mailing Address 1707 Bentbrook Drive

City Champaign State IL Zip Code 61822

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

Name of Employer Maplewood Estates Occupation Real Estate Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : A-C16250**

Amount of Each Receipt this Period  
**200**

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

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

**825.00**

**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 8 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends Of Tim Johnson**

**A.** Full Name (Last, First, Middle Initial)  
**Gene P King**

Mailing Address 2206 Briar Hill Drive

City Champaign State IL Zip Code 61822-6143

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

Name of Employer Self Occupation Orthodontist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2012**

**Transaction ID : A-C16234**

Amount of Each Receipt this Period  
**300**

**B.** Full Name (Last, First, Middle Initial)  
**Roy & Deborah Knight**

Mailing Address 22255 N 500 E Road

City Fithian State IL Zip Code 61844

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2012**

**Transaction ID : A-C16231**

Amount of Each Receipt this Period  
**500**

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

Mailing Address RR2 Box 95

City Lawrenceville State IL Zip Code 62439

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

Name of Employer Requested Info Occupation Requested Info

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2012**

**Transaction ID : A-C16168**

Amount of Each Receipt this Period  
**500**

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

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

**1300.00**



**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 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input 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**

Full Name (Last, First, Middle Initial) <b>William Kuhne</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 14 / 2012
Mailing Address 907 S. McKinley		<b>Transaction ID : A-C16165</b>
City Champaign	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750
Name of Employer Petry Kuhne Company	Occupation Owner	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750	

Full Name (Last, First, Middle Initial) <b>Ray Moss</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 14 / 2012
Mailing Address 9578 Violet Valley Road		<b>Transaction ID : A-C16222</b>
City Clinton	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Ray Moss and Associates	Occupation Attorney	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300	

Full Name (Last, First, Middle Initial) <b>Alan and Lynn Ryle</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 14 / 2012
Mailing Address PO Box 6525		<b>Transaction ID : A-C16167</b>
City Champaign	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Alan G. Ryle & Companies	Occupation Owner	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1450.00
<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: (check only one)	PAGE 10 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input 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)  
**Chad and Stacy Shutz**

Mailing Address RR 1 Box 198

City State Zip Code  
White Hall IL 62092-9724

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

Name of Employer Occupation  
Self Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : A-C16154**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Joe and Jane Smith**

Mailing Address 408 Pond Ridge Lane

City State Zip Code  
Urbana IL 61802-7118

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

Name of Employer Occupation  
information requested information requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : A-C16163**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Dale Stoller**

Mailing Address 100 E. Columbia

City State Zip Code  
Fairbury IL 61739

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

Name of Employer Occupation  
information requested information requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : A-C16277**

Amount of Each Receipt this Period  
**100**

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

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

**850.00**

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

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

FOR LINE NUMBER: PAGE 11 OF 59  
(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)  
**Harith & Deborah Tamimie**

Mailing Address 1613 Beckman Ct

City Urbana State IL Zip Code 61802

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2012**

**Transaction ID : A-C16155**

Amount of Each Receipt this Period  
**300**

**B.** Full Name (Last, First, Middle Initial)  
**Jeffrey and Sharon Wampler**

Mailing Address 6 Greencroft

City Champaign State IL Zip Code 61820

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

Name of Employer information requested Occupation informatio requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2012**

**Transaction ID : A-C16166**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Joe Shad White**

Mailing Address PO Box 308

City Mount Carmel State IL Zip Code 62863-0308

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

Name of Employer requested info Occupation requested info

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2012**

**Transaction ID : A-C16263**

Amount of Each Receipt this Period  
**200**

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

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

**1000.00**

**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 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input 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)  
**Bryant Industries Inc.**

Mailing Address 1404 Warrington Avenue

City Danville State IL Zip Code 61832-5325

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2012**

**Transaction ID : A-C16368**

Amount of Each Receipt this Period  
**400**

**B.** Full Name (Last, First, Middle Initial)  
**Paul 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 Occupation  
 information requested information requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2012**

**Transaction ID : A-C16363**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Charles and Dorothy Collins**

Mailing Address 503 McGee Road

City Urbana State IL Zip Code 61802

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

Name of Employer Occupation  
 Collins Oil Co. Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2012**

**Transaction ID : A-C16348**

Amount of Each Receipt this Period  
**200**

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

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

**800.00**

**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 13 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input 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)  
**Attorney a Warren Dulski**

Mailing Address 4108 N Cicero Avenue

City Chicago State IL Zip Code 60641-2065

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2012**

**Transaction ID : A-C16362**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**James Finnegan**

Mailing Address 201 Imperial Drive

City Bloomington State IL Zip Code 61701-2029

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

Name of Employer State Farm Occupation Agent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2012**

**Transaction ID : A-C16369**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Joseph Karinattu**

Mailing Address 52 Maywood

City Danville State IL Zip Code 61832

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

Name of Employer self Occupation physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2012**

**Transaction ID : A-C16453**

Amount of Each Receipt this Period  
**100**

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

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

**550.00**

**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 14 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input 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)  
**James Karr**

Mailing Address 226 County Road 1600 N

City Seymour State IL Zip Code 61875

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

Name of Employer Self Occupation Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2012**

**Transaction ID : A-C16366**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**J.W. Lane**

Mailing Address PO Box 78

City Chenoa State IL Zip Code 61726

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

Name of Employer Midwest Inc. Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2012**

**Transaction ID : A-C16346**

Amount of Each Receipt this Period  
**100**

**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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2012**

**Transaction ID : A-C16345**

Amount of Each Receipt this Period  
**1000**

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

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

**1350.00**

**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 15 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input 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)  
**Steven Miller**

Mailing Address 2708 E Perkins Road

City Urbana State IL Zip Code 61802-7736

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

Name of Employer information requested Occupation information requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2012**

**Transaction ID : A-C16378**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Richard Porter**

Mailing Address 4504 Crossgate Drive

City Champaign State IL Zip Code 61822-9353

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **525**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2012**

**Transaction ID : A-C16349**

Amount of Each Receipt this Period  
**25**

**C.** Full Name (Last, First, Middle Initial)  
**Melvin Schriefer**

Mailing Address 203 W. Railroad Ave.

City Alvin State IL Zip Code 61811

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

Name of Employer retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2012**

**Transaction ID : A-C16356**

Amount of Each Receipt this Period  
**250**

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

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

**375.00**

**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 16 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input 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)  
**Michael Stratton**

Mailing Address 59 Elm Street

City State Zip Code  
New Haven CT 06510-2047

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

Name of Employer Occupation  
stratton faxon trial lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 22 / 2012

**Transaction ID : A-C16437**

Amount of Each Receipt this Period  
500

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

Mailing Address 21 Saint Andrews

City State Zip Code  
Mattoon IL 61938

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

Name of Employer Occupation  
Howell Paving Inc. Road Contractor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2300

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2012

**Transaction ID : A-C16480**

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Jack Chamblin**

Mailing Address 13531 E 600th Ave

City State Zip Code  
Robinson IL 62454

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

Name of Employer Occupation  
Bradford Supply CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2012

**Transaction ID : A-C16481**

Amount of Each Receipt this Period  
500

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

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

1500.00



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

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

FOR LINE NUMBER: PAGE 17 OF 59  
(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)  
**David Combs**

Mailing Address 2014 Prairie View

City Urbana State IL Zip Code 61802

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

Name of Employer information requested Occupation information requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **215**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 25 / 2012**

**Transaction ID : A-C16482**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Gery Conlin**

Mailing Address 320 Crestwood Drive

City Arthur State IL Zip Code 61911

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

Name of Employer Preferred Properties Occupation Agent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 25 / 2012**

**Transaction ID : A-C16483**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Laura Hartman**

Mailing Address 700 W Grand Ave

City Saint Joseph State IL Zip Code 61873

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

Name of Employer Self Occupation Housewife

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 25 / 2012**

**Transaction ID : A-C16484**

Amount of Each Receipt this Period  
**500**

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

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

**950.00**

**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 18 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input 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)  
**L. Daniels**

Mailing Address 105 S York Street  
Suite 500

City Elmhurst State IL Zip Code 60126-3454

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : A-C16428**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**J. Andrew Edwards**

Mailing Address 990A County Road 1350 East

City Tolono State IL Zip Code 61880

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

Name of Employer Greenlawn Farms Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : A-C16429**

Amount of Each Receipt this Period  
**400**

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Gooding**

Mailing Address 220 Patterson Drive

City Hillsboro State IL Zip Code 62049-2016

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

Name of Employer information requested Occupation information requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : A-C16416**

Amount of Each Receipt this Period  
**100**

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

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

**750.00**

**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 19 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input 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)  
**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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 29 / 2012**

**Transaction ID : A-C16412**

Amount of Each Receipt this Period  
**500**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

**500.00**

**14600.00**

**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 20 OF 59
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input 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)  
**The Freedom Project**

Mailing Address 320 1st Street SE

City Washington State DC Zip Code 20003-1838

FEC ID number of contributing federal political committee. **C** C00305805

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012

**Transaction ID : A-C16448**

Amount of Each Receipt this Period  
 5000

**B.** Full Name (Last, First, Middle Initial)  
**The Freedom Project**

Mailing Address 320 1st Street SE

City Washington State DC Zip Code 20003-1838

FEC ID number of contributing federal political committee. **C** C00305805

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012

**Transaction ID : A-C16449**

Amount of Each Receipt this Period  
 5000

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

10000.00

10000.00

**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 OF 59
	<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)**  
**Bill Shuster for Congress**

Mailing Address **PO Box 27**

City **Hollidaysburg** State **PA** Zip Code **16648-0027**

FEC ID number of contributing federal political committee. **C C00364935**

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  
**03 / 14 / 2012**

**Transaction ID : A-C16150**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address **5959 Las Colinas Blvd.**

City **Irving** State **TX** Zip Code **75039-2298**

FEC ID number of contributing federal political committee. **C C00121368**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2012**

**Transaction ID : A-C16152**

Amount of Each Receipt this Period  
**5000**

**C. Full Name (Last, First, Middle Initial)**  
**Florida Sugar Cane League PAC**

Mailing Address **1301 Pennsylvania Ave., NW Suite 4**

City **Washington** State **DC** Zip Code **20004-1729**

FEC ID number of contributing federal political committee. **C C00012328**

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  
**03 / 14 / 2012**

**Transaction ID : A-C16148**

Amount of Each Receipt this Period  
**1000**

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

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

**7000.00**

**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 22 OF 59
	<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)  
**Geoff Davis for Congress**

Mailing Address **PO Box 17192**

City **Covington** State **KY** Zip Code **41017-0192**

FEC ID number of contributing federal political committee. **C C00369470**

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  
**03 / 14 / 2012**

**Transaction ID : A-C16151**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address **1900 K Street, NW**

City **Washington** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00107235**

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  
**03 / 14 / 2012**

**Transaction ID : A-C16153**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**The Home Depot Inc.**

Mailing Address **1155 F Street NW  
Suite 400**

City **Washington** State **DC** Zip Code **20004-1346**

FEC ID number of contributing federal political committee. **C C00284885**

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  
**03 / 14 / 2012**

**Transaction ID : A-C16149**

Amount of Each Receipt this Period  
**1000**

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

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

**3000.00**

**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 23 OF 59
	<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)  
**American Sugar Cane League**

Mailing Address PO Drawer 938

City Thibodaux State LA Zip Code 70302

FEC ID number of contributing federal political committee. **C** C00081414

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  
 03 / 21 / 2012

**Transaction ID : A-C16353**

Amount of Each Receipt this Period  
 1000

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

Mailing Address 5915 Eastman Ave Suite 100

City Midland State MI Zip Code 48640

FEC ID number of contributing federal political committee. **C** C00350462

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2012

**Transaction ID : A-C16354**

Amount of Each Receipt this Period  
 5000

**C.** Full Name (Last, First, Middle Initial)  
**Conaway for Congress**

Mailing Address PO Box 51272

City Midland State TX Zip Code 79710-1272

FEC ID number of contributing federal political committee. **C** C00383828

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  
 03 / 21 / 2012

**Transaction ID : A-C16352**

Amount of Each Receipt this Period  
 1000

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

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

7000.00

**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 24 OF 59
	<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)  
**WAL\*PAC**

Mailing Address 702 SW 8th Street

City Bentonville State AR Zip Code 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 **3500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2012**

**Transaction ID : A-C16355**

Amount of Each Receipt this Period  
**2500**

**B.** Full Name (Last, First, Middle Initial)  
**Wild and Wonderful PAC**

Mailing Address PO Box 651374

City Potomac Falls State VA Zip Code 20165-1374

FEC ID number of contributing federal political committee. **C C00489336**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2012**

**Transaction ID : A-C16351**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Andy Harris for Congress**

Mailing Address 13401 Redcoat Lane

City Phoenix State MD Zip Code 21131-2109

FEC ID number of contributing federal political committee. **C C00435974**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2012**

**Transaction ID : A-C16472**

Amount of Each Receipt this Period  
**500**

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

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

**3500.00**



**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 25 OF 59
	<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)  
**BIKESPAC**

Mailing Address **PO Box 2359**

City **Boulder** State **CO** Zip Code **80306-2359**

FEC ID number of contributing federal political committee. **C C00372862**

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  
**03 / 28 / 2012**

**Transaction ID : A-C16469**

Amount of Each Receipt this Period  
**2000**

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

Mailing Address **PO Box 2485**

City **Springfield** State **VA** Zip Code **22152-0485**

FEC ID number of contributing federal political committee. **C C00469429**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2012**

**Transaction ID : A-C16468**

Amount of Each Receipt this Period  
**1500**

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

Mailing Address **PO Box 2485**

City **Springfield** State **VA** Zip Code **22152-0485**

FEC ID number of contributing federal political committee. **C C00469429**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2012**

**Transaction ID : A-C16473**

Amount of Each Receipt this Period  
**1000**

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

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

**4500.00**

**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 26 OF 59
	<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)  
**ERIC PAC**

Mailing Address **25 E Main Street**  
**Suite 200**

City **Richmond** State **VA** Zip Code **23219-2109**

FEC ID number of contributing federal political committee. **C C00384701**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
**10000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2012**

**Transaction ID : A-C16474**

Amount of Each Receipt this Period  
**5000**

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

Mailing Address **PO Box 10134**

City **Bakersfield** State **CA** Zip Code **93389-0134**

FEC ID number of contributing federal political committee. **C C00428052**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2010  
 Primary  General  
 Other (specify) **Primary 2010**

Election Cycle-to-Date  
**5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2012**

**Transaction ID : A-C16470**

Amount of Each Receipt this Period  
**5000**

**C.** Full Name (Last, First, Middle Initial)  
**New Pac**

Mailing Address **PO Box 7480**

City **Visalia** State **CA** Zip Code **93290-7480**

FEC ID number of contributing federal political committee. **C C00398750**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
**3000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2012**

**Transaction ID : A-C16471**

Amount of Each Receipt this Period  
**1000**

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

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

**11000.00**

**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 27 OF 59
	<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. ROSKAM PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 610 S Boulevard  
 City Tampa State FL Zip Code 33606-2693  
 FEC ID number of contributing federal political committee. **C C00451294**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012  
**Transaction ID : A-C16466**  
 Amount of Each Receipt this Period  
 5000

**B. Sugar Cane Growers Cooperative of Florida**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 666  
 City Belle Glade State FL Zip Code 33430-0666  
 FEC ID number of contributing federal political committee. **C C00254656**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012  
**Transaction ID : A-C16475**  
 Amount of Each Receipt this Period  
 500

**C. Tuesday Group PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 11586  
 City Washington State DC Zip Code 20008-0786  
 FEC ID number of contributing federal political committee. **C C00433060**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 7500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012  
**Transaction ID : A-C16467**  
 Amount of Each Receipt this Period  
 2500

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

8000.00

**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 28 OF 59
	<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. Build PAC**  
Full Name (Last, First, Middle Initial)  
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: 2012  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date 2500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 29 / 2012  
**Transaction ID : A-C16413**  
Amount of Each Receipt this Period  
2500

**B. Dupont Good Government Fund**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1007 Market Street Floor 2  
City Wilmington State DE Zip Code 19898-0001  
FEC ID number of contributing federal political committee. **C** C00171926  
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  
03 / 29 / 2012  
**Transaction ID : A-C16409**  
Amount of Each Receipt this Period  
2000

**C. McCaul for Congress, Inc.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 815 Brazos Street Suite A PMB 230  
City Austin State TX Zip Code 78701-2514  
FEC ID number of contributing federal political committee. **C** C00392688  
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  
03 / 29 / 2012  
**Transaction ID : A-C16410**  
Amount of Each Receipt this Period  
1000

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

5500.00

**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 29 OF 59
	<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)  
**Patriot Day III**

Mailing Address 228 S Washington Street  
Suite 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C C00511519**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8402.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : A-C16435**

Amount of Each Receipt this Period  
8402.49

**B.** Full Name (Last, First, Middle Initial)  
**Southern Minnesota Sugar Coop. PAC**

Mailing Address PO Box 500

City Renville State MN Zip Code 56284-0500

FEC ID number of contributing federal political committee. **C C00166348**

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  
 03 / 29 / 2012

**Transaction ID : A-C16431**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Friends of John Boehner**

Mailing Address 7908 Cincinnati Dayton Road  
Suite I2

City West Chester State OH Zip Code 45069-6629

FEC ID number of contributing federal political committee. **C C00237198**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012

**Transaction ID : A-C16446**

Amount of Each Receipt this Period  
2000

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

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

11402.49

**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 30 OF 59
	<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)  
**Friends of John Boehner**

Mailing Address 7908 Cincinnati Dayton Road  
Suite 12

City West Chester State OH Zip Code 45069-6629

FEC ID number of contributing federal political committee. **C** C00237198

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012

**Transaction ID : A-C16447**

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**Hoosiers for Rokita, Inc.**

Mailing Address 7643 E US Highway 36

City Avon State IN Zip Code 46123-7972

FEC ID number of contributing federal political committee. **C** C00476192

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  
 03 / 30 / 2012

**Transaction ID : A-C16445**

Amount of Each Receipt this Period  
1000

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

Mailing Address PO Box 696000

City San Antonio State TX Zip Code 78269-6000

FEC ID number of contributing federal political committee. **C** C00109546

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  
 03 / 30 / 2012

**Transaction ID : A-C16450**

Amount of Each Receipt this Period  
1000

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

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

4000.00

64902.49

**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 59	
	<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) <b>A. Alexander's Steakhouse</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 01 / 2012</b>
Mailing Address <b>202 W Anthony Drive</b>		Amount of Each Disbursement this Period <b>78.79</b> <b>Transaction ID : B-E-16489</b>
City <b>Champaign</b> State <b>IL</b> Zip Code <b>61822-1218</b>	Purpose of Disbursement Travel: meals Candidate Name Category/Type <b>002</b>	
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>B. Champaign County Republicans</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 01 / 2012</b>
Mailing Address <b>2101 Windsor Place</b>		Amount of Each Disbursement this Period <b>1000</b> <b>Transaction ID : B-E-16575</b>
City <b>Champaign</b> State <b>IL</b> Zip Code <b>61820-7769</b>	Purpose of Disbursement Political Contribution: Dinner Candidate Name Category/Type <b>011</b>	
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>c. Randi L Parr</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 01 / 2012</b>
Mailing Address <b>2020 10th Street Apt. 304</b>		Amount of Each Disbursement this Period <b>88.02</b> <b>Transaction ID : B-E-16576</b>
City <b>Charleston</b> State <b>IL</b> Zip Code <b>61920-3435</b>	Purpose of Disbursement reimbursement, office supplies Candidate Name Category/Type <b>001</b>	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1166.81</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 59	
	<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) <b>A. Randi L Parr</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2012
Mailing Address 2020 10th Street Apt. 304		Amount of Each Disbursement this Period 750 <b>Transaction ID : B-E-16577</b>
City Charleston	State IL	
Zip Code 61920-3435	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>B. Casey's General Store</b>		Date of Disbursement MM / DD / YYYY 03 / 02 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 10.16 <b>Transaction ID : B-E-16490</b>
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>c. Casey's General Store</b>		Date of Disbursement MM / DD / YYYY 03 / 02 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 34.9 <b>Transaction ID : B-E-16492</b>
City Springfield	State IL	
Zip Code 62702-6012	Purpose of Disbursement Travel: 34.9	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	795.06
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 59	
	<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) <b>A. Alexander's Steakhouse</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2012
Mailing Address 202 W Anthony Drive		Amount of Each Disbursement this Period 70.86 <b>Transaction ID : B-E-16499</b>
City Champaign	State IL	
Zip Code 61822-1218	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>B. Busey Bank</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2012
Mailing Address 201 W Main Street		Amount of Each Disbursement this Period 1 <b>Transaction ID : B-E-16505</b>
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) <b>c. Busey Bank</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2012
Mailing Address 201 W Main Street		Amount of Each Disbursement this Period 1 <b>Transaction ID : B-E-16506</b>
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	70.86
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 59			
	<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) <b>A. Busey Bank</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2012
Mailing Address 201 W Main Street		Amount of Each Disbursement this Period 1 <b>Transaction ID : B-E-16507</b>
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) <b>B. Casey's General Store</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 68.33 <b>Transaction ID : B-E-16498</b>
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>c. City of Litchfield</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2012
Mailing Address 120 E Ryder Street		Amount of Each Disbursement this Period 29.23 <b>Transaction ID : B-E-16503</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	98.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 59	
	<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) <b>A. Marathon Oil</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 05 / 2012</b>
Mailing Address <b>Springfield Ave</b>		Amount of Each Disbursement this Period <b>55.48</b>
City <b>Urbana</b> State <b>IL</b> Zip Code <b>61820</b>	Purpose of Disbursement Travel: fuel <b>002</b> 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:		

**Transaction ID : B-E-16495**

Full Name (Last, First, Middle Initial) <b>B. Marathon Oil</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 05 / 2012</b>
Mailing Address <b>Springfield Ave</b>		Amount of Each Disbursement this Period <b>62.72</b>
City <b>Urbana</b> State <b>IL</b> Zip Code <b>61820</b>	Purpose of Disbursement Travel: fuel <b>002</b> 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:		

**Transaction ID : B-E-16496**

Full Name (Last, First, Middle Initial) <b>c. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 05 / 2012</b>
Mailing Address <b>4 Corvette Drive</b>		Amount of Each Disbursement this Period <b>62.97</b>
City <b>Litchfield</b> State <b>IL</b> Zip Code <b>62056-1090</b>	Purpose of Disbursement Travel: fuel <b>002</b> 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:		

**Transaction ID : B-E-16497**

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>181.17</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 59			
	<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) <b>A. Robert E Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 902 Crestwood Drive		Amount of Each Disbursement this Period 42.38
City Urbana State IL Zip Code 61801-5202	Purpose of Disbursement Travel: fuel	
Candidate Name	Category/Type 002	<b>Transaction ID : B-E-16493</b>
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>B. Robert E Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 902 Crestwood Drive		Amount of Each Disbursement this Period 204.99
City Urbana State IL Zip Code 61801-5202	Purpose of Disbursement Travel: meals	
Candidate Name	Category/Type 002	<b>Transaction ID : B-E-16500</b>
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>c. Robert E Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 902 Crestwood Drive		Amount of Each Disbursement this Period 204.99
City Urbana State IL Zip Code 61801-5202	Purpose of Disbursement Travel: meals	
Candidate Name	Category/Type 002	<b>Transaction ID : B-E-16501</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	452.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 59	
	<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) <b>A. Robert E Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 05 / 2012</b>
Mailing Address <b>902 Crestwood Drive</b>		Amount of Each Disbursement this Period <b>304.99</b> <b>Transaction ID : B-E-16502</b>
City <b>Urbana</b> State <b>IL</b> Zip Code <b>61801-5202</b>	Purpose of Disbursement <b>Travel: fuel expenses</b> Category/Type <b>002</b>	
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>B. James Zenn</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 05 / 2012</b>
Mailing Address <b>2610 Oakton Street Apt. 1W</b>		Amount of Each Disbursement this Period <b>810</b> <b>Transaction ID : B-E-16504</b>
City <b>Park Ridge</b> State <b>IL</b> Zip Code <b>60068-1859</b>	Purpose of Disbursement <b>fundraising consultant</b> Category/Type <b>001</b>	
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>c. Decker Consulting Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 06 / 2012</b>
Mailing Address <b>244 14th Place NE Suite 2</b>		Amount of Each Disbursement this Period <b>2002.14</b> <b>Transaction ID : B-E-15980</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20002-8448</b>	Purpose of Disbursement <b>Fundraising: fundraising consultant</b> Category/Type <b>003</b>	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3117.13</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 59	
	<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) <b>A. Exxon Mobile</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 06 / 2012</b>
Mailing Address <b>407A N Dunlap Avenue</b>		Amount of Each Disbursement this Period <b>58.29</b>
City <b>Savoy</b> State <b>IL</b> Zip Code <b>61874-8049</b>	Purpose of Disbursement Travel: fuel Category/Type <b>002</b>	
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:		

Transaction ID : B-E-16508

Full Name (Last, First, Middle Initial) <b>B. Jen Dillman Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 06 / 2012</b>
Mailing Address <b>1801 Dial Court</b>		Amount of Each Disbursement this Period <b>3500</b>
City <b>Springfield</b> State <b>IL</b> Zip Code <b>62704-3503</b>	Purpose of Disbursement Fundraising: fundraising consultant Category/Type <b>003</b>	
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:		

Transaction ID : B-E-15979

Full Name (Last, First, Middle Initial) <b>c. Majority Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 06 / 2012</b>
Mailing Address <b>135 Professional Drive Suite 104</b>		Amount of Each Disbursement this Period <b>500</b>
City <b>Ponte Vedra Beach</b> State <b>FL</b> Zip Code <b>32082-6277</b>	Purpose of Disbursement Fundraising: artwork for mailer Category/Type <b>003</b>	
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:		

Transaction ID : B-E-15982

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4058.29</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 59	
	<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) <b>A. Kevin Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 06 / 2012</b>
Mailing Address <b>3608 State Route 9</b>		Amount of Each Disbursement this Period <b>435.54</b> <b>Transaction ID : B-E-15981</b>
City Rankin	State IL Zip Code 60960	
Purpose of Disbursement Travel: reimbursement, mileage	Category/Type <b>002</b>	
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>B. NRCC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 07 / 2012</b>
Mailing Address <b>320 First Street, SE</b>		Amount of Each Disbursement this Period <b>30000</b> <b>Transaction ID : B-E-16129</b>
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Party Contribution	Category/Type <b>011</b>	
Candidate Name <b>NRCC</b>		
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>c. Vigil Printing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 07 / 2012</b>
Mailing Address <b>4415 W Lawrence Avenue</b>		Amount of Each Disbursement this Period <b>3579.04</b> <b>Transaction ID : B-E-16126</b>
City Chicago	State IL Zip Code 60630-2510	
Purpose of Disbursement Paraphernalia: Pro life mailer	Category/Type <b>006</b>	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>34014.58</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 59	
	<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) <b>A. Randi L Parr</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 2020 10th Street Apt. 304		Amount of Each Disbursement this Period 99.96 <b>Transaction ID : B-E-16580</b>
City Charleston	State IL Zip Code 61920-3435	
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>B. Michael Holmes</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address 1490 N County Road 1550 E		Amount of Each Disbursement this Period 2200 <b>Transaction ID : B-E-16130</b>
City Villa Grove	State IL Zip Code 61956-9649	
Purpose of Disbursement fundraising consulting	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>c. Michael Holmes</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address 1490 N County Road 1550 E		Amount of Each Disbursement this Period 334.56 <b>Transaction ID : B-E-16131</b>
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2634.56
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 59	
	<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) <b>A. Marathon Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2012
Mailing Address Springfield Ave		Amount of Each Disbursement this Period 75 <b>Transaction ID : B-E-16511</b>
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:		

Full Name (Last, First, Middle Initial) <b>B. Courier Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2012
Mailing Address 111 Race Street		Amount of Each Disbursement this Period 13.78 <b>Transaction ID : B-E-16513</b>
City Urbana	State IL Zip Code 61801	
Purpose of Disbursement Travel: food	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>c. Courier Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2012
Mailing Address 111 Race Street		Amount of Each Disbursement this Period 65.26 <b>Transaction ID : B-E-16520</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	154.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 59	
	<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) <b>A. Crane Alley</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2012
Mailing Address 115 W Main Street		Amount of Each Disbursement this Period 53.15 <b>Transaction ID : B-E-16517</b>
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>B. Mongolia</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2012
Mailing Address 301 Neil St		Amount of Each Disbursement this Period 21.76 <b>Transaction ID : B-E-16515</b>
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:	

Full Name (Last, First, Middle Initial) <b>c. Meijer</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2012
Mailing Address 2500 Philo Road		Amount of Each Disbursement this Period 68.75 <b>Transaction ID : B-E-16522</b>
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	143.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 59			
	<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) <b>A. Augies</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012
Mailing Address 1721 W Wrightwood Avenue		Amount of Each Disbursement this Period 83.72
City Chicago	State IL Zip Code 60614-8240	
Purpose of Disbursement Travel: meals	Category/Type 002	<b>Transaction ID : B-E-16530</b>
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>B. Circle K</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012
Mailing Address 2011 N Lincoln Avenue		Amount of Each Disbursement this Period 6.67
City Urbana	State IL Zip Code 61801-1026	
Purpose of Disbursement Travel: meals	Category/Type 002	<b>Transaction ID : B-E-16523</b>
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>c. Jupiter's Pizza &amp; Billards</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012
Mailing Address 39 Main Street		Amount of Each Disbursement this Period 64.65
City Champaign	State IL Zip Code 61820	
Purpose of Disbursement Travel: meals	Category/Type 002	<b>Transaction ID : B-E-16529</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	155.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 59	
	<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) <b>A. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012
Mailing Address 4 Corvette Drive		Amount of Each Disbursement this Period 64.08
City Litchfield	State IL Zip Code 62056-1090	
Purpose of Disbursement Travel: fuel	Category/Type 002	<b>Transaction ID : B-E-16528</b>
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>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012
Mailing Address 2005 N. Prospect		Amount of Each Disbursement this Period 21.72
City Champaign	State IL Zip Code 61821	
Purpose of Disbursement office supplies	Category/Type 001	<b>Transaction ID : B-E-16526</b>
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>C. El Toro Bravo</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2012
Mailing Address 723 S Neil Street		Amount of Each Disbursement this Period 239.47
City Champaign	State IL Zip Code 61820-5251	
Purpose of Disbursement Travel: meals	Category/Type 002	<b>Transaction ID : B-E-16533</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	325.27
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 59	
	<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) <b>A. Thorntons</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2012
Mailing Address 10101 Linn Station Road		Amount of Each Disbursement this Period 43.85
City Savoy State IL Zip Code 61874	Purpose of Disbursement Travel: fuel	
Candidate Name	Category/Type 002	Transaction ID : B-E-16531
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>B. Alexander's Steakhouse</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2012
Mailing Address 202 W Anthony Drive		Amount of Each Disbursement this Period 92.38
City Champaign State IL Zip Code 61822-1218	Purpose of Disbursement Travel: fuel	
Candidate Name	Category/Type 002	Transaction ID : B-E-16538
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>c. Circle K</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2012
Mailing Address 2011 N Lincoln Avenue		Amount of Each Disbursement this Period 72.14
City Urbana State IL Zip Code 61801-1026	Purpose of Disbursement Travel: fuel	
Candidate Name	Category/Type 002	Transaction ID : B-E-16537
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	208.37
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 59	
	<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) <b>A. Billy Barooz</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2012
Mailing Address 2521 Village Green Place		Amount of Each Disbursement this Period 20.5 <b>Transaction ID : B-E-16542</b>
City Champaign State IL Zip Code 61822	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>B. Billy Barooz</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2012
Mailing Address 2521 Village Green Place		Amount of Each Disbursement this Period 139.2 <b>Transaction ID : B-E-16546</b>
City Champaign State IL Zip Code 61822	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>c. Courier Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2012
Mailing Address 111 Race Street		Amount of Each Disbursement this Period 18.53 <b>Transaction ID : B-E-16541</b>
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	178.23
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 59	
	<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) <b>A. Crane Alley</b>		Date of Disbursement MM / DD / YYYY 03 / 19 / 2012
Mailing Address 115 W Main Street		Amount of Each Disbursement this Period 66.62 <b>Transaction ID : B-E-16545</b>
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) <b>B. DirecTV</b>		Date of Disbursement MM / DD / YYYY 03 / 19 / 2012
Mailing Address PO Box 9001069		Amount of Each Disbursement this Period 94.41 <b>Transaction ID : B-E-16547</b>
City Louisville State KY Zip Code 40290-1069	Purpose of Disbursement Administrative/Salary/Overhead: cable 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>c. Emotive, Llc</b>		Date of Disbursement MM / DD / YYYY 03 / 19 / 2012
Mailing Address 2800 S Shirlington Road Suite 901		Amount of Each Disbursement this Period 647.5 <b>Transaction ID : B-E-16548</b>
City Arlington State VA Zip Code 22206-3619	Purpose of Disbursement Administrative/Salary/Overhead: mailers 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	808.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 59	
	<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) <b>A. Staples</b>		Date of Disbursement MM / DD / YYYY 03 / 19 / 2012
Mailing Address 2005 N. Prospect		Amount of Each Disbursement this Period 36.15 <b>Transaction ID : B-E-16583</b>
City Champaign	State IL	
Zip Code 61821	Purpose of Disbursement office supplies	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>B. Casey's General Store</b>		Date of Disbursement MM / DD / YYYY 03 / 20 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 73.27 <b>Transaction ID : B-E-16551</b>
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>c. Bryant Industries Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2012
Mailing Address 1404 Warrington Avenue		Amount of Each Disbursement this Period 400 <b>Transaction ID : B-E-16408</b>
City Danville	State IL	
Zip Code 61832-5325	Purpose of Disbursement returned payment for corporate	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	509.42
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 59		
	<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) <b>A. Casey's General Store</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address 3001 E Clear Lake Avenue		Amount of Each Disbursement this Period 58.32 <b>Transaction ID : B-E-16556</b>
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>B. Jupiter's Pizza &amp; Billards</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address 39 Main Street		Amount of Each Disbursement this Period 50.25 <b>Transaction ID : B-E-16554</b>
City Champaign State IL Zip Code 61820	Purpose of Disbursement Travel: food 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>C. Jupiter's Pizza &amp; Billards</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address 39 Main Street		Amount of Each Disbursement this Period 53.5 <b>Transaction ID : B-E-16555</b>
City Champaign State IL Zip Code 61820	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	162.07
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 59			
	<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) <b>A. Jupiter's Pizza &amp; Billards</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address 39 Main Street			Amount of Each Disbursement this Period 120 <b>Transaction ID : B-E-16557</b>
City Champaign	State IL	Zip Code 61820	
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) <b>B. Mongolia</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address 301 Neil St			Amount of Each Disbursement this Period 43.81 <b>Transaction ID : B-E-16553</b>
City Champaign	State IL	Zip Code 61802	
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) <b>c. Crane Alley</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2012
Mailing Address 115 W Main Street			Amount of Each Disbursement this Period 129.34 <b>Transaction ID : B-E-16559</b>
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	293.15
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 59	
	<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. Crispin's Properties**

Mailing Address **Montgomery County Realty, Inc.  
551 South Main Street**

City **Hillsboro** State **IL** Zip Code **62049**

Purpose of Disbursement  
**Administrative/Salary/Overhead: rent**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**03 / 22 / 2012**

Amount of Each Disbursement this Period  
**400**

Transaction ID : **B-E-16560**

Category/Type  
**001**

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

Mailing Address **10101 Linn Station Road**

City **Savoy** State **IL** Zip Code **61874**

Purpose of Disbursement  
**Travel: fuel**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**03 / 22 / 2012**

Amount of Each Disbursement this Period  
**72.82**

Transaction ID : **B-E-16558**

Category/Type  
**002**

Full Name (Last, First, Middle Initial)  
**c. Casey's General Store**

Mailing Address **3001 E Clear Lake Avenue**

City **Springfield** State **IL** Zip Code **62702-6012**

Purpose of Disbursement  
**Travel: fuel**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**03 / 23 / 2012**

Amount of Each Disbursement this Period  
**69.75**

Transaction ID : **B-E-16563**

Category/Type  
**002**

**SUBTOTAL** of Disbursements This Page (optional)..... **542.57**

**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 59	
	<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) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2012
Mailing Address 2005 N. Prospect		Amount of Each Disbursement this Period 49.07
City Champaign	State IL	
Zip Code 61821	Category/ Type 001	<b>Transaction ID : B-E-16585</b>
Purpose of Disbursement office supplies		
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>B. Tony Ashby</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2012
Mailing Address 603 Mitchell Court		Amount of Each Disbursement this Period 100
City Champaign	State IL	
Zip Code 61821-3533	Category/ Type 001	<b>Transaction ID : B-E-16588</b>
Purpose of Disbursement newspaper service		
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>c. Randi L Parr</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2012
Mailing Address 2020 10th Street Apt. 304		Amount of Each Disbursement this Period 130.56
City Charleston	State IL	
Zip Code 61920-3435	Category/ Type 002	<b>Transaction ID : B-E-16586</b>
Purpose of Disbursement Travel: mileage		
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	279.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 59		
	<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) <b>A. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 12.5 <b>Transaction ID : B-E-16360</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement processing 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) <b>B. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 7.5 <b>Transaction ID : B-E-16361</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement processing 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) <b>C. Business Technology Center</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2012
Mailing Address 701 Devonshire Drive		Amount of Each Disbursement this Period 285 <b>Transaction ID : B-E-16343</b>
City Champaign State IL Zip Code 61820-7337	Purpose of Disbursement Administrative/Salary/Overhead: rent 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)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	305.00
<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)	PAGE 54 OF 59			
	<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) <b>A. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2012		
Mailing Address 300 First St SE			Amount of Each Disbursement this Period 763.2		
City Washington	State DC	Zip Code 20003	Transaction ID : B-E-16339		
Purpose of Disbursement Campaign Event: fundraiser		Category/ Type 007			
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>B. Consolidated Communications</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2012		
Mailing Address PO Box 2564			Amount of Each Disbursement this Period 43.19		
City Decatur	State IL	Zip Code 62525-2564	Transaction ID : B-E-16342		
Purpose of Disbursement phone srv		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>C. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2012		
Mailing Address PO Box 6170			Amount of Each Disbursement this Period 650.52		
City Carol Stream	State IL	Zip Code 60197	Transaction ID : B-E-16340		
Purpose of Disbursement phone 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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1456.91
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 59		
	<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) <b>A. Robert E Johnson</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2012
Mailing Address 902 Crestwood Drive		Amount of Each Disbursement this Period 2594.59 <b>Transaction ID : B-E-16344</b>
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) <b>B. Busey Bank</b>		Date of Disbursement MM / DD / YYYY 03 / 26 / 2012
Mailing Address 201 W Main Street		Amount of Each Disbursement this Period 25 <b>Transaction ID : B-E-16570</b>
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) <b>c. Courier Cafe</b>		Date of Disbursement MM / DD / YYYY 03 / 26 / 2012
Mailing Address 111 Race Street		Amount of Each Disbursement this Period 30.07 <b>Transaction ID : B-E-16565</b>
City Urbana	State IL Zip Code 61801	
Purpose of Disbursement Travel: food		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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2649.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 59			
	<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) <b>A. Marathon Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2012
Mailing Address Springfield Ave		Amount of Each Disbursement this Period 236.79 <b>Transaction ID : B-E-16569</b>
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:		

Full Name (Last, First, Middle Initial) <b>B. Meijer</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2012
Mailing Address 2500 Philo Road		Amount of Each Disbursement this Period 36.47 <b>Transaction ID : B-E-16566</b>
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) <b>c. Tony Ashby</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2012
Mailing Address 603 Mitchell Court		Amount of Each Disbursement this Period 100 <b>Transaction ID : B-E-16571</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	236.79
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 59			
	<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) <b>A. James Zenn</b>		Date of Disbursement MM / DD / YYYY 03 / 28 / 2012
Mailing Address 2610 Oakton Street Apt. 1W		Amount of Each Disbursement this Period 1560 <b>Transaction ID : B-E-16403</b>
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>B. Aristotle International</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1.01 <b>Transaction ID : B-E-16434</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement processing 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>c. Busey Bank</b>		Date of Disbursement MM / DD / YYYY 03 / 30 / 2012
Mailing Address 201 W Main Street		Amount of Each Disbursement this Period 36.1 <b>Transaction ID : B-E-16574</b>
City Urbana	State IL	
Zip Code 61801-2621	Purpose of Disbursement service charge	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1597.11
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 59			
	<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) <b>A. Minuteman Press</b>		Date of Disbursement MM / DD / YYYY 03 / 30 / 2012
Mailing Address 1407 S. Neil Street		Amount of Each Disbursement this Period 99.5 <b>Transaction ID : B-E-16572</b>
City Champaign State IL Zip Code 61820	Purpose of Disbursement Administrative/Salary/Overhead: printing Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. The Lukens Company</b>		Date of Disbursement MM / DD / YYYY 03 / 30 / 2012
Mailing Address 2800 S Shirlington Road		Amount of Each Disbursement this Period 5497.53 <b>Transaction ID : B-E-16573</b>
City Arlington State VA Zip Code 22206-3601	Purpose of Disbursement Administrative/Salary/Overhead: mailers Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Kevin Johnson</b>		Date of Disbursement MM / DD / YYYY 03 / 30 / 2012
Mailing Address 3608 State Route 9		Amount of Each Disbursement this Period 50 <b>Transaction ID : B-E-16444</b>
City Rankin State IL Zip Code 60960	Purpose of Disbursement Campaign Event: IQ Dinner Tickets Candidate Name Category/Type 007	
Office Sought: House Senate President State: District:	Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5647.03
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 59			
	<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) <b>A. Total Spectrum</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2012</b>
Mailing Address <b>507 Capitol Court NE Suite 100</b>		Amount of Each Disbursement this Period <b>10959.76</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20002-7705</b>	Purpose of Disbursement <b>Paraphernalia: direct mail</b>	<b>Transaction ID : B-E-16441</b>
Candidate Name	Category/Type <b>006</b>	
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>B. Total Spectrum</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2012</b>
Mailing Address <b>507 Capitol Court NE Suite 100</b>		Amount of Each Disbursement this Period <b>10959.76</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20002-7705</b>	Purpose of Disbursement <b>Paraphernalia: direct mail</b>	<b>Transaction ID : B-E-16442</b>
Candidate Name	Category/Type <b>006</b>	
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>C.</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	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>21919.52</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>84161.34</b>