FEC FORM 3		ND D	ISBU		EIPTS IENTS			Office Use	Only	
1. NAME OF COMMITTEE (in			AILING LAI R PRINT 🕎		ample:If typing, er the lines	type]	
Friends of Tim Jo)hnson 									
ADDRESS (number a	and street)	PO Box	17097						_ _ _	
Check if diff than previou reported. (A	isly	Urbana						618	03	
2. FEC IDENTIFIC	ATION NUMB	ER ¥		CITY 🛋			STATE	Z		-
C0035042	1		3.	IS THIS REPORT	NEV (N)	OR	X AMEN (A)	IDED		
4. TYPE OF REF (a) Quarterly Re	eports:	pose One)	(b)	12-Day PRE	E-Election Repo Primary (12F		General	(12G)	Rur	noff (12R)
	5 Quarterly Re 5 Quarterly Rep				Convention (12C)	Special (12S)		
Octobe	er 15 Quarterly	Report (Q3	3)	Election on					in the State of	
Januar	y 31 Year-End	I Report (YE	E) (c)	30-Day POS	T-Election Rep	oort for the:				
Termin	ation Report (TER)		Election on	General (300	ā)	Runoff (30R)	in the State of	ecial (30S)
5. Covering Period	04	0 1	2	007	through	06	3 0	20	07	
I certify that I have exa		-	the best of r an Kelly	my knowledge	e and belief it is	true, correc	t and complete.			
Type or Print Name of Signature of Treasure NOTE : Submission of	er Electronic	cally Filed b	y Brian ł	-	ubject the pers		Date 1 0	1 C		2 0 0 7 37g.
Office				, -				-	FORM	

Office				FEC FORM 3
Use				(Revised 02/2003)
Only				(11011000 02/2000)

nage	# 27931320498 FEC Form 3 (Revised 02/2003)	SUMMARY PAGE of Receipts and Disbursements	Page 2
W	/rite or Type Committee Name		
F	riends of Tim Johnson		
R	eport Covering the Period: From:	M M D D Y Y Y Y 0 4 0 1 2 0 0 7 To:	. M M D D Y Y Y Y 0 6 3 0 2 0 0 7
		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))	44055.60	69424.46
	(b) Total Contribution Refunds (from Line 20(d))	0.00	1000.00
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	44055.60	68424.46
7.	Net Operating Expenditures	•	
	(a) Total Operating Expenditures (from Line 17)	12006.76	52978.13
	(b) Total Offsets to Operating Expenditures (from Line 14)	575.00	642.75
	(c) Net Operating Expenditures(subtract Line 7(b) from Line 7(a))	11431.76	52335.38
8.	Cash on Hand at Close of Reporting Period (from Line 27)	48104.89	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	5065.85	

For further information contact:

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

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

Age# 27931320499 D FEC Form 3 (Revised 02/2003)	ETAILED SUMMARY PAGE of Receipts			Page 3
Write or Type Committee Name Friends of Tim Johnson				
Report Covering the Period: From: 04		To:	M M D D D 3 0	Y Y Y 200
I. RECEIPTS	COLUMN A Total This Period		COLUMN E Election Cycle-to	-
1. CONTRIBUTIONS (other than loans) FROM:				
(a) Individuals/Persons Other Than				
Political Committees (i) Itemized (use Schedule A)	11450.00			14200.00
(ii) Unitemized	840.00			5730.00
(iii) TOTAL of contributions	12290.00	Г		19930.00
from individuals	350.00	Ē		350.00
(b) Political Party Committees(c) Other Political Committees	31415.60			49144.46
(such as PACS)				
(d) The Candidate	0.00			0.00
(e) TOTAL CONTRIBUTIONS (other than loans)	44055.60			69424.46
(add Lines 11(a)(iii), (b), (c), and (d))	44000.00			00+24.40
2. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00			0.00
3. LOANS				
(a) Made or Guaranteed by the Candidate	0.00			0.00
	0.00	Γ		0.00
(b) All Other Loans (c) TOTAL LOANS	0.00			0.00
(add Lines 13(a) and (b))	0.00			0.00
4. OFFSETS TO OPERATING				
EXPENDITURES (Refunds, Rebates, etc.)	575.00			642.75
5. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00			0.00
6. TOTAL RECEIPTS (add Lines				
11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	44630.60			70067.21

Image# 27931320500

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003) **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 12006.76 52978.13 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 64245.30 by the Candidate..... 0.00 0.00 (b) Of all Other Loans..... (c) TOTAL LOAN REPAYMENTS 0.00 64245.30 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other 0.00 0.00 Than Political Committees..... 0.00 0.00 (b) Political Party Committees..... (c) Other Political Committees 0.00 1000.00 (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS 0.00 1000.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS..... 22. TOTAL DISBURSEMENTS 12006.76 118223.43 (add Lines 17, 18, 19(c), 20(d), and 21)

III. CASH SUMMARY

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD	15481.05
24.	TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)	44630.60
25.	SUBTOTAL (add Line 23 and Line 24)	60111.65
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	12006.76
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	48104.89

Page 4

FEC FORM 3Z-1 (File with Form 3)

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19) (Millionaires' Amendment)

Name of Candidate			Candidate ID Number
Tim Johnson			H0IL15053
Name of Principal Campaign Friends of Tim Johnson	Committee		Committee ID Number C C00350421
Committee Address PO Box 17097			
City	State	ZIP	
Urbana	IL	61803-	
Report Covering Period (chec	Report Covering Period (check one) x through June 30, or through D preceding the year of the general elect Primary		
1. Gross receipts of authorized committees		73259.25	0.00
2. Aggregate amount of contributions from personal funds of the candid		0.00	0.00
3. Gross receipts minus the candida personal contributions		73259.25	0.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6/36 (check only one) 11a 11a 11b X 12 13a 13b 14
Ar or	y information copied from such Reports an for commercial purposes, other than using NAME OF COMMITTEE (In Full) Friends of Tim Johnson	d Statements may the name and add	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) AAPAC Mailing Address 1101 17th St., N.W City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2008 X Primary General Other (specify) ▼	State DC C COO Occupation	Zip Code 20036 0107300 n sycle-to-Date ▼ 1000.00	Date of Receipt M M 0 0 1 2 0 7 Transaction ID: 70711.C7418 Amount of Each Receipt this Period 1000.00 Receipt 1000.00 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B.	Full Name (Last, First, Middle Initial) Abate of Illinois PAC Mailing Address 311 E. Main St., #4 City Galesburg FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2008 X Primary General Other (specify) ▼	State IL C COO Occupation	Zip Code 61401 0308460 n sycle-to-Date ▼ 40.00	Date of Receipt M M / D D / Y Y Y Y Transaction ID: 70711.C7404 Amount of Each Receipt this Period 40.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
С.	Full Name (Last, First, Middle Initial) ADM PAC Mailing Address PO Box 1470 City Decatur FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2008 X Primary General Other (specify) ▼	Occupation	Zip Code 62525 0093963 n sycle-to-Date ▼ 1000.00	Date of Receipt Transaction ID: 70711.C7417 Amount of Each Receipt this Period Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optiona	l)		2040.00
т	OTAL This Period (last page this line num	ber only)		

 $\mathsf{FEC}\mathsf{Schedule}\,\mathsf{A}\,(\mathsf{Form}\,\mathsf{3}$) $\mathsf{Rev}.\,02/2003$

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 36 (check only one)
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	
				12 13a 13b 14 15
Ar or	y information copied from such Reports ar for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\geq	Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) AFSCME			Date of Receipt
	Mailing Address 1625 L Street N.W.			M M / D D / Y
	City	State	Zip Code	Transaction ID: 70414.C7395
	Washington	DC	20036	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	n	Receipt
	-			Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008	Election C	Cycle-to-Date ▼	
	Other (specify) ▼	0 0	1000.00	
в.	Full Name (Last, First, Middle Initial) American Association for Justice PAC			Date of Receipt
	Mailing Address 1050 31st Street, N	W		M + M / D + D / Y + Y + Y + Y Y Y Y + Y + Y Y
	City	State	Zip Code	Transaction ID: 70711.C7423
	Washington	DC	20007	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00
	Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify)	0 0	5000.00	
<u>с</u>	Full Name (Last, First, Middle Initial) American Council of Engineering Co. PAC			Date of Receipt
•	Mailing Address 1015 15th Street, N	W		04 11 2007
	City	State	Zip Code	Transaction ID: 70414.C7398
	Washington	DC	20005-2605	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0010868	1000.00
	Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	1000.00]
	UBTOTAL of Receipts This Page (optiona			4500.00
Ľ	UDIVIAL OF NECEIPIS THIS Page (Optiona	<i>u j</i>		
т	OTAL This Period (last page this line num	ber only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS)	Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 8 / 36 (check only one)
			Detailed Summary Page	11a 11b X 11c 11d 12 13a 13b 14 15
An or	y information copied from such Reports ar for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\sum	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) American Hospital Assoc PAC			Date of Receipt
	Mailing Address 325 Seventh Street	, N.W.		0 6 / D D / Y Y Y Y 2 0 0 7
	City	State	Zip Code	Transaction ID: 70711.C7416
	Washington	DC	20004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C COO	0106146	1000.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date 🔻	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	1000.00]	
в.	Full Name (Last, First, Middle Initial) At&t PAC			Date of Receipt
	Mailing Address 175 E Houston, Rm	M • M / D • D / Y • Y • Y • Y Y Y • Y Y		
	City	State	Zip Code	Transaction ID: 70711.C7424
	San Antonio	TX	78205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		4000.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date 🔻	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	5000.00]
 C.	Full Name (Last, First, Middle Initial) Boeing PAC	1		Date of Receipt
	Mailing Address 1200 Wilson Blvd.			M M / D D / Y Y Y Y 06 19 2007
	City	State	Zip Code	Transaction ID: 70711.C7426
	Arlington	VA	22209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	ycle-to-Date V	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	1000.00]
s	UBTOTAL of Receipts This Page (optiona	ـــــــــــــــــــــــــــــــــــــ		6000.00
	OTAL This Period (last page this line num	,	•	

 $\mathsf{FEC}\mathsf{Schedule}\,\mathsf{A}\,(\mathsf{Form}\,\mathsf{3}$) $\mathsf{Rev}.\,02/2003$

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9/36 (check only one) 11a 11b X 11c 11d 12 13a 13b 14 15				
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may name and add	not be sold or used by any persol lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Friends of Tim Johnson							
Α.	Full Name (Last, First, Middle Initial) Chicago Mercantile Exchange PAC Mailing Address 30 S. Wacker Drive			Date of Receipt				
		.		06 01 2007				
	City Chicago	State IL	Zip Code 60606	Transaction ID: 70711.C7425 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C COC	0076299	5000.00				
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's				
	Receipt For: 2008 X Primary General Other (specify) ▼	Election C	ycle-to-Date 5000.00	Spending (2 U.S.C. 441a(i)/441a-1)				
в.	Full Name (Last, First, Middle Initial) Engineers Political Education Committee	· • • ·		Date of Receipt				
	Mailing Address 1125 Seventeenth Stre	04 D D / Y Y Y Y 04 11 2007						
	City	State	Zip Code	Transaction ID: 70414.C7400				
	Washington FEC ID number of contributing federal political committee.	DC CO	20036 0029504	Amount of Each Receipt this Period				
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's				
	Receipt For: 2008 X Primary General Other (specify) ▼	Election C	ycle-to-Date ▼ 2500.00	L Spending (2 U.S.C. 441a(i)/441a-1)				
<u>с</u> .	Full Name (Last, First, Middle Initial) Exelon PAC			Date of Receipt				
	Mailing Address PO Box 805379			M M / D D / Y Y Y Y 04 11 2007				
	City	State	Zip Code	Transaction ID: 70414.C7396				
	Chicago FEC ID number of contributing federal political committee.	IL C COC	60680-5379 0141218	Amount of Each Receipt this Period				
	Name of Employer	Occupation	1	Receipt				
	Receipt For: 2008 X Primary General Other (specify) ▼	Election C	ycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)				
s	SUBTOTAL of Receipts This Page (optional)							
Т	OTAL This Period (last page this line number	only)						

	CHEDULE A (FEC Form 3 EMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 36 (check only one) 11a 11b X 11c 11d 12 13a 13b 14 15				
Ar	ny information copied from such Reports and for commercial purposes, other than using t	Statements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Friends of Tim Johnson							
Α.	Full Name (Last, First, Middle Initial) Exelon PAC Mailing Address PO Box 805379			Date of Receipt				
		State	Zip Code					
	City Chicago	IL	60680-5379	Transaction ID: 70711.C7414 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C COC	0141218	1000.00				
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's				
	Receipt For: 2008 X Primary General Other (specify) ▼	Election C	ycle-to-Date ▼ 2000.00	Spending (2 U.S.C. 441a(i)/441a-1)				
в.	Full Name (Last, First, Middle Initial) Exelon PAC			Date of Receipt				
	Mailing Address PO Box 805379			M M / D D / Y				
	City Chicago	State IL	Zip Code	Transaction ID: 70711.C7422				
	FEC ID number of contributing federal political committee.		60680-5379 0141218	Amount of Each Receipt this Period				
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's				
	Receipt For: 2008	Election C	ycle-to-Date ▼ 3500.00	— Spending (2 U.S.C. 441a(i)/441a-1)				
	Other (specify) 🔻	0 0						
C.	Full Name (Last, First, Middle Initial) Florida Sugar Cane League PAC			Date of Receipt				
	Mailing Address 1301 Pennsylvania A	ve., NW Suite	9 4	0 6 0 1 Y Y Y Y Y 0 6 0 1 2 0 0 7				
	City	State	Zip Code	Transaction ID: 70711.C7411				
	Washington FEC ID number of contributing	DC	20004-1729	Amount of Each Receipt this Period				
	federal political committee.	C		500.00				
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's				
	Receipt For: 2008 X Primary General	Election C	ycle-to-Date 🔻	Spending (2 U.S.C. 441a(i)/441a-1)				
	Cther (specify) ▼		500.00					
s	UBTOTAL of Receipts This Page (optional)			3000.00				
т	TOTAL This Period (last page this line number only)							

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 36 (check only one) 11a 11a 11b X 12 13a 13b 14
Ar or	y information copied from such Reports an for commercial purposes, other than using	d Statements may the name and add	v not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) Land Surveyors PAC			Date of Receipt
	Mailing Address 203 S Walnut			04 / D D / Y Y Y Y 2007
	City Rochester	State IL	Zip Code 62563	Transaction ID: 70414.C7394 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	1	Receipt
	Receipt For: 2008 X Primary General Other (specify) ▼	Election C	ycle-to-Date ▼ 500.00	Spending (2 U.S.C. 441a(i)/441a-1)
В.	Full Name (Last, First, Middle Initial) MINN-DAK Farmers Cooperative PAC Mailing Address 7525 Red River Roa	ad		Date of Receipt
	City	State	Zip Code	0 6 0 1 2 0 0 7 Transaction ID: 70711.C7419
	Wahpeton	ND	58075	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0164939	1000.00
	Name of Employer	Occupation		 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 X Primary General Other (specify) ▼	Election C	ycle-to-Date ▼ 1000.00	
C.	Full Name (Last, First, Middle Initial) Parsons Corp PAC Mailing Address 100 W Walnut Stree	et		Date of Receipt 0 6 1 9 2 0 0 7
	City	State	Zip Code	Transaction ID: 70711.C7427
	Pasadena FEC ID number of contributing federal political committee.	CA	91124	Amount of Each Receipt this Period
	Name of Employer	Occupation	1	Receipt
	Receipt For: 2008 X Primary General Other (specify) ▼	Election C	zycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optiona	l)		2500.00
Т	OTAL This Period (last page this line num	ber only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12/36 (check only one)
Any information copied from such Reports and	d Statements may		12 13a 13b 14 15 on for the purpose of soliciting contributions
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and add	dress of any political committee to	solicit contributions from such committee.
Friends of Tim Johnson			
Full Name (Last, First, Middle Initial) A. RAILPAC			Date of Receipt
Mailing Address 50 F Street, NW			M M / D D / Y
City Washington	State DC	Zip Code	Transaction ID: 70711.C7420
FEC ID number of contributing		20001	Amount of Each Receipt this Period
federal political committee.			
Name of Employer	Occupation	n	Limit Increased Due to Opponent's
Receipt For: 2008 X Primary General	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General Other (specify) ▼	0 0	1000.00	
Full Name (Last, First, Middle Initial) B. RJR PAC	I		Date of Receipt
Mailing Address 1201 F Street, NW Suite 1000			M M / D D / Y Y Y Y 06 01 2007
City Washington	State DC	Zip Code 20004	Transaction ID: 70711.C7415
FEC ID number of contributing federal political committee.		0042002	Amount of Each Receipt this Period
Name of Employer	Occupation	n	- Receipt
Receipt For: 2008	Election (Cycle-to-Date	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General	Liection		1
Other (specify)	0 0	1000.00	
Full Name (Last, First, Middle Initial) C. ROYB PAC			Date of Receipt
Mailing Address 209 Pennsylvania A	ve, SE		04 25 2007
City	State	Zip Code	Transaction ID: 70711.C7402
Washington FEC ID number of contributing	DC	20003	Amount of Each Receipt this Period
federal political committee.	C		1875.60
Name of Employer	Occupation	n	In-Kind Limit Increased Due to Opponent's
Receipt For: 2008	Election C	Cycle-to-Date V	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General Other (specify) ▼	0 0	1875.60	Airfare
SUBTOTAL of Receipts This Page (optional)	······	3875.60
TOTAL This Period (last page this line numb	,		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13/36 (check only one) 11a 11a 11b X 112 13a 13b 14
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Friends of Tim Johnson		
A. Smithfield Foods PAC Mailing Address 499 Park Ave Suite 600 City) State Zip Code	Date of Receipt 0 6 0 1 2 0 0 7 Transaction ID: 70711.C7413
New York FEC ID number of contributing federal political committee.	NY 10022	Amount of Each Receipt this Period 1000.00 Receipt
Name of Employer Receipt For: 2008 X Primary General Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	►	1000.00
TOTAL This Period (last page this line number only)	►	31415.60

	CHEDULE A (FEC Form 3 EMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14/36 (check only one)
or	y information copied from such Reports ar or commercial purposes, other than using NAME OF COMMITTEE (In Full) Friends of Tim Johnson	nd Statements may the name and add	I y not be sold or used by any pers dress of any political committee to	12 13a 13b 14 15 on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) John Albin Mailing Address PO Box 377 City Newman FEC ID number of contributing federal political committee. Name of Employer Longview Cap Corp Receipt For: 2008 X Primary General Other (specify) ▼	State IL C Occupation Farmer Election C	Zip Code 61942 n Cycle-to-Date V 2000.00	Date of Receipt M M / D D / Y Y Y Y Transaction ID: 70414.C7399 Amount of Each Receipt this Period 2000.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Full Name (Last, First, Middle Initial) Tom Berns Mailing Address 109 Whitehall Cour City Urbana FEC ID number of contributing federal political committee. Name of Employer Berns & Clancy Receipt For: 2008 X Primary General Other (specify) ▼	State IL Occupation Engineer		Date of Receipt M M / D 1 / 2007 Transaction ID: 70414.C7387 Amount of Each Receipt this Period 300.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Full Name (Last, First, Middle Initial) Terry Christman Mailing Address 108 Sunney Lane City Arthur FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: 2008 X Primary General Other (specify) ▼		Zip Code 61911 n on Requested Cycle-to-Date ▼ 500.00	Date of Receipt M M / D D / Y Y Y Y Transaction ID: 70414.C7392 Amount of Each Receipt this Period 500.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	JBTOTAL of Receipts This Page (optiona	,	•	2800.00

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 15/36	
ITEMIZED RECEIPTS			or each category of the		
			Detailed Summary Page	X 11a 11b 11c 11d 12 13a 13b 14 15	
An	information copied from such Beports an	d Statements ma	v not be sold or used by any ners	on for the purpose of soliciting contributions	
or f	or commercial purposes, other than using	the name and ad	dress of any political committee to	o solicit contributions from such committee.	
\sum	NAME OF COMMITTEE (In Full)				
\geq	Friends of Tim Johnson				
	Full Name (Last, First, Middle Initial) Rudy Frasca			Date of Receipt	
	Mailing Address 906 Airport Road			M M / D D / Y	
	City	State	Zip Code	Transaction ID: 70711.C7412	
	Urbana	IL	61801	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
•	Name of Employer	Occupatio	n	- Receipt	
	Frasca International	Owner		Limit Increased Due to Opponent's	
	Receipt For: 2008	Election (Cycle-to-Date 🔻	Spending (2 U.S.C. 441a(i)/441a-1)	
	X Primary General	1 1	500.00	1	
	Other (specify)	0 0			
_	Full Name (Last, First, Middle Initial) John Frauenhoffer			Date of Receipt	
	Mailing Address 3806 Deerfield Drive	e		M M M / D D / Y Y Y Y <	
	City	State	Zip Code	Transaction ID: 70414.C7393	
	Champaign	IL	61821	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer Frauenhoffer & Associates	Occupatio Engineer		Ecceipt Limit Increased Due to Opponent's	
	Receipt For: 2008	Election (Cycle-to-Date 🔻	Spending (2 U.S.C. 441a(i)/441a-1)	
	X Primary General Other (specify) ▼		500.00]	
	Full Name (Last, First, Middle Initial) Hugh Gallivan			Date of Receipt	
-	Mailing Address 2801 Oakmont Cou	ırt		04 11 2007	
	City	State	Zip Code	Transaction ID: 70414.C7388	
	Champaign	IL	61821	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		300.00	
-	Name of Employer University Construction	Occupatio Executiv		Receipt Limit Increased Due to Opponent's	
	Receipt For: 2008		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	X Primary General	1 1	000.00	1	
	Other (specify)		300.00		
SL	JBTOTAL of Receipts This Page (optiona	I)		1300.00	
	OTAL This Period (last page this line num				

S	CHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 16/36 (check only one)
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
An or	y information copied from such Reports and for commercial purposes, other than using t	d Statements may the name and add	not be sold or used by any persolation of any political committee to any	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) Carolyn Helmuth			Date of Receipt
	Mailing Address 506 East County Ro	ad 300 North		M M / D D / Y
	City	State	Zip Code	Transaction ID: 70414.C7385
	Arcola	IL	61910	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer	Occupation	1	Receipt
	Okaw Corporations	Secretary		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008	Election C	ycle-to-Date ▼	
	X Primary General Other (specify) ▼	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) Michael Henneman			Date of Receipt
	Mailing Address 4307 Brittany Trails	M M / D D / Y Y Y Y 04 29 2007		
	City	State	Zip Code	Transaction ID: 70711.C7407
	Champaign	IL	61822	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Henneman Raufeisen	Occupation	ı	Receipt
		Engineer		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 X Primary General	Election C	ycle-to-Date ▼	
	X Primary General Other (specify) ▼		500.00	
с.	Full Name (Last, First, Middle Initial) David & Debra Janson			Date of Receipt
	Mailing Address 4202 Summer Field	Dr		M M / D D / Y Y Y Y 04 29 2007
	City	State	Zip Code	Transaction ID: 70711.C7408
	<u>Champaign</u>	<u>IL</u>	61822	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2100.00
	Name of Employer Information Requested	Occupation		Receipt Jimit Increased Due to Oppenent's
	Receipt For: 2008		on Requested	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General			1
	Other (specify)	0 0	2100.00	
s	UBTOTAL of Receipts This Page (optional))		2850.00
	OTAL This Period (last page this line numb			-

	CHEDULE A (FEC Form 3 EMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 36 (check only one) (check only one) X 11a 11b 11c 11d 12 13a 13b 14 15
Ar or	ny information copied from such Reports an for commercial purposes, other than using NAME OF COMMITTEE (In Full) Friends of Tim Johnson	d Statements may the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Ernst & Mary Louise Kohn Mailing Address 40W683 Birdie Cree City Saint Charles FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: 2008 X Primary General Other (specify) ▼	State IL C Occupatio Informati	Zip Code 60175 n on Requested Cycle-to-Date V 250.00	Date of Receipt M M / D D / Y Y Y Y 0 4 1 1 2 0 0 7 Transaction ID: 70414.C7386 Amount of Each Receipt this Period 250.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
В.	Full Name (Last, First, Middle Initial) Doug & Rhonda McCumber Mailing Address 814 Lakeshore Dr City Tuscola FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: 2008 X Primary General Other (specify) ♥		Zip Code 61953 n on Requested cycle-to-Date V 250.00	Date of Receipt M M / 29 / 2007 Transaction ID: 70711.C7406 Amount of Each Receipt this Period 250.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C .	Full Name (Last, First, Middle Initial) Charles McGrew Mailing Address 457 E. Jefferson Str City Arcola FEC ID number of contributing federal political committee. Name of Employer Douglas County Receipt For: 2008 X Primary General Other (specify) ▼	State IL C Occupation Sheriff	Zip Code 61910 n Cycle-to-Date V 250.00	Date of Receipt M M / D D / Y Y Y Y Transaction ID: 70414.C7384 Amount of Each Receipt this Period 250.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)	I	750.00
т	OTAL This Period (last page this line numl	oer only)		•

 $\mathsf{FEC}\mathsf{Schedule}\,\mathsf{A}\,(\mathsf{Form}\,\mathsf{3}$) $\mathsf{Rev}.\,02/2003$

SCHEDULE A (FEC Form 3		Use separate schedule(s)		FOR LINE NUMBER: PAGE 18/36	
ITEMIZED RECEIPTS		or each category of the		(check only one)	
			Detailed Summary Page	X 11a 11b 11c 11d 12 13a 13b 14 15	
Ar	y information copied from such Reports and S	Statements may	not be sold or used by any pers	on for the purpose of soliciting contributions	
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	lress of any political committee to	o solicit contributions from such committee.	
$ \rangle$	Friends of Tim Johnson				
\angle					
Α.	Full Name (Last, First, Middle Initial) John Milne			Date of Receipt	
	Mailing Address P O Box 45			M M / D D / Y Y Y Y	
	City	State	Zip Code	0 6 0 1 2 0 0 7 Transaction ID: 70711.C7410	
	Farina	IL	62838	Amount of Each Receipt this Period	
	FEC ID number of contributing				
	federal political committee.	C		500.00	
	Name of Employer	Occupation	1	Receipt	
	The Jefferson Group	Partner		Limit Increased Due to Opponent's	
	Receipt For: 2008	Election C	ycle-to-Date 🔻	Spending (2 U.S.C. 441a(i)/441a-1)	
	X Primary General		500.00		
		0 0	0 0 0 0 0 0 0		
R	Full Name (Last, First, Middle Initial) Wilbur Pflum			Date of Receipt	
υ.	Mailing Address 117 Eldorado Drive				
				04 19 2007	
	City	State	Zip Code	Transaction ID: 70711.C7405	
		IL	61953-2110	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Nome of Employer	Occupation		Receipt	
	Name of Employer retired	Occupation Retired	I	Limit Increased Due to Opponent's	
	Receipt For: 2008		ycle-to-Date 🔻	Spending (2 U.S.C. 441a(i)/441a-1)	
	X Primary General		250.00	1	
	Other (specify)				
	Full Name (Last, First, Middle Initial)	1			
C.	Anna Wall Scott Mailing Address 309 West Michigan			Date of Receipt	
				0 4 / D D / Y Y Y Y 0 2 0 0 7	
	City	State	Zip Code	Transaction ID: 70414.C7391	
	Urbana	IL	61801	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
				Receipt	
	Name of Employer Parkland College	Occupation Professor		Limit Increased Due to Opponent's	
	Receipt For: 2008		ycle-to-Date 🔻	Spending (2 U.S.C. 441a(i)/441a-1)	
	X Primary General		500.00		
	Other (specify)			1	
				1250.00	
s	UBTOTAL of Receipts This Page (optional))		
Т	OTAL This Period (last page this line number	r only)			

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 19 / 36 (check only one)
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 11d
		<u> </u>		12 13a 13b 14 15
Ar or	y information copied from such Reports and for commercial purposes, other than using th	Statements may ne name and add	r not be sold or used by any pers fress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\sum	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) Paul & Ruth Smith			Date of Receipt
	Mailing Address 604 W Stoughton #12	2		04 11 2007
	City	State	Zip Code	Transaction ID: 70414.C7397
	Urbana	IL	61801	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer	Occupation	1	Receipt
	self employed	Rents Ap		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 X Primary General	Election C	ycle-to-Date 🔻	
	Other (specify)		1000.00	
В.	Full Name (Last, First, Middle Initial) Jon Stewart			Date of Receipt
	Mailing Address 4207 Brittany Trail Dr	rive		04 11 2007
	City	State	Zip Code	Transaction ID: 70414.C7390
	Champaign	IL	61822-8506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer	Occupation	1	Receipt
	TRI Star Marketing	President Election Cycle-to-Date		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 X Primary General			
	Other (specify)		500.00	
 C.	Full Name (Last, First, Middle Initial) Ehud Yairi	1		Date of Receipt
	Mailing Address 100 East McHenry			0 6 0 1 2 0 0 7
	City	State	Zip Code	Transaction ID: 70711.C7421
	Urbana	IL	61801	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer University of Illinois	Occupation		Receipt
		Professor		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 X Primary General	Election C	ycle-to-Date	
	Other (specify)		1000.00	
s	UBTOTAL of Receipts This Page (optional)			2500.00
	OTAL This Period (last page this line number			11450.00
Ľ	UTAL THIS FERIOU (last page this line numbe	# Offiy)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 36 (check only one) 11a 11a X 11b 11c 12 13a 13b 14
Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Friends of Tim Johnson		
Full Name (Last, First, Middle Initial) Friends of Jim Ingram Mailing Address P O Box 363 107 E Green St City Newman	State Zip Code IL 61942	Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7 Transaction ID: 70414.C7389 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2008	C Occupation Election Cycle-to-Date	350.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General Other (specify) ▼	350.00]

SUBTOTAL of Receipts This Page (optional)	►	350.00
TOTAL This Period (last page this line number only)	►	350.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 36 (check only one) 11a 11a 11b 11c 12 13a 13b X	
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Friends of Tim Johnson	atements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.	
A. Devonshire Realty Mailing Address PO Box 140 City Champaign	State Zip Code IL 61824-0140	Date of Receipt M M / D D / Y Y Y Y 2 0 0 7 Transaction ID: 70711.C7403 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	Occupation	575.00 Offsets to Operating Expe- nditu Limit Increased Due to Opponent's	
Receipt For: 2008 X Primary General Other (specify) ▼	Election Cycle-to-Date V 575.00	- Spending (2 U.S.C. 441a(i)/441a-1)	

SUBTOTAL of Receipts This Page (optional)	►	575.00
TOTAL This Period (last page this line number only)	►	575.00

Information copied from such Reports and Star r commercial purposes, other than using the n IAME OF COMMITTEE (In Full)		d by any person f	
r commercial purposes, other than using the n IAME OF COMMITTEE (In Full)			
IAME OF COMMITTEE (In Full)	and address of any pointed		licit contributions from such committee
riends of Tim Johnson			
ull Name (Last, First, Middle Initial) Adlexx Corporation			Transaction ID: 70711.E2666 Date of Disbursement
Aailing Address #18 Tophill Lane			
Sity Springfield	State Zip Code IL 62704-		Amount of Each Disbursement this Period
Purpose of Disbursement Printing		000	592.67
Candidate Name		003 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disbu Senate President State: District:	Primary General Other (specify) ▼		PRINTING
Full Name (Last, First, Middle Initial)			
Ameren IP			Transaction ID: 70711.E2687 Date of Disbursement
Aailing Address P.O. Box 511			$ \begin{array}{c} \stackrel{M}{\overset{M}{}}} \stackrel{M}{\overset{M}{}}}} \begin{array}{c} {}^{\prime} \\ \end{array} \begin{array}{c} \stackrel{D}{\overset{D}{}}} \stackrel{D}{\overset{D}{}}} \end{array} \begin{array}{c} {}^{\prime} \\ \end{array} \begin{array}{c} \stackrel{Y}{\overset{Y}{}}} \stackrel{Y}{\overset{Y}{}}} \stackrel{Y}{\overset{Y}{}}} \stackrel{Y}{\overset{Y}{}}} \end{array} $
Dity Decatur	State Zip Code IL 62525-		Amount of Each Disbursement this Period
Purpose of Disbursement Itilities		001	18.36
Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Senate President	Primary General Other (specify) ▼		UTILITIES
State: District:			
ull Name (Last, First, Middle Initial) Ameren IP			Transaction ID: 70711.E2701 Date of Disbursement
Aailing Address P.O. Box 511			05 ^M /24/2007 ^Y
Dity Decatur	State Zip Code IL 62525-		Amount of Each Disbursement this Period
Purpose of Disbursement Utilities 001		001	18.93 Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disbu Senate President State: District:	ursement For: Primary General Other (specify) ▼		UTILITIES
	- 0		629.96
TAL of Disbursements This Page (option	,		029.90

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the	FOR LINE (check only	NUMBER: PAGE 23/36 y one)
		Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21
	Information copied from such Reports and Statem or commercial purposes, other than using the name			
<u>\</u>	NAME OF COMMITTEE (In Full)			
	Friends of Tim Johnson			
۹.	Full Name (Last, First, Middle Initial) Ameren IP			Transaction ID: 70711.E2670 Date of Disbursement
	Mailing Address P.O. Box 511			$\begin{array}{c} \begin{array}{c} M \\ 0 \end{array} \begin{array}{c} 6 \end{array} \begin{array}{c} M \\ \end{array} \begin{array}{c} 1 \end{array} \begin{array}{c} 0 \end{array} \begin{array}{c} D \\ 1 \end{array} \begin{array}{c} 0 \end{array} \begin{array}{c} 1 \end{array} \begin{array}{c} 0 \\ \end{array} \begin{array}{c} Y \\ \end{array} \begin{array}{c} Y \\ \end{array} \begin{array}{c} Y \\ 2 \end{array} \begin{array}{c} 0 \\ 0 \end{array} \begin{array}{c} 0 \end{array} \begin{array}{c} Y \\ \end{array} \begin{array}{c} Y \\ \end{array} \end{array}$
	Decatur	State Zip Code IL 62525-		Amount of Each Disbursement this Period
	Purpose of Disbursement		004	18.24
	Utilities Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		UTILITIES
	Full Name (Last, First, Middle Initial)			Transaction ID: 20211 E0626
3.	AT&T Yahoo			Transaction ID: 70711.E2676 Date of Disbursement
	Mailing Address Bill Payment Center			$ \begin{bmatrix} M & M \\ 0 & 4 \end{bmatrix} \begin{pmatrix} D & D \\ 0 & 2 \end{bmatrix} \begin{pmatrix} Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix} $
	,	State Zip Code MI 48663-0003		Amount of Each Disbursement this Period
	Purpose of Disbursement Phone & Internet		001	365.95
	Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Senate President	ment For: Primary General Other (specify) ▼		PHONE & INTERNET
	State: District: Full Name (Last, First, Middle Initial)			
).	AT&T Yahoo			Transaction ID: 70711.E2686 Date of Disbursement
	Mailing Address Bill Payment Center			$ \begin{bmatrix} M & M \\ 0 & 4 \end{bmatrix} \begin{pmatrix} D & D \\ 2 & 7 \end{bmatrix} \begin{pmatrix} Y & Y & Y \\ 2 & 0 & 0 \end{bmatrix} $
		StateZip CodeMI48663-0003		Amount of Each Disbursement this Period
	Purpose of Disbursement Phone & Internet 001		235.68 Refund or Disposal of Excess	
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		PHONE & INTERNET
cı				619.87
	JBTOTAL of Disbursements This Page (optional) .			

SCHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE (check only	NUMBER: PAGE 24 / 36
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
Full Name (Last, First, Middle Initial) Phil Bloomer			Transaction ID: 70711.E2683 Date of Disbursement
Mailing Address 207 W Main			$ \begin{bmatrix} M & M \\ 0 & 4 \end{bmatrix} / \begin{bmatrix} D & D \\ 2 & 6 \end{bmatrix} / \begin{bmatrix} Y & Y & Y \\ 2 & 0 & 0 \end{bmatrix} $
City Savoy	State Zip Code IL 61874-		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Reimbursement		000	80.10
Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼		TRAVEL REIMBURSEMENT
Full Name (Last, First, Middle Initial)			
Phil Bloomer			Transaction ID: 70711.E2684 Date of Disbursement
Mailing Address 207 W Main			
City Savoy	StateZip CodeIL61874-		Amount of Each Disbursement this Period
Purpose of Disbursement Meal Reimbursement		000	134.00
Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Senate President	ement For: Primary General Other (specify)		MEAL REIMBURSEMENT
State: District:			
Full Name (Last, First, Middle Initial) Busey Bank			Transaction ID: 70711.E2682 Date of Disbursement
Mailing Address 201 W. Main			$ \begin{bmatrix} M & M \\ 0 & 4 \end{bmatrix} \begin{pmatrix} D & D \\ 2 & 3 \end{bmatrix} \begin{pmatrix} Y & Y & Y \\ 2 & 0 & 0 \end{pmatrix} $
City Urbana	State Zip Code IL 61801-		Amount of Each Disbursement this Period
Purpose of Disbursement Interest Payment		009	73.25 Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburst Senate President State: District:	ement For: Primary General Other (specify) ▼		INTEREST PAYMENT
SUBTOTAL of Disbursements This Page (optional)			287.35
TOTAL This Period (last page this line number only)			

Datalled Summary Page × 1 / 20 18 195 196 121 ry Information copied from such Reports and Statements may note sold or used by any person for the purpose of selicating contributions 70.8 180 121 21	SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the	(check only	
for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (in Full) Friends of Tim Johnson Full Name (Last, First, Middle Initial) Busey Bank Maling Address 201 W. Main Öf 2 4 1 2 0 0 7 1 City Urbana Candidate Name Office Sought: House Distursement Interest Payment Calegory: Transaction ID: 70711.E2674 Date of Disbursement Interest Payment Calegory: Propose of Disbursement Interest Payment Calegory: Primacy General Office Sought: House State: District: Purpose of Disbursement Maling Address 201 W. Main City Urbana Purpose of Disbursement Interest Payment Calegory: Calegory: The eader Payment Calegory: Calegory:				20a 20b 20c 21
NAME OF COMMITTEE (in Full) Friends of Tim Johnson Full Name (Last, First, Middle Initial) Busey Bank Maling Address 201 W. Main Offy 212 0 07 Other of Disbursement Interest Payment Candidate Name Office Sought: House State: Disbursement District: President District: Other (specify) ▼ Full Name (Last, First, Middle Initial) Busey Bank Maling Address 201 W. Main Other (specify) ▼ Transaction ID: 70711.E2674 Date of Disbursement District: Full Name (Last, First, Middle Initial) Busey Bank Maling Address 201 W. Main Other (specify) ▼ Transaction ID: 70711.E2674 Date of Disbursement 0009 Cardidate Name 009 Office Sought: House President Disbursement For: Interest Payment Code Cardidate Name Disbursement For: Office Sought: House President Disbursement For:				
Busey Bank Date of Disbursement Mailing Address 201 W. Main City State Zip Code Urbana IL 61801- Purpose of Disbursement 009 Candidate Name 009 Candidate Name Disbursement For: State: Disbursement For: President Disbursement For: Full Name (Last, First, Middle Initial) Eusey Bank Mailing Address 201 W. Main City State Purpose of Disbursement Other (specify) Purpose of Disbursement Other (specify) Purpose of Disbursement Other (specify) City State Purpose of Disbursement Disbursement For: Purpose of Disburseme	NAME OF COMMITTEE (In Full)			
City Lit Zip Code Urbana Lit 61801- Purpose of Disbursement 009 Candidate Name 009 Catter Disbursement Distrest Senate President Disbursement For: President Disbursement For: President District: Full Name (Last, First, Middle Initial) State Busey Bank Disbursement Mailing Address 201 W. Main City State City State Contributions Required Under City State City State Disbursement 61801- Purpose of Disbursement 61801- Purpose of Disbursement 009 Cardidate Name Disbursement For: City Sinate District: President City State District: President City Sinate District: President City Sinate Distoresement <t< td=""><td></td><td></td><td></td><td></td></t<>				
Urbana IL 61801- Purpose of Disbursement Interest Payment 009 Category/ Type Periods Office Sought: House President Disbursement For: Primary 009 Category/ Type INTEREST PAYMENT State: District: Primary General Other (specify) ▼ INTEREST PAYMENT Mailing Address 201 W. Main Transaction ID: 70711.E2674 Date of Disbursement Amount of Each Disbursement City State Zip Code Other (specify) ▼ Amount of Each Disbursement 43.35 Office Sought: House President Disbursement for: Primary General Other (specify) ▼ INTEREST PAYMENT Office Sought: House President Disbursement For: Primary General Other (specify) ▼ Amount of Each Disbursement this Period Office Sought: House President Disbursement For: Primary General Other (specify) ▼ Amount of Each Disbursement this Period Mailing Address 919 Willinois St Office Sought: House President Amount of Each Disbursement this Period Category/ Type State Disbursement For: Primary General Other (specify) ▼ Amount of Each Disbursement this Period Office Sought: House Pre	Mailing Address 201 W. Main			$ \begin{smallmatrix} M & M \\ 0 & 5 \end{smallmatrix} \Big/ \Big[\begin{smallmatrix} D & 2 \\ 2 & 4 \end{smallmatrix} \Big] \Big/ \Big[\begin{smallmatrix} Y & Y & 2 \\ 2 & 0 & 0 \\ 7 \end{smallmatrix} \Big] $
Interest Payment 009 Category/ Type Refund or Disposal of Excess Contributions Required Under Office Sought: House Senate Disbursement For: Other (specify) ▼ INTEREST PAYMENT State: District: Disbursement For: Other (specify) ▼ INTEREST PAYMENT Busey Bank Mailing Address 201 W. Main Transaction ID: 70711.E2674 Date of Disbursement Mailing Address 201 W. Main 009 Amount of Each Disbursement this Period Purpose of Disbursement 009 Category/ Type Y 2 0 0 7 Y City State Zip Code Amount of Each Disbursement this Period Office Sought: House President Disbursement For: Other (specify) ▼ NTEREST PAYMENT State: Disbursement For: Disbursement 009 Category/ Type INTEREST PAYMENT Office Sought: House President Disbursement For: Other (specify) ▼ Amount of Each Disbursement this Period Mailing Address 919 W Illinois St City Transaction ID: 70711.E2697 Category/ Type Other (specify) ▼ Amount of Each Disbursement this Period Office Sought: House President Code IL Other (specify) State: </td <td></td> <td></td> <td></td> <td></td>				
Office Sought: House Disbursement For: INTEREST PAYMENT State: District: Other (specify) ▼ INTEREST PAYMENT Full Name (Last, First, Middle Initial) Eusey Bank Transaction ID: 70711.E2674 Busey Bank Mailing Address 201 W. Main Mailing Address 201 W. Main City State Zip Code Amount of Each Disbursement this Period Urbana IL 61801- 43.35 Purpose of Disbursement O09 Category/ Type Contributions Required Under 11 C.F.R. 400.53 Office Sought: House Disbursement For: General Other (specify) ▼ Value Disbursement For: Other (specify) ▼ INTEREST PAYMENT State: District: Other (specify) ▼ INTEREST PAYMENT Value Disbursement For: General Other (specify) ▼ Classic Events Catering District: Amount of Each Disbursement this Period Mailing Address 919 W Illinois St Other (specify) ▼ Amount of Each Disbursement this Period Office Sought: House Disbursement For: Contributions Required Under 11 C.F.R. 400.33 Contributions Required U	Interest Payment			Refund or Disposal of Excess Contributions Required Under
Busey Bank Mailing Address 201 W. Main City State Zip Code Urbana IL 61801- Purpose of Disbursement 009 Candidate Name 009 Office Sought: House Disbursement Disbursement For: Candidate Name Disbursement For: Office Sought: House District: President Virbana IL Gate of Disbursement Disbursement For: Candidate Name Disbursement For: Office Sought: House District: President Mailing Address 919 W Illinois St City State Zip Code Urbana IL 61801- Purpose of Disbursement 007 Category/ Type Mailing Address 919 W Illinois St City State Zip Code Urbana IL 61801- Purpose of Disbursement Cotering Cardidate Name Disbursement For: Candidate Name Disbursement For: <td>Senate President</td> <td>Primary General</td> <td>Туре</td> <td></td>	Senate President	Primary General	Туре	
City State Zip Code Urbana IL 61801- Purpose of Disbursement 009 Candidate Name Disbursement For: President Disbursement For: Office Sought: President Other (specify) Interest Payment Classic Events Catering Other (specify) Mailing Address 919 W Illinois St City State Zip Code Urbana IL 61801- Purpose of Disbursement 007 Catering Expense 007 Catering Expense 007 Catering Expense 007 Catering Expense Other (specify) Office Sought: House Senate President President Other (specify) State: Disbursement For: Candidate Name 017 Catering Expense Contributions Required Und				Date of Disbursement
Urbana IL 61801- Purpose of Disbursement Interest Payment 009 Refund or Disposal of Excess Candidate Name 009 Category/ Type Interest Payment Office Sought: House Disbursement For: Other (specify) State: District: Primary General Full Name (Last, First, Middle Initial) Other (specify) Transaction ID: 70711.E2697 Category/ Type Disbursement 009 Mailing Address 919 W Illinois St Transaction ID: 70711.E2697 City State Zip Code Urbana IL 61801- Purpose of Disbursement 007 Amount of Each Disbursement this Period Catering Expense 007 Category/ Type 1516.47 Candidate Name Disbursement For: 007 Category/ Type 11 C.F.R. 400.53 Office Sought: House Disbursement For: 0ther (specify) CATERING EXPENSE SuberottAL of Disbursements This Page (optional) Itel of Disbursements This Page (optional) 1631.38	Mailing Address 201 W. Main			$\begin{array}{c} \stackrel{M}{\overset{O}} \stackrel{M}{\overset{M}} \\ \begin{array}{c} 0 \\ \end{array} \end{array} \begin{array}{c} \left(\begin{array}{c} \stackrel{D}{\overset{D}} \stackrel{D}{\overset{D}} \\ 2 \\ \end{array} \right) \end{array} \begin{array}{c} \left(\begin{array}{c} \stackrel{V}{\overset{V}} \stackrel{V}{\overset{V}} \stackrel{V}{\overset{V}} \stackrel{V}{\overset{V}} \\ 2 \\ \end{array} \right) 0 \\ \begin{array}{c} 0 \\ \end{array} \end{array} \begin{array}{c} \begin{array}{c} \stackrel{M}{\overset{O}} \\ \end{array} \end{array} \begin{array}{c} \begin{array}{c} \stackrel{M}{\overset{O}} \\ \end{array} \end{array} \begin{array}{c} \stackrel{M}{\overset{O}} \\ \end{array} \begin{array}{c} \stackrel{M}{\overset{O}} \\ \end{array} \end{array} \end{array} \begin{array}{c} \stackrel{M}{\overset{O}} \\ \end{array} \end{array} \begin{array}{c} \stackrel{M}{\overset{O}} \\ \end{array} \end{array} \end{array} $
Interest Payment 009 Candidate Name 009 Candidate Name Disbursement For: Office Sought: House President Disbursement For: President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Classic Events Catering City State Mailing Address 919 W Illinois St City State Urbana IL Purpose of Disbursement 007 Category/ Type Office Sought: House Disbursement 007 Category/ Type Office Sought: House Disbursement For: 007 Category/ Type Office Sought: House Disbursement For: 007 Category/ Type Office Sought: Disbursement For: President Disbursement For: Other (specify) ▼ CATERING EXPENSE SuberortaL of Disbursements This Page (optional) Ital Gall and there (specify) Type	Urbana			Amount of Each Disbursement this Period
Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Transaction ID: 70711.E2697 Classic Events Catering Disbursement Mailing Address 919 W Illinois St City State Zip Code Urbana IL 61801- Purpose of Disbursement 007 Catering Expense 007 Candidate Name Disbursement For: Office Sought: House Disbursement For: Senate President Disbursement For: State: District:	Interest Payment		Category/	Refund or Disposal of Excess Contributions Required Under
Full Name (Last, First, Middle Initial) Transaction ID: 70711.E2697 Classic Events Catering Date of Disbursement Mailing Address 919 W Illinois St City State Zip Code Urbana IL 61801- Purpose of Disbursement 007 Cardidate Name 007 Candidate Name Disbursement For: Office Sought: House President Other (specify) State: District: Subtrottal of Disbursements This Page (optional)	Senate President	Primary General		INTEREST PAYMENT
City State Zip Code Urbana IL 61801- Purpose of Disbursement 1516.47 Catering Expense 007 Candidate Name 007 Office Sought: House Disbursement For: Category/ Type Office Sought: Disbursement For: President Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional) 1631.38				Date of Disbursement
Urbana IL 61801- Purpose of Disbursement 007 Catering Expense 007 Candidate Name 007 Candidate Name Category/ Type Office Sought: House President Disbursement For: President Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional) IL 61801- 1516.47 Image: Disbursement For: Other (specify) Subtrottal of Disbursements This Page (optional)	Mailing Address 919 W Illinois St			$ \begin{array}{c} \stackrel{M}{0} \stackrel{M}{5} \stackrel{M}{} \end{array} \begin{array}{c} \stackrel{D}{2} \stackrel{D}{4} \end{array} \begin{array}{c} \stackrel{D}{2} \stackrel{D}{4} \end{array} \begin{array}{c} \stackrel{D}{2} \stackrel{V}{2} \stackrel{V}{0} \stackrel{V}{0} \stackrel{V}{7} \end{array} $
Catering Expense 007 Cardidate Name 007 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional) Image: Control optional (control)				Amount of Each Disbursement this Period
Office Sought: House Disbursement For: Type 11 C.F.R. 400.53 ⁻ Office Sought: House Primary General CATERING EXPENSE State: District: Other (specify) Image: Control of Disbursements This Page (optional) Image: Control of Disbursements This Page (optional) Image: Control of Disbursements This Page (optional)	Catering Expense			Refund or Disposal of Excess
Senate Primary General CATERING EXPENSE President Other (specify) ▼ CATERING EXPENSE SUBTOTAL of Disbursements This Page (optional) 1631.38				
SUBTOTAL of Disbursements This Page (optional)	Senate President	Primary General		CATERING EXPENSE
)	•	1631.38
		·		

S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	-	NUMBER: PAGE 26/36			
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check on	X 17 18 19a 19b 20a 20b 20c 21			
	y Information copied from such Reports and Statem or commercial purposes, other than using the name						
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Friends of Tim Johnson						
Α.	Full Name (Last, First, Middle Initial) Devonshire Realty			Transaction ID: 70711.E2680 Date of Disbursement 04^{M} / 11^{D} / 2007^{Y}			
	Mailing Address PO Box 140						
	Champaign	State Zip Code IL 61824-0140		Amount of Each Disbursement this Period			
	Purpose of Disbursement Rent Candidate Name		001 Category/ Type	575.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		RENT			
в.	Full Name (Last, First, Middle Initial) Devonshire Realty			Transaction ID: 70711.E2703 Date of Disbursement			
	Mailing Address PO Box 140			$ \begin{bmatrix} M & M \\ 0 & 5 \end{bmatrix} $			
	Champaign	State Zip Code IL 61824-0140		Amount of Each Disbursement this Period			
	Purpose of Disbursement Rent (May & June) Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		RENT (MAY & JUNE)			
С.	Full Name (Last, First, Middle Initial) Fox Development Corp.			Transaction ID: 70711.E2696 Date of Disbursement			
	Mailing Address 1909 Fox Drive			$ \begin{array}{c} \begin{array}{c} M \\ 0 \\ 5 \end{array} \begin{array}{c} M \\ \end{array} \begin{array}{c} / \\ \end{array} \begin{array}{c} D \\ 2 \\ 4 \end{array} \begin{array}{c} D \\ \end{array} \begin{array}{c} D \\ 2 \\ \end{array} \begin{array}{c} D \\ 4 \end{array} \begin{array}{c} Y \\ \end{array} \begin{array}{c} Y \\ 2 \\ 0 \\ 0 \\ 7 \end{array} \begin{array}{c} Y \\ \end{array} \begin{array}{c} Y \\ 2 \\ 0 \\ 0 \\ 7 \end{array} \right) $			
		State Zip Code IL 61820-		Amount of Each Disbursement this Period			
	Purpose of Disbursement		007	271.15 Refund or Disposal of Excess			
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		FUNDRAISING REIMBURSEMENT			
s	UBTOTAL of Disbursements This Page (optional) .		►	1996.15			
	TOTAL This Period (last page this line number only)						

	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE (check only	NUMBER: PAGE 27/36
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21
	Information copied from such Reports and Statemeter or commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) Gordy Hulten			Transaction ID: 70711.E2690 Date of Disbursement
	Mailing Address 2934 Stonecreek Blvd			$ \begin{bmatrix} M & M \\ 0 & 4 \end{bmatrix} / \begin{bmatrix} D & D \\ 3 & 0 \end{bmatrix} / \begin{bmatrix} Y & Y & Y \\ 2 & 0 & 0 \end{bmatrix} ' $
		State Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement Salary Candidate Name		001 Category/ Type	1500.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify)	1) po	SALARY
в.	Full Name (Last, First, Middle Initial) Gordy Hulten			Transaction ID: 70711.E2664 Date of Disbursement
	Mailing Address 2934 Stonecreek Blvd			$\begin{array}{c} \begin{array}{c} M & M \\ 0 & 6 \end{array} \\ \end{array} \begin{array}{c} \left(\begin{array}{c} D & D \\ 0 & 1 \end{array} \right) \end{array} \begin{array}{c} \left(\begin{array}{c} Y & Y & Y \\ 2 & 0 & 0 \end{array} \right) \end{array} \end{array}$
	Urbana	State Zip Code IL 61801-		Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement Salary Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	President	nent For: Primary General Other (specify) ▼		SALARY
с.	State: District: Full Name (Last, First, Middle Initial) Illinois Department of Rev			Transaction ID: 70711.E2691 Date of Disbursement
	Mailing Address Willard Ice Bldg. 101 West Jefferson			$ \begin{bmatrix} M & M \\ 0 & 4 \end{bmatrix} $ $ \begin{bmatrix} D & D \\ 3 & 0 \end{bmatrix} $ $ \begin{bmatrix} Y & Y & Y \\ 2 & 0 & 0 \end{bmatrix} $
		State Zip Code IL 62702-		Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes 001 Candidate Name Category/ Type		001	3.90 Refund or Disposal of Excess
				Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify) ▼		TAXES
9	JBTOTAL of Disbursements This Page (optional)		►	3003.90

SCHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE (check only			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21		
Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
Friends of Tim Johnson					
Full Name (Last, First, Middle Initial) A. Internal Revenue Service			Transaction ID: 70711.E2692 Date of Disbursement		
Mailing Address IRS			$\begin{bmatrix} M & M \\ 0 & 4 \end{bmatrix} \begin{pmatrix} D & D \\ 3 & 0 \end{pmatrix} \begin{pmatrix} Y & Y & Y \\ 2 & 0 & 0 \\ 7 \end{bmatrix}$		
Kansas City	StateZip CodeMO64999-0102		Amount of Each Disbursement this Period		
Purpose of Disbursement Taxes		1001	19.89		
Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
President	nent For: Primary General Other (specify) ▼		TAXES		
State: District:					
Full Name (Last, First, Middle Initial)B. Jupiters Pizza & Billards			Transaction ID: 70711.E2679 Date of Disbursement		
Mailing Address 39 Main Street			$\begin{array}{c} \begin{array}{c} M \\ 0 \\ 4 \end{array} \begin{array}{c} M \\ \end{array} \begin{array}{c} T \\ 0 \\ \end{array} \begin{array}{c} D \\ 1 \\ 0 \end{array} \begin{array}{c} D \\ 0 \\ \end{array} \begin{array}{c} T \\ 0 \\ \end{array} \begin{array}{c} T \\ 0 \\ \end{array} \begin{array}{c} T \\ T \\ 0 \\ \end{array} \begin{array}{c} T \\ T $		
Champaign I	State Zip Code L 61820-		Amount of Each Disbursement this Period		
Purpose of Disbursement Campaign Meeting		007	43.00 Refund or Disposal of Excess		
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	nent For: Primary General Other (specify) ▼		CAMPAIGN MEETING		
State: District:					
Full Name (Last, First, Middle Initial) C. Managed Tax Services			Transaction ID: 70711.E2669 Date of Disbursement		
Mailing Address 2501 Galen Dr			$\begin{array}{c} \begin{array}{c} M & M \\ 0 & 6 \end{array} & \begin{array}{c} \prime \\ \end{array} & \begin{array}{c} D \\ 1 & 9 \end{array} & \begin{array}{c} \rho \\ \end{array} & \begin{array}{c} \gamma \\ \end{array} & \begin{array}{c} Y \\ 2 & 0 & 0 \\ \end{array} & \begin{array}{c} \gamma \\ \gamma \end{array} \\ \end{array} $		
	State Zip Code L 61826-		Amount of Each Disbursement this Period		
Purpose of Disbursement Tax Service		001	575.00 Refund or Disposal of Excess		
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	nent For: Primary General Other (specify) ▼		TAX SERVICE		
SUBTOTAL of Disbursements This Page (optional)			637.89		
TOTAL This Period (last page this line number only)					

SCHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21
Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) Friends of Tim Johnson	<u></u>		
A. Depot Office Mailing Address 111 Convenience Center			Transaction ID: 70711.E2678 Date of Disbursement 04^{M} / 06^{O} / 2007^{Y}
Mailing Address 111 Convenience Center			
Champaign	State Zip Code IL 61820-		Amount of Each Disbursement this Period
Purpose of Disbursement Office Supplies Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify) ▼		OFFICE SUPPLIES
Full Name (Last, First, Middle Initial) B. ROYB PAC			Transaction ID: 70711.C7402IK Date of Disbursement
Mailing Address 209 Pennsylvania Ave, Sl	E		$\begin{bmatrix} M & M \\ 0 & 4 \end{bmatrix} \begin{bmatrix} I \\ 2 & 5 \end{bmatrix} \begin{bmatrix} I \\ 2 & 5 \end{bmatrix} \begin{bmatrix} I \\ 2 & 0 & 0 \end{bmatrix} \begin{bmatrix} I \\ 2 & 0 & 0 \end{bmatrix} \begin{bmatrix} I \\ 2 & 0 & 0 \end{bmatrix} \begin{bmatrix} I \\ 2 & 0 & 0 \end{bmatrix}$
	State Zip Code DC 20003-		Amount of Each Disbursement this Period 1875.60
Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼		IN KIND: AIRFARE
State: District: Full Name (Last, First, Middle Initial) C. Verizon Wireless			Transaction ID: 70711.E2685 Date of Disbursement
Mailing Address PO Box 6170			$\begin{bmatrix} M & M \\ 0 & 4 \end{bmatrix} \begin{pmatrix} D & D \\ 2 & 6 \end{pmatrix} \begin{pmatrix} Y & Y & Y \\ 2 & 0 & 0 & 7 \end{pmatrix}$
	State Zip Code IL 60197-		Amount of Each Disbursement this Period
Purpose of Disbursement Phone Service			150.00 Refund or Disposal of Excess
Candidate Name		001 Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify) ▼		PHONE SERVICE
SUBTOTAL of Disbursements This Page (optional)		►	2050.37
TOTAL This Period (last page this line number only)			

		Use seperate schedule(s)	FOR LINE (check only	NUMBER: PAGE 30 / 36
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
>	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
	Full Name (Last, First, Middle Initial) Verizon Wireless			Transaction ID: 70711.E2688 Date of Disbursement
	Mailing Address PO Box 6170			$ \begin{bmatrix} M & M \\ 0 & 4 \end{bmatrix} $
	Carol Stream	State Zip Code IL 60197-		Amount of Each Disbursement this Period
	Purpose of Disbursement Phone Service Candidate Name		001 Category/	181.91 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) V	Туре	PHONE SERVICE
•	Full Name (Last, First, Middle Initial) Verizon Wireless			Transaction ID: 70711.E2699 Date of Disbursement
	Mailing Address PO Box 6170			$ \begin{bmatrix} M & M \\ 0 & 5 \end{bmatrix} $
		State Zip Code IL 60197-		Amount of Each Disbursement this Period
	Purpose of Disbursement Phone Service Candidate Name		001 Category/ Type	175.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼		PHONE SERVICE
•	Full Name (Last, First, Middle Initial) Verizon Wireless			Transaction ID: 70711.E2698 Date of Disbursement
	Mailing Address PO Box 6170			$ \begin{array}{c} \begin{array}{c} M \\ 0 \\ 5 \end{array} \begin{array}{c} M \\ \end{array} \begin{array}{c} P \\ 2 \\ 4 \end{array} \begin{array}{c} P \\ 2 \\ 4 \end{array} \begin{array}{c} P \\ 2 \\ 2 \\ 0 \\ 0 \\ 7 \end{array} \begin{array}{c} Y \\ Y \\ 2 \\ 0 \\ 0 \\ 7 \end{array} \begin{array}{c} Y \\ Y \\ 2 \\ 0 \\ 0 \\ 7 \end{array} \right) $
		State Zip Code IL 60197-		Amount of Each Disbursement this Period
	Purpose of Disbursement Phone Service		001	150.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbursed Senate President State: District:	ment For: Primary General Other (specify) ▼		PHONE SERVICE
s	UBTOTAL of Disbursements This Page (optional)		►	506.91

S	CHEDULE B (FEC Form 3)		NUMBER: PAGE 31/36
		Use seperate schedule(s)	(check onl	
		Detailed Summary Page	1 r	X 17 18 19a 19b
		, ,		20a 20b 20c 21
	y Information copied from such Reports ar			
or	or commercial purposes, other than using	the name and address of any political	committee to so	licit contributions from such committee
\mathbb{N}	NAME OF COMMITTEE (In Full)			
/	Friends of Tim Johnson			
Ľ	Full Name (Last First Middle Initial)			
Α.	Full Name (Last, First, Middle Initial) Verizon Wireless			Transaction ID: 70711.E2667
	Venzon Wireless			Date of Disbursement
	Mailing Address PO Box 6170			06 ^M / 18 ^J / 2007 ^Y
	City	State Zip Code		Amount of Each Disbursement this Period
	Carol Stream	IL 60197-		(50.00)
	Purpose of Disbursement			150.00
	Phone Service		001	Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disbursement For:		PHONE SERVICE
	Senate	Primary General		
	President	Other (specify)		
	State: District:			
в.	Full Name (Last, First, Middle Initial)			Transaction ID: 70711.E2675
D.	Verizon Wireless			Date of Disbursement
	Mailing Address PO Box 6170			06 ^M / ^D 29 [/] ^Y ^Y ^Y ^Y ^Y
	FO BOX 6170			
	City	State Zip Code		Amount of Each Disbursement this Period
	Carol Stream	IL 60197-		
	Purpose of Disbursement			175.00
	Phone Service			Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disbursement For:		PHONE SERVICE
	Senate	Primary General		
	President	Other (specify)		
	State: District:			

SUBTOTAL of Disbursements This Page (optional)	▶	325.00
TOTAL This Period (last page this line number only)	►	11688.78
FEC Schedule B (Form 3) Rev. 02/2003		

mage#	27931	320528
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SCHEDIII E C (EEC Form 3)			PAGE 32/36
for		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) X 13a 13b
NAME OF COMMITTEE (In Full) Friends of Tim Johnson		Transac	tion ID: LS60831.C7050
LOAN SOURCE Full Name (Last, First, Mid	dle Initial)		ection:
Busey Bank			Primary General
Mailing Address 201 W. Main			 ✓ Other (specify) ▼ Primary
City Urbana	State IL ZIP Code		
Original Amount of Loan	Cumulative Payment To I	Date Balance	Outstanding at Close of This Period
100000.00		97500.00	2500.00
TERMS Date Incurred	Date Due	Interest Rate	e Secured:
M M D D Y Y Y Y	20080521		.25 _{% (apr)} X Yes No
List All Endorsers or Guarantors (if any) to Loa Full Name (Last, First, Middle Initial) Timothy V. Johnson	n Source	Name of Employer	
Mailing Address 413 Berringer Circle		Occupation	
City State Urbana IL	ZIP Code 61802-	Amount Guaranteed Outstanding:	2500.00
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional)			2500.00
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 3, Schedu	Ile D, for this line. If no Sche	dule D, carry forward to approp	raite line of Summary.

mage#	27931	320529
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				PAGE 33/36
SCHEDULE C (FEC Form 3) LOANS		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one) X 13a
NAME OF COMMITTEE (In Full) Friends of Tim Johnson				13b
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)			on ID: LS60831.C7052 tion:
Busey Bank				Primary General
Mailing Address 201 W. Main			x	Other (specify) ▼ mary
City Urbana	State IL ZIP Code	e 61801-		nary
Original Amount of Loan	Cumulative Payment To I	Date	Balance Ou	Itstanding at Close of This Period
40000.00		37470.42		2529.58
	Date Due		nterest Rate	Secured:
03 03 2000	20080521		10.2	5 % (apr) X Yes No
List All Endorsers or Guarantors (if any) to Los Full Name (Last, First, Middle Initial) Timothy Johnson	an Source	Name of Employer		
Mailing Address 413 Berringer Circle		Occupation Attorney Amount		
City State Urbana IL	ZIP Code 61802-	Guaranteed Outstanding:		2529.58
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)				2529.58
TOTALS This Period (last page in this line only)				5029.58
Carry outstanding balance only to LINE 3, Sched			d to appropra	

ImSG地版印刷版 C-1 LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page $\frac{34/36}{}$ of Schedule C

	Federal Election	Commission,	Washington,	D.C. 20463
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Name of Committee (in Full)	FEC IDENTIFICATION NUMBER			
Friends of Tim Johnson	Back Ref ID: LS60831.C7050	C00350421		
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)		
Full Name Busey Bank	1400	00.00 10.00 %		
Mailing Address 201 W. Main	Date Incurred or Established	05 21 2007		
City State Zip Code Urbana IL 61801-	Date Due	20080521		
A. Has loan been restructured? No X Yes	If yes, date originally incurred :	03 09 2000		
B. If line of credit, Amount of this Draw: 0.0	Total Outstanding balance :	2500.00		
C. Are other parties secondarily liable for the debt incurred?	be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: reaproperty, goods, negotiable instruments, certificates of depositions, accounts receivable, cash on deposit, or other similar	al estate, personal psit, chattel papers,	What is the value of this collateral? 150441.14 Does the lender have a perfected security		
E. Are any future contributions or future receipts of interest income, pledged as interest in it? X No Yes Collateral for the loan? X No Yes If yes, specify: 0.00				
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Location of account Main Street Bank & Trust				
Date account established:	Address: PO Box 4028			
	City, State, Zip: Champaign	IL 61824		
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.				
G. COMMITTEE TREASURER Typed Name Brian Kelly DATE Signature 10 04 2007				
H. Attach a signed copy of the loan agreement.				
 TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan. 				
AUTHORIZED REPRESENTATIVE		DATE		
Typed Name Wade Denby Signature Tit	tle Vice President	10 04 2007		
EC Schedule C-1 (Revised 1/2001)				

ImSGHEDULE C-1 LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page $\frac{35/36}{6}$ of Schedule C

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Name of Committee (in Full)	FEC IDENTIFICATION NUMBER			
Friends of Tim Johnson	Back Ref ID: LS60831.C7052	C00350421		
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)		
Full Name Busey Bank	1400	00.00 10.00 %		
Mailing Address				
201 W. Main	Date Incurred or Established	05 21 2007		
City State Zip Code Urbana IL 61801-	Date Due	20080521		
A. Has loan been restructured? No X Yes	If yes, date originally incurred :	03 09 2000		
B. If line of credit,	Total			
Amount of this Draw: 0.0	0 Outstanding balance :	2529.58		
C. Are other parties secondarily liable for the debt incurred?	be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: rea	al estate, personal	What is the value of this collateral?		
property, goods, negotiable instruments, certificates of depo stocks, accounts receivable, cash on deposit, or other simil		150441.14		
Certificates of Deposit		Does the lender have a perfected security interest in it?		
E. Are any future contributions or future receipts of interest income, pledged as What is the estimated value?				
collateral for the loan? X No Yes If yes, specify: 0.00				
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Location of account Main Street Bank & Trust				
Date account established:	Address: PO Box 4028			
10 01 1999	City, State, Zip: Champaign	IL 61824		
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.				
G. COMMITTEE TREASURER Typed Name Brian Kelly		DATE		
Typed Name Brian Kelly Signature		10 04 2007		
H. Attach a signed copy of the loan agreement.				
I. TO BE SIGNED BY THE LENDING INSTITUTION:				
 To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. 				
 II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. 				
III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.				
AUTHORIZED REPRESENTATIVE	DATE			
Typed Name Wade Denby Signature Tit	tle Vice President	10 04 2007		
EC Schedule C-1 (Revised 1/2001)				

	1		
DEBTS AND OBLIGATIONS		(Use separate	PAGE 36 / 36
		schedule(s) for each	FOR LINE NUMBER: (check only one) 9
		numbered line)	X 10
NAME OF COMMITTEE (In Full)			
Friends of Tim Johnson			
A. Full Name (Last, First, Middle Initial) of Debto Busey Bank	r or Creditor		Debt (Purpose): Ired Interest
		00071000	
Mailing Address 201 W. Main			
City State Urbana IL	ZIP Code 61801-		
	01001		
Outstanding Balance Beginning This Period		Tra	ansaction ID: LS70711.E2674
83.43			
Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of This Period
141.00	188.16		36.27
141.00	100.10		50.27
1) SUBTOTALS This Period This Page (optional).			36.27
2) TOTALS This Period (last page this line number	only)	. •	36.27
3) TOTALS OUTSTANDING LOANS from Sched	ule C (last page only)	. ▶	
		_	0 0 0 0 0 0
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page only)		