

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

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

Friends of Tim Johnson

ADDRESS (number and street) PO Box 17097

Check if different than previously reported. (ACC) Urbana IL 61820

2. FEC IDENTIFICATION NUMBER C00350421

CITY STATE ZIP CODE STATE DISTRICT

3. IS THIS REPORT X NEW (N) OR AMENDED (A) IL 15

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quaterly Report (Q1) Primary (12P) X General (12G) Runoff (12R)

July 15 Quaterly Report (Q2) Convention (12C) Special (12S)

October 15 Quaterly Report (Q3) Election on 1 1 0 5 2 0 0 2 in the State of IL

January 31 Year-End Report (YE)

(b) 12-Day PRE-Election Report for the:

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

July 31 Mid-Year Report (Non-election Year Only) (MY) General (30G) Runoff (30R) Special (30S)

Termination Report (TER) Election on in the State of

5. Covering Period 10 01 2002 through 10 16 2002

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 Jim Bray

Signature of Treasurer Electronically Filed by Jim Bray Date 10 16 2002

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 1/2001)

Page 2

Write or Type Committee Name

Friends of Tim Johnson

Report Covering the Period: From: <sup>M M</sup> 1 0 <sup>D J</sup> 0 1 <sup>Y Y Y Y</sup> 2 0 0 2 To: <sup>V V</sup> 1 0 <sup>U J</sup> 1 8 <sup>Y Y Y Y</sup> 2 0 0 2

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(a)).....	13650.00	482366.59
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	5244.33
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	13650.00	477122.26
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	15705.62	342804.93
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	6614.62
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	15705.62	336190.31
<b>8. Cash on Hand at Close of Reporting Period (from Line Z7).....</b>	<b>217537.75</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>355967.21</b>	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 1/2001)

Page 3

Write or Type Committee Name

Friends of Tim Jahnsan

Report Covering the Period: From: M M D J Y 1 0 0 1 2 0 0 2

To: V V U J Y 1 0 1 8 2 0 0 2

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).....	3775.00	
(ii) Unitemized.....	625.00	
(iii) TOTAL of contributions	4400.00	192248.00
from individuals..... ▶		
(b) Political Party Committees.....	0.00	3180.70
(c) Other Political Committees (such as PACS).....	9250.00	286937.89
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	13650.00	482366.59
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	0.00
<b>13. LOANS</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES</b> (Refunds, Rebates, etc.).....	0.00	6614.62
<b>15. OTHER RECEIPTS</b> (Dividends, Interest, etc.).....	0.00	0.00
<b>16. TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	13650.00	488981.21

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 1/2001)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	15705.62	342804.93
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(b) Of Loans Made or Guaranteed by the Candidate.....	0.00	211.79
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	211.79
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	325.00
(b) Political Party Committees.....	0.00	1200.00
(c) Other Political Committees (such as PACs).....	0.00	3719.33
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	5244.33
21. OTHER DISBURSEMENTS.....	150.00	2740.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) [ > ]	15855.62	351001.05

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	219743.37
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	13650.00
25. SUBTOTAL (add Line 23 and Line 24).....	233393.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	15855.62
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	217537.75

**SCHEDULE A  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 / 19	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial)  
Automotive Free International Trade PAC

Mailing Address  
(AFIT PAC) 1625 Prince St  
City State Zip Code  
Alexandria VA 22314

Date of Receipt  
M / D / Y Y Y Y  
10 / 11 / 2002

Amount of Each Receipt this Period  
1500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Receipt

Receipt For: 2002 Election Cycle-to-Date ▼  
Primary  General  Other (specify) ▼ 1500.00

Transaction ID: 1022200257C49881

Full Name (Last, First, Middle Initial)  
American Federation of State/Mun. Employ

Mailing Address  
AFL-CIO 1825 L St NW  
City State Zip Code  
Washington DC 20036

Date of Receipt  
M / D / Y Y Y Y  
10 / 18 / 2002

Amount of Each Receipt this Period  
1000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Receipt

Receipt For: 2002 Election Cycle-to-Date ▼  
Primary  General  Other (specify) ▼ 1000.00

Transaction ID: 1022200257C50142

Full Name (Last, First, Middle Initial)  
American Medical Association PAC

Mailing Address  
1101 Vermont Avenue, NW  
City State Zip Code  
Washington DC 20005

Date of Receipt  
M / D / Y Y Y Y  
10 / 11 / 2002

Amount of Each Receipt this Period  
5000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Receipt

Receipt For: 2002 Election Cycle-to-Date ▼  
Primary  General  Other (specify) ▼ 10000.00

Transaction ID: 1022200257C49883

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **7500.00**

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

**SCHEDULE A  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 / 19	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

**A. Engineers Political Education Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address  
1125 Seventeenth Street Northwest  
City State Zip Code  
Washington DC 20036-

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 16 / 2002

Amount of Each Receipt this Period  
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Receipt

Receipt For: 2002 Election Cycle-to-Date ▼  
Primary  General  Other (specify) ▼ 3000.00

Transaction ID: 1022200257C-50097

**B. John Deere PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address  
One John Deere Plaza  
City State Zip Code  
Moline IL 61265-

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 16 / 2002

Amount of Each Receipt this Period  
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Receipt

Receipt For: 2002 Election Cycle-to-Date ▼  
Primary  General  Other (specify) ▼ 1000.00

Transaction ID: 1022200257C-501511

**C. Marathon Oil Company Employees PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address  
539 S Main St  
City State Zip Code  
Findlay OH 45840-

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 11 / 2002

Amount of Each Receipt this Period  
250.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Receipt

Receipt For: 2002 Election Cycle-to-Date ▼  
Primary  General  Other (specify) ▼ 250.00

Transaction ID: 1022200257C-499713

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1250.00**

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

**SCHEDULE A  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 7 / 19
	<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 Jahnsan

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

Mailing Address  
1199 N Fairfax St Suite 801

City State Zip Code  
Alexandria VA 22314

Date of Receipt  
N M / D E / Y Y Y Y  
10 / 11 / 2002

Amount of Each Receipt this Period  
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Receipt

Receipt For: 2002 Election Cycle-to-Date ▼  
Primary X General  
Other (specify) ▼ 500.00

Transaction ID: 1022200257C496914

B.

C.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>9250.00</b>

**SCHEDULE A  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 8 / 19
	<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 Jahnsan

**A.** Full Name (Last, First, Middle Initial)  
Clint Atkins

Mailing Address  
1007 Galen Drive

City State Zip Code  
Champaign IL 61821-

Date of Receipt  
N M / D E / Y Y Y Y  
10 / 15 / 2002

Amount of Each Receipt this Period  
1000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
The Atkins Group Owner

Receipt For: 2002 Election Cycle-to-Date  
Primary  General  
Other (specify) ▼

Receipt  
1500.00

Transaction ID: 1022200257C50084

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

Mailing Address  
129 West Main Street

City State Zip Code  
Urbana IL 61801-

Date of Receipt  
N M / D E / Y Y Y Y  
10 / 15 / 2002

Amount of Each Receipt this Period  
350.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Johnson, Frank, Frederick & Wla Attorney

Receipt For: 2002 Election Cycle-to-Date  
Primary  General  
Other (specify) ▼

Receipt  
1629.00

Transaction ID: 1022200257C50078

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

Mailing Address  
P.O. Box 3759

City State Zip Code  
Champaign IL 61826-

Date of Receipt  
N M / D E / Y Y Y Y  
10 / 15 / 2002

Amount of Each Receipt this Period  
925.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Midland Corp. Executive

Receipt For: 2002 Election Cycle-to-Date  
Primary  General  
Other (specify) ▼

Receipt  
1100.00

Transaction ID: 1022200257C500410

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2275.00**

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



**SCHEDULE A  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 9 / 19
	<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 Jahnsan

Full Name (Last, First, Middle Initial)  
**A. Sreeman Prathipati**

Mailing Address  
23 Lake Shore Ct

City State Zip Code  
Danville IL 61832-1303

Date of Receipt  
N M / D E / Y Y Y Y  
10 / 15 / 2002

Amount of Each Receipt this Period  
500.00

FEC ID number of contributing federal political committee.

Name of Employer Self-employed Occupation  
Self-employed Doctor

Receipt For: 2002 Election Cycle-to-Date ▼  
Primary  General  Other (specify) ▼

1000.00

Transaction ID: 1022200257C-500617

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

Mailing Address  
PO Box 448

City State Zip Code  
Philo IL 61864-

Date of Receipt  
N M / D E / Y Y Y Y  
10 / 15 / 2002

Amount of Each Receipt this Period  
1000.00

FEC ID number of contributing federal political committee.

Name of Employer Self-employed Occupation  
Self-employed Realtor

Receipt For: 2002 Election Cycle-to-Date ▼  
Primary  General  Other (specify) ▼

1165.00

Transaction ID: 1022200257C-500618

**C.**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>3775.00</b>

**SCHEDULE B  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17 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 Jahnsan

Full Name (Last, First, Middle Initial) <b>A. Backstage Dining Cen</b>		Date of Disbursement 10 / 09 / 2002	
Mailing Address Lakeland College City State Zip Code Mattoon IL 61838-		Amount of Each Disbursement this Period 213.80	
Purpose of Disbursement EVENT EXPENSE		Category/ Type EVENT EXPENSE	
Candidate Name		Transaction ID: 1022200257E1303	
Office Sought: House Senate President	Disbursement For: Primary      General Other (specify) ▼		
State:            District:			

Full Name (Last, First, Middle Initial) <b>B. Jennifer Callahan</b>		Date of Disbursement 10 / 14 / 2002	
Mailing Address 811 Compton Ave. City State Zip Code Champaign IL 61822-		Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement FINANCE/SERVICES		Category/ Type FINANCE/SERVICES	
Candidate Name		Transaction ID: 1022200257E1311	
Office Sought: House Senate President	Disbursement For: Primary      General Other (specify) ▼		
State:            District:			

Full Name (Last, First, Middle Initial) <b>C. Cingular Wireless</b>		Date of Disbursement 10 / 09 / 2002	
Mailing Address PO Box 806D55 City State Zip Code Chicago IL 60680-8055		Amount of Each Disbursement this Period 218.29	
Purpose of Disbursement PHONE SERVICE		Category/ Type PHONE SERVICE	
Candidate Name		Transaction ID: 1022200257E1301	
Office Sought: House Senate President	Disbursement For: Primary      General Other (specify) ▼		
State:            District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>529.89</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17 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 Jahnsan

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement 10 / 03 / 2002	
Mailing Address 2001 Federal Way City Urbana State IL Zip Code 61801-		Amount of Each Disbursement this Period 15.83	
Purpose of Disbursement Candidate Name		Category/ Type	
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: 1022200257E1297	
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Hunting Tower</b>		Date of Disbursement 10 / 09 / 2002	
Mailing Address PO Box 140 City Champaign State IL Zip Code 61824-0140		Amount of Each Disbursement this Period 583.89	
Purpose of Disbursement OFFICE SPACE/RENT Candidate Name		Category/ Type	
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	OFFICE SPACE/RENT Transaction ID: 1022200257E1304	
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Kinkos</b>		Date of Disbursement 10 / 09 / 2002	
Mailing Address 505 S. Mattis City Champaign State IL Zip Code 61821-		Amount of Each Disbursement this Period 3.32	
Purpose of Disbursement PRINTING Candidate Name		Category/ Type	
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	PRINTING Transaction ID: 1022200257E1300	
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>582.63</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17 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 Jahnsan

Full Name (Last, First, Middle Initial) <b>A. McLaughlin &amp; Associates</b>		Date of Disbursement 10 <sup>M</sup> / 10 <sup>D</sup> / 2002 <sup>Y</sup>	
Mailing Address 919 Prince St City State Zip Code Alexandria VA 22314-		Amount of Each Disbursement this Period 12225.00	
Purpose of Disbursement POLLING		Category/ Type POLLING	
Candidate Name		Transaction ID: 1022200257E1307	
Office Sought: House Senate President	Disbursement For: Primary      General Other (specify) ▼		
State:            District:			

Full Name (Last, First, Middle Initial) <b>B. Personal Service</b>		Date of Disbursement 10 <sup>M</sup> / 14 <sup>D</sup> / 2002 <sup>Y</sup>	
Mailing Address 1129 S. Grand East City State Zip Code Springfield IL 62708-		Amount of Each Disbursement this Period 1659.16	
Purpose of Disbursement ADVERTISING		Category/ Type ADVERTISING	
Candidate Name		Transaction ID: 1022200257E1310	
Office Sought: House Senate President	Disbursement For: Primary      General Other (specify) ▼		
State:            District:			

Full Name (Last, First, Middle Initial) <b>C. U.S. Postmaster</b>		Date of Disbursement 10 <sup>M</sup> / 10 <sup>D</sup> / 2002 <sup>Y</sup>	
Mailing Address 2001 N. Mattis City State Zip Code Champaign IL 61821-		Amount of Each Disbursement this Period 222.00	
Purpose of Disbursement POSTAGE		Category/ Type POSTAGE	
Candidate Name		Transaction ID: 1022200257E1305	
Office Sought: House Senate President	Disbursement For: Primary      General Other (specify) ▼		
State:            District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>14106.16</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 19

<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 Jahnsan

Full Name (Last, First, Middle Initial)  
A. Upcase Printing

Date of Disbursement

10<sup>th</sup> : 09<sup>th</sup> : 2002

Mailing Address

714 S. 6th

City

Champaign

State

IL

Zip Code

61820-

Amount of Each Disbursement this Period

285.79

Purpose of Disbursement

PRINTING

Candidate Name

Category/  
Type

PRINTING

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Transaction ID: 102200257E1302

B.

C.

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

**285.79**

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

**15504.47**

**SCHEDULE C**

**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
 Friends of Tim Johnson

LOAN SOURCE Full Name (Last, First, Middle Initial)  
 Bank Illinois

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 100 W. University Avenue

City Champaign State IL ZIP Code 61820

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
01 06 2000	20030118	8.500 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Transaction ID: LS1015200017C2023

Full Name (Last, First, Middle Initial) Timothy Johnson	Name of Employer
--	------------------

Mailing Address 2151 County Road 1100N	Occupation Attorney
---	------------------------

City Sidney State IL ZIP Code 61877	Amount Guaranteed Outstanding: 100000.00
-------------------------------------	--

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:
---------------------	--------------------------------

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	<b>100000.00</b>
<b>TOTALS</b> This Period (last page in this line only) .....	▶	

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

**SCHEDULE C**

**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
 Friends of Tim Johnson

LOAN SOURCE Full Name (Last, First, Middle Initial)  
 Busey Bank

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 201 W. Main

City Urbana State IL ZIP Code 61801-

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	211.79	99788.21

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
01 24 2000	20030615	8.500 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Transaction ID: LS1015200017C2024

Full Name (Last, First, Middle Initial) Timothy V. Johnson	Name of Employer Johnson, Frank, Frederick & Wa
---	--

Mailing Address 2151 County Road 1100 N	Occupation Attorney
--	------------------------

City Sidney State IL ZIP Code 61677-	Amount Guaranteed Outstanding: 99788.21
--------------------------------------	--

Full Name (Last, First, Middle Initial)	Name of Employer
---	------------------

Mailing Address	Occupation
-----------------	------------

City State ZIP Code	Amount Guaranteed Outstanding:
---------------------	--------------------------------

Full Name (Last, First, Middle Initial)	Name of Employer
---	------------------

Mailing Address	Occupation
-----------------	------------

City State ZIP Code	Amount Guaranteed Outstanding:
---------------------	--------------------------------

Full Name (Last, First, Middle Initial)	Name of Employer
---	------------------

Mailing Address	Occupation
-----------------	------------

City State ZIP Code	Amount Guaranteed Outstanding:
---------------------	--------------------------------

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	99788.21
<b>TOTALS</b> This Period (last page in this line only) .....	▶	

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

**SCHEDULE C**

**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
 Friends of Tim Johnson

LOAN SOURCE Full Name (Last, First, Middle Initial)  
 Busey Bank

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 201 W. Main

City Urbana State IL ZIP Code 61801-

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40000.00	0.00	40000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
03 09 2000	20030615	8.500 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Transaction ID: LS1015200017C2036

Full Name (Last, First, Middle Initial)  
 Timothy Johnson

Name of Employer

Mailing Address  
 2151 County Road 1100N

Occupation  
 Attorney

City Sidney State IL ZIP Code 61877-

Amount Guaranteed Outstanding: 140000.00

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:

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	<b>40000.00</b>
<b>TOTALS</b> This Period (last page in this line only) .....	▶	

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



**SCHEDULE C**

**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
 Friends of Tim Johnson

LOAN SOURCE Full Name (Last, First, Middle Initial)  
 First State Bank of Monticello

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 201 West Main Street PO Box 260

City Monticello State IL ZIP Code 61856-

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
10 05 2000	20031005	7.000 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Transaction ID: LS102020002C2771

Full Name (Last, First, Middle Initial)  
 Timothy V. Johnson

Name of Employer

Mailing Address  
 21751 CR 1100N

Occupation

City Sidney State IL ZIP Code 61677-

Amount Guaranteed Outstanding: 100000.00

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:

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	<b>100000.00</b>
<b>TOTALS</b> This Period (last page in this line only) .....	▶	<b>339788.21</b>

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



