

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 SEP 29 A 5:41

1. NAME OF COMMITTEE (In full)

ADDRESS (number and street) Check if different than previously reported.

2. FEC IDENTIFICATION NUMBER

CITY, STATE and ZIP CODE

STATE/DISTRICT

3. IS THIS REPORT AN AMENDMENT?

YES NO

4. TYPE OF REPORT

- April 15 Quarterly Report Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
- July 15 Quarterly Report
- October 15 Quarterly Report Thirtieth day report following the General Election on _____ in the State of _____
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only) Termination Report

This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

| | COLUMN A This Period | COLUMN B Calendar Year-to-date |
|---|-------------------------|-----------------------------------|
| 5. Covering Period <u>03/02/2000</u> through <u>03/31/2000</u> | | |
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)) | 74,137.00 | 193,923.00 |
| (b) Total Contribution Refunds (From Line 20(d)) | | |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) | 74,137.00 | 193,923.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 195,932.05 | 448,045.21 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | | |
| (c) Net Operating Expenditures (Subtract Line 7(b) from 7(a)) | 195,932.05 | 448,045.21 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | 25,188.87 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 289,712.93 | |

For further information:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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

Signature of Treasurer

Date
5/28/2000

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

FEC FORM 3
(Revised 4/87)

Detailed Summary Page
of Receipts and Disbursements
(Page 2, FEC FORM 3)

| Name of Committee (in full) | Report Covering the Period: | |
|---|-------------------------------|-----------------------------------|
| | From: 03/02/2000 | To: 03/31/2000 |
| 1. RECEIPTS | Column A Total This Period | Column B Calendar Year-To-Date |
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (Use Schedule A) | 41,100.00 | |
| (ii) Unitemized | 18,537.00 | |
| (iii) Total of contributions from Individual | 59,637.00 | 167,923.00 |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PACs) | 14,500.00 | 36,000.00 |
| (d) The Candidate | | |
| (e) TOTAL CONTRIBUTIONS (other than loans (add 11(a)(iii), (b), (c) and (d))) | 74,137.00 | 193,923.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate | 90,000.00 | 240,000.00 |
| (b) All Other Loans | | |
| (c) TOTAL LOANS (add 13(a) and (b)) | 90,000.00 | 240,000.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | | |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | | |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) | 184,137.00 | 433,923.00 |
| II. DISBURSEMENTS | | |
| 17. OPERATING EXPENDITURES | 195,932.05 | 448,045.21 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate | | |
| (b) Of All Other Loans | | |
| (c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) | | |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PACs) | | |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) | | |
| 21. OTHER DISBURSEMENTS | | |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) | 195,932.05 | 448,045.21 |
| III. CASH SUMMARY | | |
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | | 56,983.92 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16) | | 184,137.00 |
| 25. SUBTOTAL (add Line 23 and Line 24) | | 221,120.92 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 18) | | 195,932.05 |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) | | 25,188.87 |

SCHEDULE A

ITEMIZED RECEIPTS

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

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)

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--------------------------------|-------------------------|------------------------------------|
| Bill Abbott 1009 Surrey Road Monticello, IL 61856 | Bill Abbott Chevrolet | 03/10/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation OWNER | | |
| | Aggregate Year-to-Date -> | 250.00 | |
| B. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Jim Allee P.O. Box 567 Mattoon, IL 61938-0567 | Self-employed | 03/13/2000 | 200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Wholesale lumber | | |
| | Aggregate Year-to-Date -> | 200.00 | |
| C. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Jim Allee P.O. Box 567 Mattoon, IL 61938-0567 | Self-employed | 03/13/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Wholesale lumber | | |
| | Aggregate Year-to-Date -> | 450.00 | |
| D. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Merrill Anderson Route 1, Box 440 Newman, IL 61942 | Self-employed | 03/03/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Auctioneer | | |
| | Aggregate Year-to-Date -> | 250.00 | |
| E. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| James Antonacci 3120 Victoria Drive Springfield, IL 62704- | Illinois National Bank | 03/17/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Banker | | |
| | Aggregate Year-to-Date -> | 1,000.00 | |
| F. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| J. Robert Barr 1144 Ashbury Avenue Evanston, IL 60202- | Requested Info | 03/26/2000 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | | |
| | Aggregate Year-to-Date -> | 500.00 | |
| G. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Daniel Bitton 3550 North Mc Aree Road Waukegan, IL 60087 | Requested Info | 03/07/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | | |
| | Aggregate Year-to-Date -> | 1,000.00 | |

SUBTOTAL of Receipts This Page (optional)

3,450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---------------------------------------|-------------------------|------------------------------------|
| Roy Block 110 Pleasant Drive, Box 425 Sidney, IL 61877 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Retired | 03/06/2000 | 750.00 |
| Aggregate Year-to-Date -> | | 750.00 | |
| B. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Roy Block 110 Pleasant Drive, Box 425 Sidney, IL 61877 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Retired | 03/10/2000 | 250.00 |
| Aggregate Year-to-Date -> | | 1,000.00 | |
| C. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Thomas Bolling 136 W. Merrill Ave Park Ridge, IL 60068- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Overland Bolling Company President | 03/27/2000 | 350.00 |
| Aggregate Year-to-Date -> | | 350.00 | |
| D. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Alex Calvert 201 South Center Clinton, IL 61727 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Calvert Funeral Homes Owner | 03/02/2000 | 400.00 |
| Aggregate Year-to-Date -> | | 400.00 | |
| E. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Ray Campo 3401 Lakeshore Drive Champaign, IL 61822 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Retired | 03/06/2000 | 500.00 |
| Aggregate Year-to-Date -> | | 500.00 | |
| F. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Howard Carroll 47 West Folk Street Chicago, IL 60605 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Carroll & Salm Attorney | 03/09/2000 | 250.00 |
| Aggregate Year-to-Date -> | | 250.00 | |
| G. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Shawn Coady 204 N. RL 54 Roberts, IL 60962- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Hicke Gas Owner | 03/28/2000 | 1,000.00 |
| Aggregate Year-to-Date -> | | 1,000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 3,500.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--|-------------------------|------------------------------------|
| Jason Combs 815 Mendota Drive Champaign, IL 61820- | Strategic Marketing & Mailing Occupation | 03/16/2000 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 500.00 | |
| Jack Drexler 5225 West Touhy Avenue Skokie, IL 60077 | Requested Info Occupation | 03/09/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 250.00 | |
| Bruce Ferry 217 S. 7th Street Springfield, IL 62701- | Ferry & Associates Occupation Architect | 03/17/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 1,000.00 | |
| Tom Fiedler 27 Green Croft Drive Champaign, IL 61821 | Melody Music Occupation Owner | 03/09/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 1,000.00 | |
| Kevin Flynn 676 N. Michigan Avenue Suite 4000 Chicago, IL 60611- | Requested Info Occupation | 03/17/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 1,000.00 | |
| Marcia Friedl 333 West Wellington Avenue Chicago, IL 60657 | Requested Info Occupation Not employed | 03/07/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 1,000.00 | |
| Herbert Gardner 433 Sherwood Road La Grange Park, IL 60526- | United Airlines Occupation Director of Govt. Affairs | 03/27/2000 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 250.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 5,000.00 |
| TOTAL This Period (last page this line number only) | |

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NAME OF COMMITTEE (In Full)

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--|-------------------------|------------------------------------|
| Mindy Garth 4305 Doverbrook Court Champaign, IL 61822- | Ryle & Co. Occupation VP | 03/16/2000 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 500.00 | |
| B. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Doris Grant 1205 Thomas Drive Champaign, IL 61821- | Retired Occupation Retired | 03/31/2000 | 700.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 700.00 | |
| C. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Fred Green 1806 Pleasant Street Urbana, IL 61801 | Retired Occupation Retired | 03/02/2000 | 10.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 260.00 | |
| D. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Jim Green 2206 Byrnebrook Champaign, IL 61821 | Self-employed Occupation Attorney | 03/10/2000 | 100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 450.00 | |
| E. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Michael Guthrie 16 Riva Ridge Lemont, IL 60439- | Requested Info Occupation | 03/17/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 1,000.00 | |
| F. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Tom Hagle 3831 Blanchan Avenue Brookfield, IL 60513 | Lyons Township High School, LA Occupation Office Assistant | 03/16/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 250.00 | |
| G. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Harry Hall RR 3, Box 127 Bloomington, IL 61704- | State of Illinois Occupation Liason | 03/16/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 250.00 | |

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|--|----------|
| SUBTOTAL of Receipts This Page (optional) | 2,810.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 5 OF 12
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|-------------------------------|---------------------------|------------------------------------|
| Jeff Hartman 505 South First Champaign, IL 61825 | JEM Apartments | 03/16/2000 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 500.00 |
| Michael R. Hartman Box 2972, Station A Champaign, IL 61825-2972 | JEM Apartments | 03/10/2000 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Owner | Aggregate Year-to-Date -> | 500.00 |
| John Healy 132 Triple Crown Ct. Wheaton, IL 60187- | Arrowhead Construction | 03/26/2000 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 500.00 |
| Michael Henneman 1001 Wilshire Court Champaign, IL 61821- | Henneman Raufaisen | 03/26/2000 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Architect | Aggregate Year-to-Date -> | 500.00 |
| Chris Hill 315 South County Road Palm Beach, FL 33480 | | 03/02/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Retired | Aggregate Year-to-Date -> | 1,000.00 |
| Manny Hoffman 920 West 175th Street Homewood, IL 60430 | | 03/09/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Insurance | Aggregate Year-to-Date -> | 250.00 |
| Dave Hood 1114 Sterling Drive Champaign, IL 61821 | Martin, Hood, Friese & Assoc. | 03/16/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Accountant | Aggregate Year-to-Date -> | 1,000.00 |

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--|---------------------------------------|--|
| Steven Jambois 423 West Willow Chicago, IL 60614 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Kralovec, Jambois & Schwartz Occupation Attorney | 03/09/2000 | 1,000.00 |
| Aggregate Year-to-Date -> | | 1,000.00 | |
| B. Full Name, Mailing Address and Zip Code Lacy Johnson 7351 Royal Oakland Drive Indianapolis, IN 46236 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Requested Info Occupation | Date (month, day, year) 03/09/2000 | Amount of Each Receipt this Period 1,000.00 |
| Aggregate Year-to-Date -> | | 1,000.00 | |
| C. Full Name, Mailing Address and Zip Code Ron Kiddoo 3407 South Persimmon Circle Urbana, IL 61801 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Cozad Asset Management Occupation Asset Management | Date (month, day, year) 03/07/2000 | Amount of Each Receipt this Period 250.00 |
| Aggregate Year-to-Date -> | | 250.00 | |
| D. Full Name, Mailing Address and Zip Code Jerry Kincaid 105 West Gillogly Newman, IL 61942 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Kincaid Farms Occupation Owner | Date (month, day, year) 03/10/2000 | Amount of Each Receipt this Period 500.00 |
| Aggregate Year-to-Date -> | | 500.00 | |
| E. Full Name, Mailing Address and Zip Code Jim Kleiss 505 S Niles Tuscola, IL 61953-1963 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Edward Jones Occupation Investment Banker | Date (month, day, year) 03/10/2000 | Amount of Each Receipt this Period 250.00 |
| Aggregate Year-to-Date -> | | 250.00 | |
| F. Full Name, Mailing Address and Zip Code Jim Kleiss 505 S Niles Tuscola, IL 61953-1963 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Edward Jones Occupation Investment Banker | Date (month, day, year) 03/16/2000 | Amount of Each Receipt this Period 100.00 |
| Aggregate Year-to-Date -> | | 350.00 | |
| G. Full Name, Mailing Address and Zip Code Gene Lamb 1408 Waverly Drive Champaign, IL 61821 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation Retired | Date (month, day, year) 03/28/2000 | Amount of Each Receipt this Period 1,000.00 |
| Aggregate Year-to-Date -> | | 1,000.00 | |

SUBTOTAL of Receipts This Page (optional)

4,100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 12
FOR LINE NUMBER 11(A)(1)

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NAME OF COMMITTEE (In Full)

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---|-------------------------|------------------------------------|
| Joe Lamb 3101 Glenhill Drive Champaign, IL 61821 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Champaign Asphalt Occupation Owner | 03/13/2000 | 1,000.00 |
| Aggregate Year-to-Date -> | | 1,000.00 | |
| Gene Lannery 208 West Curtis Road Savoy, IL 61874 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation Retired | 03/10/2000 | 200.00 |
| Aggregate Year-to-Date -> | | 399.00 | |
| Andrew Leppin 630 Lincoln Avenue Glenview, IL 60023 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Requested Info Occupation | 03/09/2000 | 250.00 |
| Aggregate Year-to-Date -> | | 250.00 | |
| John Maloney 135 West Main Street Urbana, IL 61801 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Maloney & Davis Occupation Attorney | 03/10/2000 | 250.00 |
| Aggregate Year-to-Date -> | | 250.00 | |
| Harrison McCown PO Box 258 Tuscola, IL 61953 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Self Occupation | 03/16/2000 | 350.00 |
| Aggregate Year-to-Date -> | | 350.00 | |
| Joseph McQuaid 9739 S. Harding Evergreen Park, IL 60805 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Requested Info Occupation | 03/17/2000 | 1,000.00 |
| Aggregate Year-to-Date -> | | 1,000.00 | |
| Martha Melman 20 Locust Road Winnetka, IL 60093 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation Homemaker | 03/09/2000 | 1,000.00 |
| Aggregate Year-to-Date -> | | 1,000.00 | |

SUBTOTAL of Receipts This Page (optional)

4,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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)

| | | | |
|---|---|--|---|
| A. Full Name, Mailing Address and Zip Code Brettan Miller 1600 West Bradley Champaign, IL 61820- | Name of Employer Miller and Miller | Date (month, day, year) 03/16/2000 | Amount of Each Receipt this Period 500.00 |
| | Occupation Realtor | Aggregate Year-to-Date -> 500.00 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| B. Full Name, Mailing Address and Zip Code Brettan Miller 1600 West Bradley Champaign, IL 61820- | Name of Employer Miller and Miller | Date (month, day, year) 03/16/2000 | Amount of Each Receipt this Period 500.00 |
| | Occupation Realtor | Aggregate Year-to-Date -> 1,000.00 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| C. Full Name, Mailing Address and Zip Code Steve Miller 11 East North Street Danville, IL 61832 | Name of Employer Self-employed | Date (month, day, year) 03/02/2000 | Amount of Each Receipt this Period 1,000.00 |
| | Occupation Attorney | Aggregate Year-to-Date -> 1,000.00 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| D. Full Name, Mailing Address and Zip Code William Mulliken 4316 North Keeler Avenue Chicago, IL 60641-2271 | Name of Employer ChemCentral Corporation | Date (month, day, year) 03/09/2000 | Amount of Each Receipt this Period 500.00 |
| | Occupation Vice President & General Couns | Aggregate Year-to-Date -> 750.00 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| E. Full Name, Mailing Address and Zip Code Anthony Novak 130 West Main Street Urbana, IL 61801 | Name of Employer | Date (month, day, year) 03/06/2000 | Amount of Each Receipt this Period 250.00 |
| | Occupation Attorney | Aggregate Year-to-Date -> 250.00 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| F. Full Name, Mailing Address and Zip Code Philip O'Connor 1318 W. George St Chicago, IL 60657- | Name of Employer Self | Date (month, day, year) 03/26/2000 | Amount of Each Receipt this Period 500.00 |
| | Occupation Physician | Aggregate Year-to-Date -> 500.00 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| G. Full Name, Mailing Address and Zip Code Stephen Pacey P.O. Box 1 Paxton, IL 60957- | Name of Employer State of Illinois | Date (month, day, year) 03/28/2000 | Amount of Each Receipt this Period 500.00 |
| | Occupation Circuit Judge | Aggregate Year-to-Date -> 500.00 | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |

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| SUBTOTAL of Receipts This Page (optional) | 3,750.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 9 OF 12
FOR LINE NUMBER 11(a)(i)

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)

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--|---------------------------|------------------------------------|
| Randy Patchett Rt. 1, P.O. Box 780 Marion, IL 62959 | Attorney | 03/02/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 250.00 |
| B. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Merle Perzee PO Box 195 Danforth, IL 60930 | State of Illinois Warehouse Manager | 03/13/2000 | 200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 400.00 |
| C. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Samuel Petersheim 405 E. Park Arthur, IL 61911- | Custom Marble Owner | 03/10/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 1,000.00 |
| D. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| John Piland 1313 E Wildwood Lane Mahomet, IL 61853 | Champaign County States Attorney | 03/06/2000 | 10.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 510.00 |
| E. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| John Piland 1313 E Wildwood Lane Mahomet, IL 61853 | Champaign County States Attorney | 03/06/2000 | 10.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 520.00 |
| F. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Bruce Ratcliffe 1200 West Union Street Champaign, IL 61821 | Attorney | 03/06/2000 | 10.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 110.00 |
| G. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Bruce Ratcliffe 1200 West Union Street Champaign, IL 61821 | Attorney | 03/16/2000 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 210.00 |

SUBTOTAL of Receipts This Page (optional)

1,560.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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)

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---------------------------------|---------------------------|------------------------------------|
| Scott Reichard 107 Meadow Drive Urbana, IL 61801 | CPA | 03/09/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 250.00 | |
| B. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Robert Runch 701 N. Main Saint Joseph, IL 61873- | Self-employed | 03/26/2000 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Day Care Provider | Aggregate Year-to-Date -> | 500.00 |
| C. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Al Kyle 2802 Cherry Hills Drive Champaign, IL 61821 | Ryle & Associates | 03/16/2000 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Owner | Aggregate Year-to-Date -> | 1,000.00 |
| D. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Lynn Ryle 8 Dunlap Court Savoy, IL 61874- | | 03/16/2000 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Homemaker | Aggregate Year-to-Date -> | 1,000.00 |
| E. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| George Savvas 212 West Springfield Avenue Champaign, IL 61820 | Self-employed | 03/10/2000 | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Physician | Aggregate Year-to-Date -> | 300.00 |
| F. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Peter Schmit P.O. Box 6417 Champaign, IL 61826 | Grandy's Restaurants | 03/13/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Owner | Aggregate Year-to-Date -> | 250.00 |
| G. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Michael Schens 2412 Cherry Hills Drive Champaign, IL 61821- | Integrated Benefits Group | 03/16/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Owner | Aggregate Year-to-Date -> | 250.00 |

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| SUBTOTAL of Receipts This Page (optional) | 3,550.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

One separate schedule(s) for each category of the Detailed Summary page

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 electoral purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---------------------------|------------------------------------|
| Hal Smith 1928 S. Glenwood Springfield, IL 62704- | Retired | 03/17/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 1,000.00 |
| B. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Betty Stewart 1004 Galen Drive Champaign, IL 61821 | Retired | 03/10/2000 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 500.00 |
| C. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Dean Stewart 1664 Galen Drive Champaign, IL 61821 | Retired | 03/10/2000 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 500.00 |
| D. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Leonard Tobey 507 Pilot Drive Herscher, IL 60941- | Tobey Construction | 03/13/2000 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 500.00 |
| E. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Peter Tracy 2016 Bentbrook Dr. Champaign, IL 61821-9204 | Champaign County Mental Health Administration | 03/13/2000 | 50.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 330.00 |
| F. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Stanley Vaughan 1152 East 1600 Road Monticello, IL 61856 | Retired | 03/06/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 250.00 |
| G. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Stanley Vaughan 1152 East 1600 Road Monticello, IL 61856 | Retired | 03/06/2000 | 10.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 260.00 |

SUBTOTAL of Receipts This Page (optional)

2,810.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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)

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---------------------------------------|-------------------------|------------------------------------|
| Wally Wax 1701 North Prairie Tuscola, IL 61953 | Self-employed Occupation Farmer | 03/06/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 250.00 | |
| B. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| George White 6329 Country Trails Rochester, IL 62563- | Requested Info Occupation | 03/17/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 1,000.00 | |
| C. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Thomas Wilmet 217 Smith Road Pittsford, NY 14534- | Real Estate Investor Occupation | 03/17/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | 1,000.00 | |
| D. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | / / | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | |
| E. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | / / | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | |
| F. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | / / | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | |
| G. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | / / | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | |

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| SUBTOTAL of Receipts This Page (optional) | 2,250.00 |
| TOTAL This Period (last page this line number only) | 41,100.00 |

SCHEDULE A

ITEMIZED RECEIPTS

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

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)

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|------------------|---------------------------|------------------------------------|
| ADM PAC PO Box 1470 Decatur, IL 62525- | | 03/16/2000 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 500.00 |
| B. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Judy Biggert For Congress PO Box 637 Hinsdale, IL 60522- | | 03/27/2000 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 1,000.00 |
| C. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| City Political Action Committee 1620 W. Diversy Pky Apt. 3C Chicago, IL 60614- | | 03/26/2000 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 1,000.00 |
| D. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Commonwealth Edison PAC PO Box 767 Chicago, IL 60690- | | 03/17/2000 | 3,500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 3,500.00 |
| E. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Engineers Political Education Committee 1125 Seventeenth Street Northwest Washington, DC 20036 | | 03/06/2000 | 2,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 2,000.00 |
| F. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Illinois Road Builder's Association PAC 500 Park Blvd. Suite 1250 Itasca, IL 60143- | | 03/03/2000 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 500.00 |
| G. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Local No. 150 PAC 6200 Joliet Road La Grange, IL 60525 | | 03/06/2000 | 3,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Aggregate Year-to-Date -> | 3,000.00 |

SUBTOTAL of Receipts This Page (optional)

11,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

| | |
|---|---|
| A. Full Name, Mailing Address and Zip Code Honorable John Shimkus Volunteers for Shimkus P.O. Box 5458 Springfield, IL 62705-5458 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00 |
| B. Full Name, Mailing Address and Zip Code Citizens For Ron Stephens PO Box 47 Troy, IL 62294- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation Date (month, day, year) 03/16/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00 |
| C. Full Name, Mailing Address and Zip Code Citizens For Art Tenhouse PO Box 77 Quincy, IL 62306-0077 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation Date (month, day, year) 03/16/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00 |
| D. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation Date (month, day, year) / / Amount of Each Receipt this Period Aggregate Year-to-Date -> |
| E. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation Date (month, day, year) / / Amount of Each Receipt this Period Aggregate Year-to-Date -> |
| F. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation Date (month, day, year) / / Amount of Each Receipt this Period Aggregate Year-to-Date -> |
| G. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation Date (month, day, year) / / Amount of Each Receipt this Period Aggregate Year-to-Date -> |

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional) | 3,000.00 |
| TOTAL This Period (last page this line number only) | 14,500.00 |

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

| | | | |
|---|---|--|--|
| <p>A. Full Name, Mailing Address and Zip Code Bussey Bank 201 W. Main Urbana, IL 61801</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p> | <p>Date (month, day, year) 03/02/2000</p> <p>190,000.00</p> | <p>Amount of Each Receipt this Period 90,000.00</p> |
| <p>B. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p> | <p>Date (month, day, year) / /</p> | <p>Amount of Each Receipt this Period</p> |
| <p>C. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p> | <p>Date (month, day, year) / /</p> | <p>Amount of Each Receipt this Period</p> |
| <p>D. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p> | <p>Date (month, day, year) / /</p> | <p>Amount of Each Receipt this Period</p> |
| <p>E. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p> | <p>Date (month, day, year) / /</p> | <p>Amount of Each Receipt this Period</p> |
| <p>F. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p> | <p>Date (month, day, year) / /</p> | <p>Amount of Each Receipt this Period</p> |
| <p>G. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -></p> | <p>Date (month, day, year) / /</p> | <p>Amount of Each Receipt this Period</p> |

| | |
|---|------------------|
| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>90,000.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p>90,000.00</p> |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 12
FOR LINE NUMBER 17

Any information reported 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)

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| AdvanceNet Inc. 100 Trade Center Champaign, IL 61820- | Contractual Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/30/2000 | 42.00 |
| Bank Illinois 100 W. University Avenue Champaign, IL 61820- | Bank Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/02/2000 | 13.75 |
| Bank Illinois 100 W. University Avenue Champaign, IL 61820- | Payroll Taxes, Bank Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/06/2000 | 15.00 |
| Bank Illinois 100 W. University Avenue Champaign, IL 61820- | Bank Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/07/2000 | 15.00 |
| Bank Illinois 100 W. University Avenue Champaign, IL 61820- | Payroll Taxes, Bank Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/09/2000 | 3,033.75 |
| Bank Illinois 100 W. University Avenue Champaign, IL 61820- | Bank Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/09/2000 | 15.00 |
| Bank Illinois 100 W. University Avenue Champaign, IL 61820- | Bank Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/16/2000 | 15.00 |

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| SUBTOTAL of Disbursements This Page (optional) | 3,149.50 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Beatty Televisual 1287 W. Wabash Springfield, IL 62704- | TV Dubs Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/02/2000 | 96.25 |
| Matt Bisbee 639 St. Andrews Circle Rantoul, IL 61866- | Services/Press Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/02/2000 | 775.48 |
| Matt Bisbee 639 St. Andrews Circle Rantoul, IL 61866- | Services/Press Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/14/2000 | 775.48 |
| Matt Bisbee 639 St. Andrews Circle Rantoul, IL 61866- | Services/Press Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/28/2000 | 775.48 |
| Central Waste Service PO Box 3069 Champaign, IL 61826- | Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/17/2000 | 20.00 |
| County Market 1619 S. Philo Rd. Urbana, IL 61801- | Fundraising Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/03/2000 | 46.40 |
| Dreamscape Design 1 Henson Place Champaign, IL 61820- | Printing, Layout Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/08/2000 | 1,180.00 |

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| SUBTOTAL of Disbursements This Page (optional) | 3,669.09 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

Any information compiled 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)

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Dreamscape Design 1 Henson Place Champaign, IL 61820- | Printing, Layout Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/10/2000 | 15,000.00 |
| Enzos Pizza Lincoln Square Mall Urbana, IL 61801- | Fundraising Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/03/2000 | 540.00 |
| Fasprint 39 E. Green Champaign, IL 61820- | Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/10/2000 | 258.00 |
| Fast Signs 313 N. Mattis Champaign, IL 61820- | Advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/08/2000 | 342.69 |
| Federal Express 2001 Federal Way Urbana, IL 61801- | Shipping Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/10/2000 | 12.75 |
| Federal Express 2001 Federal Way Urbana, IL 61801- | Mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/10/2000 | 38.31 |
| pennis Graff 177 Riverside Newport Beach, CA 92663 | Newspaper ads, radio ad, food for e Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/08/2000 | 8,120.00 |

SUBTOTAL of Disbursements This Page (optional)

24,311.75

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Brad Graven 2648 Village Green Aurora, IL 60504- | Services/Assistant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/02/2000 | 1,101.15 |
| Brad Graven 2648 Village Green Aurora, IL 60504- | Reimbursement/Travel Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/10/2000 | 122.19 |
| Brad Graven 2648 Village Green Aurora, IL 60504- | Services/Field Director Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/14/2000 | 1,101.15 |
| Brad Graven 2648 Village Green Aurora, IL 60504- | Services/Field Director Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/28/2000 | 1,101.15 |
| Groundswell Direct P.O. Box 218 Albert City, IA 50510- | Phone Calls Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/02/2000 | 1,474.00 |
| IL Dept. of Revenue Springfield, IL 62704- | Payroll Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/06/2000 | 301.98 |
| Insurance Providers 522 E. Champaign Rantoul, IL 61866- | Insurance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/30/2000 | 300.00 |

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| SUBTOTAL of Disbursements This Page (optional) | 5,501.62 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information reported 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)

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Doral Johnson 902 Crestwood Drive Urbana, IL 61801- | Reimbursement/Fundraising Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/02/2000 | 172.45 |
| Kevin Johnson 3608 State Route 9 Rankin, IL 60960- | Services/Assistant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/02/2000 | 591.10 |
| Kevin Johnson 3608 State Route 9 Rankin, IL 60960- | Services/Assistant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/14/2000 | 591.10 |
| Kevin Johnson 3608 State Route 9 Rankin, IL 60960- | Services/Assistant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/28/2000 | 591.10 |
| K-Mart 800 W. Bloomington Road Champaign, IL 61820- | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/17/2000 | 47.89 |
| Kankakee Daily Journ 8 Dearborn Square Kankakee, IL 60901- | Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/30/2000 | 170.00 |
| Pam Kinsey melange enterprises 500 N Dearborn suite 700 Chicago, IL 60610- | Contractual Service/Fund-raising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/08/2000 | 1,815.19 |

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| SUBTOTAL of Disbursements This Page (optional) | 3,976.83 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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)

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement Telephone | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|---------------------------------------|---|
| McLeod USA 2302 Fox Dr Champaign, IL 61820- | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/05/2000 | 828.20 |
| Full Name, Mailing Address and Zip Code Kathy Michael 110 Diane Lane PO Box 184 Lexington, IL 61753- | Purpose of Disbursement Reimbursement/Cell phone, travel ex | Date (month, day, year) 03/02/2000 | Amount of Each Disbursement This Period 1,000.00 |
| Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| Full Name, Mailing Address and Zip Code Kathy Michael 110 Diane Lane PO Box 184 Lexington, IL 61753- | Purpose of Disbursement Reimbursement/Cell phone, travel ex | Date (month, day, year) 03/06/2000 | Amount of Each Disbursement This Period 1,200.00 |
| Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| Full Name, Mailing Address and Zip Code Jerry Miner | Purpose of Disbursement Fund-raising | Date (month, day, year) 03/02/2000 | Amount of Each Disbursement This Period 50.00 |
| Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| Full Name, Mailing Address and Zip Code Jeanne Murray 905 Sunnycrest Drive Urbana, IL 61801- | Purpose of Disbursement Services/Administration | Date (month, day, year) 03/02/2000 | Amount of Each Disbursement This Period 775.48 |
| Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| Full Name, Mailing Address and Zip Code Jeanne Murray 905 Sunnycrest Drive Urbana, IL 61801- | Purpose of Disbursement Reimbursement/Office Supplies | Date (month, day, year) 03/16/2000 | Amount of Each Disbursement This Period 250.00 |
| Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| Full Name, Mailing Address and Zip Code Jeanne Murray 905 Sunnycrest Drive Urbana, IL 61801- | Purpose of Disbursement Services/Administration | Date (month, day, year) 03/16/2000 | Amount of Each Disbursement This Period 775.48 |
| Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |

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| SUBTOTAL of Disbursements This Page (optional) | 4,879.16 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Helen Myers 2305 E. Vermont Urbana, IL 61802- | Services/Musician Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/02/2000 | 100.00 |
| NAACP 310 E Bradley Champaign, IL 61820- | Event Ticket Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/09/2000 | 30.00 |
| Kara Nelson 1601 Golfview Rantoul, IL 61866- | Reimburse Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/18/2000 | 1,920.65 |
| News Gazette 15 Main Street Champaign, IL 61820- | Newspaper Ad Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/17/2000 | 4,947.80 |
| Ray Parkhurst 220 Arcadio Champaign, IL 61820- | Fund-raising Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/02/2000 | 50.00 |
| Personal Service 1129 S. Grand East PO Box 4586 Springfield, IL 62708- | Advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/17/2000 | 191.98 |
| Personal Service 1129 S. Grand East PO Box 4586 Springfield, IL 62708- | Advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/30/2000 | 19.37 |

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| SUBTOTAL of Disbursements This Page (optional) | 7,259.80 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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)

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Premier Technologies P.O. Box 14064 Newark, NJ 07198-0024 | Tax Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/30/2000 | 522.62 |
| Quill Corporation P.O. Box 94081 Palatine, IL 60094- | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/05/2000 | 878.48 |
| Quill Corporation P.O. Box 94081 Palatine, IL 60094- | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/08/2000 | 1,194.33 |
| Quill Corporation P.O. Box 94081 Palatine, IL 60094- | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/17/2000 | 233.74 |
| Radisson Hotels 10 Brickyard Drive Bloomington, IL 61701- | Fundraising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/03/2000 | 700.00 |
| Rick Orr Florist 122 N Walnut Champaign, IL 61820- | Fund-raising Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/08/2000 | 51.38 |
| Stamps Etc. | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/17/2000 | 182.50 |

SUBTOTAL of Disbursements This Page (optional)

3,763.05

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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| NAME OF COMMITTEE (In Full) | | | |
|--|--|---------------------------------------|---|
| Full Name, Mailing Address and Zip Code State of Illinois | Purpose of Disbursement Reimbursement/Phone Calls | Date (month, day, year) 03/03/2000 | Amount of Each Disbursement This Period 150.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Full Name, Mailing Address and Zip Code The Leader 115 East Ave. Ogden, IL 61059- | Purpose of Disbursement News Paper Ad | Date (month, day, year) 03/17/2000 | Amount of Each Disbursement This Period 200.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Full Name, Mailing Address and Zip Code The Other Guys | Purpose of Disbursement Fund-raising Expenses | Date (month, day, year) 03/17/2000 | Amount of Each Disbursement This Period 200.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Full Name, Mailing Address and Zip Code The Pantagraph 101 W. Washington Bloomington, IL 61701- | Purpose of Disbursement Newspaper Ad | Date (month, day, year) 03/02/2000 | Amount of Each Disbursement This Period 5,178.44 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Full Name, Mailing Address and Zip Code U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Purpose of Disbursement Postage | Date (month, day, year) 03/02/2000 | Amount of Each Disbursement This Period 3,000.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Full Name, Mailing Address and Zip Code U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Purpose of Disbursement Postage | Date (month, day, year) 03/02/2000 | Amount of Each Disbursement This Period 503.60 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Full Name, Mailing Address and Zip Code U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Purpose of Disbursement Postage | Date (month, day, year) 03/02/2000 | Amount of Each Disbursement This Period 1,393.41 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |

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| SUBTOTAL of Disbursements This Page (optional) | 10,625.45 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03/06/2000 | 950.78 |
| U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03/06/2000 | 6,863.85 |
| U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03/07/2000 | 1,115.20 |
| U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03/08/2000 | 386.19 |
| U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03/09/2000 | 1,568.93 |
| U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03/10/2000 | 436.99 |
| U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03/10/2000 | 495.00 |

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| SUBTOTAL of Disbursements This Page (optional) | 11,816.94 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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)

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/10/2000 | 330.00 |
| U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/10/2000 | 1,374.37 |
| U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/10/2000 | 1,356.06 |
| U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/13/2000 | 1,416.43 |
| U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/13/2000 | 8,500.00 |
| U.S. Postmaster 2001 N. Mattis Champaign, IL 61821- | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/17/2000 | 8,500.00 |
| Wilson Grand 429 N. Street Asaph Alexandria, VA 22314- | TV & Radio Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/06/2000 | 25,000.00 |

SUBTOTAL of Disbursements This Page (optional)

46,476.86

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the detailed summary page

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)

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Wilson Grand 429 N. Street Asaph Alexandria, VA 22314- | TV & Radio Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/09/2000 | 40,000.00 |
| Wilson Grand 429 N. Street Asaph Alexandria, VA 22314- | TV & Radio Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/17/2000 | 25,000.00 |
| Wirthlin Worldwide 1363 Beverly Road Mc Lean, VA 22101- | Polling Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/06/2000 | 5,500.00 |
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| SUBTOTAL of Disbursements This Page (optional) | 70,500.00 |
| TOTAL This Period (last page this line number only) | 195,932.05 |

SCHEDULE C

LOANS

| | | | |
|---|--|---|--|
| NAME OF COMMITTEE (In Full) | | | |
| A. Full Name, Mailing Address and ZIP Code of Loan Source Bank Illinois 100 W. University Avenue Champaign, IL 61820- | | Original Amount of Loan 50,000.00 | Balance Outstanding at Close of This Period 50,000.00 |
| Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| Term: Date Incurred <u>02/18/2000</u> Date Due <u>02/01/2001</u> Interest Rate <u>8.50</u> % (apr) Secured <u>YES</u> | | | |
| List All Endorsers or Guarantors (if any) to Item A | | | |
| Full Name, Mailing Address and Zip Code Timothy V. Johnson 2151 County Road 1100 N Sidney, IL 61877- | | Name of Employer Occupation Amount Guaranteed Outstanding: \$50.000000 | |
| Full Name, Mailing Address and Zip Code Timothy V. Johnson 2151 County Road 1100 N Sidney, IL 61877- | | Name of Employer Occupation Amount Guaranteed Outstanding: \$50.000000 | |
| Full Name, Mailing Address and Zip Code Timothy V. Johnson 2151 County Road 1100 N Sidney, IL 61877- | | Name of Employer Occupation Amount Guaranteed Outstanding: \$50.000000 | |

| | |
|---|-----------|
| SUBTOTAL This Period This Page (optional) | 50,000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE C

LOANS

| NAME OF COMMITTEE (In Full) | | | |
|---|---|----------------------------|---|
| 2. Full Name, Mailing Address and ZIP Code of Loan Source | Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| Busey Bank 201 W. Main Urbana, IL 61801- Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 190,000.00 | | 190,000.00 |
| Terms: Date Issued 01/24/2000 Date Due 12/10/2000 Interest Rate 8.50 % (apc) Secured YES | | | |
| List All Endorsers or Guarantors (if any) to Item 2 | | | |
| Full Name, Mailing Address and Zip Code Timothy V. Johnson 2151 County Road 1100 N Sidney, IL 61877- | Name of Employer Occupation Amount Guaranteed Outstanding: \$100.00000 | | |
| Full Name, Mailing Address and Zip Code Timothy V. Johnson 2151 County Road 1100 N Sidney, IL 61877- | Name of Employer Occupation Amount Guaranteed Outstanding: \$100.00000 | | |
| Full Name, Mailing Address and Zip Code Timothy V. Johnson 2151 County Road 1100 N Sidney, IL 61877- | Name of Employer Occupation Amount Guaranteed Outstanding: \$100.00000 | | |
| Full Name, Mailing Address and Zip Code Timothy V. Johnson 2151 County Road 1100 N Sidney, IL 61877- | Name of Employer Occupation Amount Guaranteed Outstanding: \$90.00000 | | |
| Full Name, Mailing Address and Zip Code Timothy V. Johnson 2151 County Road 1100 N Sidney, IL 61877- | Name of Employer Occupation Amount Guaranteed Outstanding: \$90.00000 | | |

| | |
|---|------------|
| SUBTOTAL This Period This Page (optional) | 190,000.00 |
| TOTAL This Period (last page this line number only) | 240,000.00 |

| | | | |
|---|--|---|---|
| NAME OF COMMITTEE (In Full) | | | |
| A. Full Name, Mailing Address and zip Code of Loan Source Busey Bank 201 W. Main Urbana, IL 61801- | | Original Amount of Loan 190,000.00 | Cumulative Payment To Date |
| Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | Balance Outstanding at close of this period 190,000.00 |
| Terms: Date Incurred <u>01/24/2000</u> Date Due <u>12/18/2000</u> Interest Rate <u>8.50</u> (per) Secured <u>YES</u> | | List All Endorsees or Guarantors (if any) to item 2 | |
| Full Name, Mailing Address and zip Code Timothy V. Johnson 2151 County Road 1100 N Sidney, IL 61877- | | Name of Employer Occupation Amount Guaranteed Outstanding: \$90,000.00 | |

| | |
|---|--|
| SUBTOTAL This Period This Page (optional) | |
| TOTAL This Period (last page this line number only) | |

DEBTS AND OBLIGATIONS
Excluding Loans

| NAME OF COMMITTEE (In Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|---|-----------------------------------|---------------------------|---|
| *Full Name, Mailing Address and Zip Code Dennis Graff 177 Riverside Newport Beach, CA 92663 | | 10,869.65 | | 10,869.65 |
| Nature of Debt (Purpose) Fund-raising Expenses | | | | |
| *Full Name, Mailing Address and Zip Code Kinkos 505 S. Mattis Champaign, IL 61821- | | 6,947.88 | | 6,947.88 |
| Nature of Debt (Purpose) Printing | | | | |
| *Full Name, Mailing Address and Zip Code Wirthlic Worldwide 1363 Beverly Road Mc Lean, VA 22101- | | 5,500.00 | | 5,500.00 |
| Nature of Debt (Purpose) Polling | | | | |
| *Full Name, Mailing Address and Zip Code Dreamscape Design 1 Henson Place Champaign, IL 61820- | | 17,876.71 | | 17,876.71 |
| Nature of Debt (Purpose) Printing, Layout | | | | |

| | |
|--|--|
| 1) SUBTOTAL This Period This Page (optional) | |
| 2) TOTAL This Period (last page this line number only) | |
| 3) TOTAL OUTSTANDING LOANS from schedule C (last page only) | |
| 4) ADD Please check carry forward to appropriate line of Summary Page (last page only) | |

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedules
for each numbered line)

| NAME OF COMMITTEE (In Full) | Outstanding Balance Beginning this period | Amount Incurred this Period | Payment this period | Outstanding Balance at Close of this Period |
|--|---|-----------------------------------|---------------------------|---|
| Full Name, Mailing Address and Zip Code Strategic Marketing 2602 1/2 N Mattis Avenue Champaign, IL 61822- | | 6,861.19 | | 6,861.19 |
| Nature of Debt (Purpose) Mailing Service | | | | |
| Full Name, Mailing Address and Zip Code Busey Bank 201 W. Main Urbana, IL 61801- | | 1,657.50 | | 1,657.50 |
| Nature of Debt (Purpose) Interest | | | | |

| | |
|---|------------|
| 1) SUBTOTAL this Period this page (optional) | |
| 2) TOTAL this Period (last page lists line number only) | 49,712.93 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | 240,000.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | 289,712.93 |

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

| | |
|---|---|
| <input checked="" type="checkbox"/> Hand Delivered | Date of Receipt 9/29/00 |
| <input type="checkbox"/> First Class Mail | POSTMARKED |
| <input type="checkbox"/> Registered/Certified Mail | POSTMARKED (R/C) |
| <input type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> Received from the House office of Records and Registration | Date of Receipt |
| <input type="checkbox"/> Received from the Senate Office of Public Records | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Postmarked _____ and/or Date of Receipt |
| <input type="checkbox"/> Electronic Filing | |
| CA | 9/29/00 |
| PREPARER | DATE PREPARED |