

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 SEP 29 A 5:42

1. NAME OF COMMITTEE (in full)

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

CITY, STATE and ZIP CODE

STATE/DISTRICT

2. FEC IDENTIFICATION NUMBER

3. IS THIS REPORT AN AMENDMENT?

YES NO

4. TYPE OF REPORT

April 15 Quarterly Report

Twelfth day report preceding _____
(Type of Election)

July 15 Quarterly Report

election on _____ in the State of _____

October 15 Quarterly Report

Thirtieth day report following the General Election on

January 31 Year End Report

_____ in the State of _____

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>04/01/2000</u> through <u>06/30/2000</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	201,342.98	395,265.98
(b) Total Contribution Refunds (From Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	201,342.98	395,265.98
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	103,734.79	551,780.00
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	103,734.79	551,780.00
8. Cash on Hand at Close of Reporting Period (from Line 27)	122,797.06	
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)	267,276.18	

For further information:
Federal Election Commission
999 E Street, NW
Washington, DC 20483
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 9/28/2000

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: 04/01/2000	To: 06/30/2000
I. 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)	47,835.00	
(ii) Unitemized	10,570.00	
(iii) Total of contributions from individual	58,505.00	218,428.00
(b) Political Party Committees	5,230.00	6,230.00
(c) Other Political Committees (such as PACs)	137,607.88	173,807.88
(d) The Candidate		
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	201,342.88	395,265.88
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate		240,000.00
(b) All Other Loans		
(c) TOTAL LOANS (add 13(a) and (b))		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)	201,342.88	635,265.88
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	103,734.79	551,780.00
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)	103,734.79	551,780.00
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		25,188.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		201,342.88
25. SUBTOTAL (add Line 23 and Line 24)		226,531.85
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 16)		103,734.79
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		122,797.06

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules 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
David Albin PO Box 200 Newman, IL 61942-	Farmer	06/28/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Dennis Andersh 4308 Curtis Meadow Drive Champaign, IL 61821	SAIC Executive Manager	05/30/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Dennis Andersh 4308 Curtis Meadow Drive Champaign, IL 61821	SAIC Executive Manager	05/30/2000	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	2,000.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sylvia Andersh 4308 Curtis Meadow Drive Champaign, IL 61821-	Requested Info	05/30/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	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
Clint Atkins 1007 Galen Drive Champaign, IL 61821	The Atkins Group	06/30/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Clint Atkins 1007 Galen Drive Champaign, IL 61821	The Atkins Group	06/30/2000	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	2,000.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Suzanne Atkins 1007 Galen Dr. Champaign, IL 61821-	Stonecreek Reality Office Manager	06/30/2000	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	

SUBTOTAL of Receipts This Page (optional)

6,000.00

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)

<p>A. Full Name, Mailing Address and Zip Code Suzanne Atkins 1007 Galen Dr. Champaign, IL 61821-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Stonecreek Reality</p> <p>Occupation Office Manager</p> <p>Aggregate Year-to-Date -> 2,000.00</p>	<p>Date (month, day, year) 06/30/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Delores Bachman 1209 Garden Lane Champaign, IL 61820-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Covenant Medical Center</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> 950.00</p>	<p>Date (month, day, year) 06/06/2000</p>	<p>Amount of Each Receipt this Period 950.00</p>
<p>C. Full Name, Mailing Address and Zip Code Dan Baechle 1815 Robert Drive Champaign, IL 61821</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer State of Illinois</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -> 100.00</p>	<p>Date (month, day, year) 04/13/2000</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>D. Full Name, Mailing Address and Zip Code Dan Baechle 1815 Robert Drive Champaign, IL 61821</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer State of Illinois</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -> 200.00</p>	<p>Date (month, day, year) 06/21/2000</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>E. Full Name, Mailing Address and Zip Code Dan Baechle 1815 Robert Drive Champaign, IL 61821</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer State of Illinois</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -> 300.00</p>	<p>Date (month, day, year) 06/30/2000</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>F. Full Name, Mailing Address and Zip Code Rex Bates 32 Sunset Rd. Bloomington, IL 61701-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> 1,000.00</p>	<p>Date (month, day, year) 06/27/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Daniel Bloomfield 2403 Lyndhurst Drive Champaign, IL 61820</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> 500.00</p>	<p>Date (month, day, year) 06/27/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>

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

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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
Craig Burkhardt 1635 Ruth Place Springfield, IL 62704-	Sorling, Northrup, Hanna Occupation Attorney	04/24/2000	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	100.00	
Craig Burkhardt 1635 Ruth Place Springfield, IL 62704-	Sorling, Northrup, Hanna Occupation Attorney	06/21/2000	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	300.00	
Lloyd Burling 4629 5520 S Rd. Saint Anne, IL 60964-	Farmer Occupation Farmer	06/28/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	250.00	
Mary Capel 8 Greencroft Drive Champaign, IL 61821	Retired Occupation Retired	06/30/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	1,000.00	
Michael Carragher 107 North Elm Street Champaign, IL 61820-	Michael's Catering Occupation Owner	06/21/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	500.00	
Todd Coady PO Box 98 Roberts, IL 60962-	Hicks Oil Occupation	06/21/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	1,000.00	
David Cole 306 Floral Park Drive Savoy, IL 61874-	Retired Occupation Retired	06/30/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	1,000.00	

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

SCHEDULE A

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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
Charles Collins 503 McGee Road Urbana, IL 61802	Collins Oil Co.	06/13/2000	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Owner		
	Aggregate Year-to-Date ->	600.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Coolley PO Box 303 Brockton, IL 61917-		06/28/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Auditor		
	Aggregate Year-to-Date ->	250.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Greg Cozad 2912 Robeson Park Drive Champaign, IL 61821	Cozad Asset Management	06/30/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Asset Management		
	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
Greg Crawford 113 South State Street Monticello, IL 61856-	C F & H Insurance	06/28/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	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
Robert Dooley 1004 G.E. Road Bloomington, IL 61704-	A.G. Edwards	06/21/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Investor		
	Aggregate Year-to-Date ->	250.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Van Dukeman 2 Greencroft Drive Champaign, IL 61821	BankIllinois	06/30/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Banker		
	Aggregate Year-to-Date ->	1,000.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ron Endsley 1841 Maynard Drive Champaign, IL 61821-	A.G. Edwards	06/27/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	250.00	

SUBTOTAL of Receipts This Page (optional)	2,600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 13
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
James Esworthy 19561 Vermilion West Road Ogden, IL 61859	Self-employed Occupation Farmer	06/06/2000	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	210.00	
B. Full Name, Mailing Address and Zip Code Matt Fejes 505 Dodson Drive West Urbana, IL 61802	Town & Country Catering Occupation Owner	06/06/2000	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	500.00	
C. Full Name, Mailing Address and Zip Code Susan Fejes 206 S. Cedar St Urbana, IL 61801-	Requested Info Occupation	06/06/2000	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	500.00	
D. Full Name, Mailing Address and Zip Code Michael Flanagan 6149 N. Claremont Chicago, IL 60659-	Requested Info Occupation Attorney	06/30/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	250.00	
E. Full Name, Mailing Address and Zip Code Leonard Flynn 53 Greencroft Drive Champaign, IL 61821	Flynn, Palmer & Tague Occupation Attorney	04/13/2000	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	250.00	
F. Full Name, Mailing Address and Zip Code Rudy Frasca 906 Airport Road Urbana, IL 61801-	Frasca International Occupation	06/28/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	1,000.00	
G. Full Name, Mailing Address and Zip Code Ronald Gidwitz 1260 N. Astor Chicago, IL 60610-	Salon 123, Inc. Occupation Chairman	04/13/2000	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	250.00	

SUBTOTAL of Receipts This Page (optional)	2,950.00
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
Boris Grant 1205 Thomas Drive Champaign, IL 61821- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Retired Aggregate Year-to-Date -> 950.00	06/06/2000	250.00
B. Full Name, Mailing Address and Zip Code R.O. Grant 1209 Garden Lane Champaign, IL 61820- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Requested Info Occupation Aggregate Year-to-Date -> 1,000.00	06/06/2000	1,000.00
C. Full Name, Mailing Address and Zip Code R.O. Grant 1209 Garden Lane Champaign, IL 61820- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Requested Info Occupation Aggregate Year-to-Date -> 2,000.00	06/06/2000	1,000.00
D. Full Name, Mailing Address and Zip Code Steve Grumish 2505 North Shore Drive Urbana, IL 61801- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Grumish & Lee Occupation Aggregate Year-to-Date -> 250.00	04/13/2000	250.00
E. Full Name, Mailing Address and Zip Code Tom Hagle 3831 Blanchard Avenue Brookfield, IL 60513 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Lyons Township High School, La Office Assistant Aggregate Year-to-Date -> 350.00	06/30/2000	100.00
F. Full Name, Mailing Address and Zip Code Jeff Hartman 505 South First Champaign, IL 61825 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	JSM Apartments Occupation Aggregate Year-to-Date -> 1,000.00	06/30/2000	500.00
G. Full Name, Mailing Address and Zip Code Michael R. Hartman Box 2972, Station A Champaign, IL 61825-2972 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	JSM Apartments Owner Aggregate Year-to-Date -> 1,500.00	06/30/2000	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

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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
Steve Hartman 790 W Grand Saint Joseph, IL 61873	JSM Apartments	06/30/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Property Management	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
Craig Hays 28 Greencroft Drive Champaign, IL 61821	C-U News Agency	06/30/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Jane Henneman 1001 Wilshire Court Champaign, IL 61821		06/28/2000	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	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Henneman 1001 Wilshire Court Champaign, IL 61821-	Henneman Rauffisen	06/28/2000	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Architect	Aggregate Year-to-Date -> 1,500.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mike Hosier 603 W. Green Champaign, IL 61820-	Champaign Telephone	06/23/2000	885.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Telephone Services	Aggregate Year-to-Date -> 885.00	IN-KIND
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Manfred Joast 6903 N. Latrobe Skokie, IL 60077-	Requested Info	05/05/2000	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
Jack Kammerer 1004 Page Drive Champaign, IL 61821-	Kammerer Properties	06/27/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Owner	Aggregate Year-to-Date -> 250.00	

SUBTOTAL of Receipts This Page (optional)	4,135.00
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
Phil Katsinas 1910 Bellamy Champaign, IL 61821 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Round Barn Steakhouse Occupation	05/05/2000	250.00
Aggregate Year-to-Date ->		250.00	
Phil Katsinas 1910 Bellamy Champaign, IL 61821 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Round Barn Steakhouse Occupation	05/05/2000	100.00
Aggregate Year-to-Date ->		350.00	
Bill Kampiners 1029 South 4th Springfield, IL 62703 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Illinois Healthcare Associatio Occupation	06/06/2000	250.00
Aggregate Year-to-Date ->		250.00	
Gordon Kinate 100 West Willow Fairbury, IL 61739- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Kinate & Associates Attorney	06/21/2000	250.00
Aggregate Year-to-Date ->		250.00	
Dave Kuhl 101 Greencroft Drive Champaign, IL 61821- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Busey Bank Banker	06/21/2000	250.00
Aggregate Year-to-Date ->		250.00	
Mr. Lee 2505 North Shore Drive Urbana, IL 61801- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Grunish & Lee Occupation	04/13/2000	250.00
Aggregate Year-to-Date ->		250.00	
James Leonard 1606 E. Golf Drive Mahomet, IL 61853- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Carle Clinic Physician	06/30/2000	300.00
Aggregate Year-to-Date ->		300.00	

SUBTOTAL of Receipts This Page (optional)	1,650.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such reports and statements may not be paid 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
Greg Lykins 1400 Waverly Drive Champaign, IL 61821	BankIllinois Occupation Company president	06/27/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	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
Barry MacLean 15330 Old School Rd. Libertyville, IL 60048-	Requested Info Occupation	06/13/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Brad Mathias 300 N Main Street Tuscola, IL 61953-	CompCare Occupation Chiropractic	06/21/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	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
Patrick McCann 9717 Days Farm Drive Vienna, VA 22182-	Wexler Group Occupation	06/30/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	250.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George McCoppin, Jr. P.O. Box 414 Thomasboro, IL 61878-	Requested Info Occupation	06/06/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	250.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Melman 20 Locust Road Winnetka, 60093	Lettuce Entertain You Enterpri Occupation Chairman	06/21/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	2,000.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
August Meyer 1408 S. Prospect Avenue Champaign, IL 61820-	Mid-West Television, Inc. Occupation	06/27/2000	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	

SUBTOTAL of Receipts This Page (optional)	4,500.00
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

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
Karen Meyer 1408 S. Prospect Avenue Champaign, IL 61820-	Mid-West Television, Inc. Occupation: Secretary	06/27/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	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
August C. Meyer, Jr. 1408 S. Prospect Avenue Champaign, IL 61820-	Mid-West Television, Inc. Occupation	06/27/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Mile Stones Midwest PO Box 555 Charleston, IL 61920-	Occupation	05/05/2000	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
Doug Mills 201 West Main Urbana, IL 61803	First Busey Corporation Occupation: Company president	06/21/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	250.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harley Newell 650 Newell Lane Danville, IL 61832-	Requested Info Occupation	05/05/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	250.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas O'Shaughnessy 104 Woodland Terrace Catlin, IL 61817-	Requested Info Occupation	06/30/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	250.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Painter 1001 S. Douglas Urbana, IL 61801-	University of Illinois Occupation: Law Professor	05/05/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	250.00	

SUBTOTAL of Receipts This Page (optional)

4,000.00

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
Leland Phipps 310 W Madison Paris, IL 61944-	Self-employed Occupation Physician	06/06/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	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
Robert Reardon 4 Northcrest Bloomington, IL 61701-	Retired	06/30/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	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
Bernie Robinson 51 Warwick Stone Way Great Falls, VA 22066-	Requested Info Occupation	06/30/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Joe Saban P.O. Box 1492 Champaign, IL 61824	Modern Electric Occupation	06/06/2000	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		300.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ed Scharlau 502 West Windsor Road Champaign, IL 61820	Busey Bank Occupation Banker	06/21/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		250.00
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Schroeder 915 Bonnie Brae River Forest, IL 60305-	Attorney Occupation	04/13/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		250.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bonnie Scott PO Box 466 Bethany, IL 61914-	Requested Info Occupation	06/30/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,000.00

SUBTOTAL of Receipts This Page (optional)

4,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Any information omitted 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
Michael Segal 275 N Michigan Avenue 20th Floor Chicago, IL 60611-	Occupation Attorney	05/05/2000	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
Ruth Shurtz 507 West Green Urbana, IL 61801	Occupation Homemaker	06/06/2000	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	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
Jack Spitz 53 Meadow Lane PO Box 195 Fisher, IL 61843-0195	Requested Info Occupation	05/30/2000	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	2,000.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Stark 1805 W. Washington Bloomington, IL 61701-	Stark Excavating Occupation President	06/28/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	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
Ron Steidinger 122 Walnut Forrest, IL 61741-	Forrest Redi-Mix, Inc. Occupation Owner	04/13/2000	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	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
King Sutton E 600 Court Street Paris, IL 61944-	Sutton & Sons Funeral Homes Occupation Funeral Director	06/06/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	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
Peter Tracy 2016 Bentbrook Dr. Champaign, IL 61821-9204	Champaign County Mental Health Occupation Administration	04/24/2000	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	430.00	

SUBTOTAL of Receipts This Page (optional)

4,000.00

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 purposes 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
Charlotte Wandell 305 S Duncan Champaign, IL 61821-	Homemaker	05/30/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	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
Jeff Wandell 305 Duncan Road Champaign, IL 61821	Owner	05/30/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Jim Weisiger 31 Montclair Road Urbana, IL 61801-5829	Real estate broker	05/30/2000	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	300.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Randy Witter 2010 Willemore Springfield, IL 62704	Executive	06/21/2000	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	300.00	
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 ->		

SUBTOTAL of Receipts This Page (optional)	2,400.00
TOTAL This Period (last page this line number only)	47,935.00

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
NRCC 320 First Street, SE Washington, DC 20003-		06/05/2000	33.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Blast Fax		
	Aggregate Year-to-Date ->	33.00	IN-KIND
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NRCC 320 First Street, SE Washington, DC 20003-		06/09/2000	33.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Blast Fax		
	Aggregate Year-to-Date ->	66.00	IN-KIND
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NRCC 320 First Street, SE Washington, DC 20003-		06/20/2000	33.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Blast Fax		
	Aggregate Year-to-Date ->	99.00	IN-KIND
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NRCC 320 First Street, SE Washington, DC 20003-		06/22/2000	33.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Blast Fax		
	Aggregate Year-to-Date ->	132.00	IN-KIND
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NRCC 320 First Street, SE Washington, DC 20003-		06/22/2000	98.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Blast Fax		
	Aggregate Year-to-Date ->	230.00	IN-KIND
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Republican National Committee 310 First Street, SE Washington, DC 20003-		06/30/2000	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	5,000.00	
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)	Occupation		
	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	5,230.00
TOTAL This Period (last page this line number only)	5,230.00

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)

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AHCA PAC 1201 L Street, N.H. Washington, DC 20005-		06/06/2000	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	
B. Full Name, Mailing Address and Zip Code Ameren PAC 607 E. Adams Street Springfield, IL 62739-		06/21/2000	800.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date -> 800.00	
C. Full Name, Mailing Address and Zip Code American Hospital Assoc PAC 325 Seventh Street, N.W. Washington, DC 20004-		06/27/2000	1,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date -> 1,500.00	
D. Full Name, Mailing Address and Zip Code American Renewal PAC PO Box 20210 Alexandria, VA 22320-		06/30/2000	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	
E. Full Name, Mailing Address and Zip Code Americans For A Republican Majority Tom Delay, Chairman 1155 21st Street N.W., Ste. 300 Washington, DC 20036-		04/24/2000	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date -> 5,000.00	
F. Full Name, Mailing Address and Zip Code Americans For A Republican Majority Tom Delay, Chairman 1155 21st Street N.W., Ste. 300 Washington, DC 20036-		04/24/2000	5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date -> 10,000.00	
G. Full Name, Mailing Address and Zip Code Arthur Anderson PAC 1666 K Street, N.W. Washington, DC 20006-		05/30/2000	2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date -> 2,500.00	

SUBTOTAL of Receipts This Page (optional)

16,800.00

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
Auction Market PAC 141 W. Jackson Blvd. Chicago, IL 60604-		06/30/2000	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date -> 2,000.00	
B. Full Name, Mailing Address and Zip Code Bank One Corporation PAC One First National Plaza Chicago, IL 60690-		05/11/2000	2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date -> 2,500.00	
C. Full Name, Mailing Address and Zip Code Build PAC Gerald Howard 1201 15th Street N.W. Washington, DC 20005-2800		06/13/2000	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date -> 5,000.00	
D. Full Name, Mailing Address and Zip Code CAT PAC 400 Capitol Mall Suite 1660 Sacramento, CA 95814-		06/30/2000	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date -> 2,000.00	
E. Full Name, Mailing Address and Zip Code Caterpillar Employees PAC 100 NE Adams Street Peoria, IL 61629-		06/30/2000	2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date -> 2,500.00	
F. Full Name, Mailing Address and Zip Code Chicago Mercantile Exchange PAC 30 S. Wacker Drive Chicago, IL 60606-		06/30/2000	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date -> 2,000.00	
G. Full Name, Mailing Address and Zip Code Citizens To Elect Tom Cross PO Box 399 Yorkville, IL 60560-		06/30/2000	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	

SUBTOTAL of Receipts This Page (optional)

17,000.00

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
Saxby Chambliss Common Sense Leadership Fund P.O. Box 15206 Washington, DC 20003-		04/06/2000	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	
B. Full Name, Mailing Address and Zip Code Commonwealth Edison PAC PO Box 767 Chicago, IL 60690-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		06/30/2000	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	
C. Full Name, Mailing Address and Zip Code Commonwealth Edison PAC PO Box 767 Chicago, IL 60690-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		06/30/2000	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	2,500.00	
D. Full Name, Mailing Address and Zip Code Community Bankers Association of IL PAC 901 Community Drive Springfield, IL 62703	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		04/06/2000	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	
E. Full Name, Mailing Address and Zip Code Community Bankers Association of IL PAC 901 Community Drive Springfield, IL 62703	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		06/27/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,500.00	
F. Full Name, Mailing Address and Zip Code Credit Union Legislative Action Council 805 Fifteenth Street, NW Suite 300 Washington, DC 20005-2207	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		06/21/2000	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	2,000.00	
G. Full Name, Mailing Address and Zip Code Duchossois Industries PAC 845 Larch Avenue Elmhurst, IL 60126	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		05/05/2000	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	2,000.00	

SUBTOTAL of Receipts This Page (optional)

9,000.00

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 Dynegy PAC 1000 Louisiana Suite 5800 Houston, TX 77002-5050	Name of Employer Occupation	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
B. Full Name, Mailing Address and Zip Code Citizens for Jim Edgar Committee PO Box 747 Savoy, IL 61874-	Name of Employer Occupation	Date (month, day, year) 06/21/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
C. Full Name, Mailing Address and Zip Code Engineers Political Education Committee 1125 Seventeenth Street Northwest Washington, DC 20036	Name of Employer Occupation	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period 2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 2,000.00		
D. Full Name, Mailing Address and Zip Code Citizens for Tom Ewing Committee P.O. Box 766 Pontiac, IL 61764-	Name of Employer Occupation	Date (month, day, year) 06/21/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
E. Full Name, Mailing Address and Zip Code Food Marketing Institute PAC 655 15th Street, NW Suite 700 Washington, DC 20005-5701	Name of Employer Occupation	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
F. Full Name, Mailing Address and Zip Code Fund For A Free Market America 613 S. Taylor Street Arlington, VA 22204	Name of Employer Occupation	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
G. Full Name, Mailing Address and Zip Code Hastert For Congress PO Box 625 Batavia, IL 60510-	Name of Employer Occupation	Date (month, day, year) 05/11/2000	Amount of Each Receipt this Period 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		

SUBTOTAL of Receipts This Page (optional)	8,000.00
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 Hastert For Congress PO Box 625 Batavia, IL 60510-	Name of Employer Date (month, day, year) 05/11/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Aggregate Year-to-Date -> 2,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
B. Full Name, Mailing Address and Zip Code House PAC 2700 Sanders Road Prospect Heights, IL 60070-	Name of Employer Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period 500.00
	Occupation Aggregate Year-to-Date -> 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
C. Full Name, Mailing Address and Zip Code John Deere PAC One John Deere Plaza Moline, IL 61265-	Name of Employer Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Aggregate Year-to-Date -> 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and Zip Code Keep Our Majority PAC P.O. Box 864 Washington, DC 20044-0864	Name of Employer Date (month, day, year) 05/30/2000	Amount of Each Receipt this Period 5,000.00
	Occupation Aggregate Year-to-Date -> 5,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and Zip Code Keep Our Majority PAC P.O. Box 864 Washington, DC 20044-0864	Name of Employer Date (month, day, year) 05/30/2000	Amount of Each Receipt this Period 5,000.00
	Occupation Aggregate Year-to-Date -> 10,000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and Zip Code Citizens for Ray Labrod Committee 3311 North Sterling Avenue Peoria, IL 61604-	Name of Employer Date (month, day, year) 06/21/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Aggregate Year-to-Date -> 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and Zip Code MAYPAC 611 Olive Street Saint Louis, MO 63101-	Name of Employer Date (month, day, year) 06/06/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Aggregate Year-to-Date -> 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

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

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules 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 Majority Leader Fund Honorable Dick Armye P.O. Box 995 Lewisville, TX 75067-	Name of Employer Occupation	Date (month, day, year) 04/06/2000	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 5,000.00		
B. Full Name, Mailing Address and Zip Code Majority Leader Fund Honorable Dick Armye P.O. Box 995 Lewisville, TX 75067-	Name of Employer Occupation	Date (month, day, year) 06/17/2000 Travel Expenses	Amount of Each Receipt this Period 957.98
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 5,957.98		IN-KIND
C. Full Name, Mailing Address and Zip Code Montgomery Watson Americas PAC 300 N. Lake Avenue Pasadena, CA 91109-7009	Name of Employer Occupation	Date (month, day, year) 05/11/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
D. Full Name, Mailing Address and Zip Code NAIFAPAC 1922 F Street, NW Washington, DC 20006-	Name of Employer Occupation	Date (month, day, year) 05/05/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
E. Full Name, Mailing Address and Zip Code NBA PAC 1201 16th Street, N.W., Suite 421 Washington, DC 20036-	Name of Employer Occupation	Date (month, day, year) 06/13/2000	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 5,000.00		
F. Full Name, Mailing Address and Zip Code NFIB Safe Trust PAC 1201 F Street, NW Suite 200 Washington, DC 20004-	Name of Employer Occupation	Date (month, day, year) 06/28/2000	Amount of Each Receipt this Period 3,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 3,000.00		
G. Full Name, Mailing Address and Zip Code NRA Political Victory Fund 11250 Waples Mill Road Fairfax, VA 22030-7400	Name of Employer Occupation	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		

SUBTOTAL of Receipts This Page (optional)	16,957.98
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)

<p>A. Full Name, Mailing Address and Zip Code National Assoc Of Convenience Stores PAC 1605 King Street Alexandria, VA 22314-2792 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -> 5,000.00</p>	<p>Date (month, day, year) 06/30/2000</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>B. Full Name, Mailing Address and Zip Code National Auto Dealers Assoc. PAC 6400 Westpark Drive Mc Lean, VA 22102- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -> 5,000.00</p>	<p>Date (month, day, year) 06/30/2000</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>C. Full Name, Mailing Address and Zip Code National Auto Dealers Assoc. PAC 6400 Westpark Drive Mc Lean, VA 22102- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -> 10,000.00</p>	<p>Date (month, day, year) 06/30/2000</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>D. Full Name, Mailing Address and Zip Code National Beer Wholesalers Assn PAC 1100 South Washington Street Alexandria, VA 22314-4494 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -> 2,500.00</p>	<p>Date (month, day, year) 04/13/2000</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>E. Full Name, Mailing Address and Zip Code National Beer Wholesalers Assn PAC 1100 South Washington Street Alexandria, VA 22314-4494 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -> 7,500.00</p>	<p>Date (month, day, year) 04/13/2000</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>F. Full Name, Mailing Address and Zip Code National Roofing Contractors PAC 255 W. Higgins Road Suite 600 Des Plaines, IL 60018-5607 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -> 500.00</p>	<p>Date (month, day, year) 06/30/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>G. Full Name, Mailing Address and Zip Code People for Gancke 521 E Locust Street 2nd Floor Des Moines, IA 50309- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -> 500.00</p>	<p>Date (month, day, year) 06/28/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>

SUBTOTAL of Receipts This Page (optional)

23,500.00

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
PepsiCo Concerned Citizens Fund PAC 700 Anderson Hill Road Purchase, NY 10577-		06/30/2000	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
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Philip Morris PAC 120 Park Avenue New York, NY 10017-		06/30/2000	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	2,000.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PricewaterhouseCoopers PAC 1900 K Street, NW Washington, DC 20006-		06/30/2000	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
Quakers OAT-PAC 321 N. Clark Street Suite 27-3 Chicago, IL 60604-9001		06/30/2000	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
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RJR PAC 1455 Pennsylvania Avenue, NW Suite 925 Washington, DC 20004-		06/30/2000	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
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROYB PAC PO Box 5412 Arlington, VA 22205-		06/30/2000	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	2,000.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Realtors PAC 430 N Michigan Avenue Chicago, IL 60611-		06/21/2000	5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	5,000.00

SUBTOTAL of Receipts This Page (optional)	12,000.00
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 10
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

<p>A. Full Name, Mailing Address and Zip Code Realtors PAC 430 N Michigan Avenue Chicago, IL 60611-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" 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) 06/21/2000</p> <p>Aggregate Year-to-Date -> 10,000.00</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Reform PAC PO Box 15283 Washington, DC 20003-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" 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) 06/30/2000</p> <p>Aggregate Year-to-Date -> 5,000.00</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Citizens for Representative Dale Righter P.O. Box 348 Charleston, IL 61920-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" 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) 04/13/2000</p> <p>Aggregate Year-to-Date -> 500.00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Rural Electric PAC 4301 Wilson Blvd. Arlington, VA 22203-1860</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" 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) 06/06/2000</p> <p>Aggregate Year-to-Date -> 1,500.00</p>	<p>Amount of Each Receipt this Period 1,500.00</p>
<p>E. Full Name, Mailing Address and Zip Code Dan Rutherford Campaign Committee 732 W. Madison Street Pontiac, IL 61764-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" 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) 06/21/2000</p> <p>Aggregate Year-to-Date -> 200.00</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>F. Full Name, Mailing Address and Zip Code SBC Communications PAC 175 E. Houston San Antonio, TX 78205-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" 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) 05/05/2000</p> <p>Aggregate Year-to-Date -> 2,500.00</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>G. Full Name, Mailing Address and Zip Code SBC Communications PAC 175 E. Houston San Antonio, TX 78205-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" 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) 06/30/2000</p> <p>Aggregate Year-to-Date -> 3,500.00</p>	<p>Amount of Each Receipt this Period 1,000.00</p>

SUBTOTAL of Receipts This Page (optional)

15,700.00

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 SMAC PAC PO Box 221230 Chantilly, VA 20152-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/30/2000	1,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,500.00
B. Full Name, Mailing Address and Zip Code Honorable John Shimkus Volunteers for Shimkus P.O. Box 5458 Springfield, IL 62705-5458	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/30/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,000.00
C. Full Name, Mailing Address and Zip Code Southwestern IL Industrial Assoc PAC 8824 Straube Lane Brighton, IL 62012-2203	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	04/13/2000	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		100.00
D. Full Name, Mailing Address and Zip Code Southwestern IL Industrial Assoc PAC 8824 Straube Lane Brighton, IL 62012-2203	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/13/2000	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		150.00
E. Full Name, Mailing Address and Zip Code US Chamber PAC 3615 H Street, NW Washington, DC 20062-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/30/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,000.00
F. Full Name, Mailing Address and Zip Code USTEAM PAC 100 West Putnam Avenue Greenwich, CT 06830-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/30/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	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
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	4,150.00
TOTAL This Period (last page this line number only)	137,607.98

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules 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 AdvanceNet Inc. 103 Trade Center Champaign, IL 61820-	Purpose of Disbursement Contractual Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/11/2000	Amount of Each Disbursement This Period 126.00
Full Name, Mailing Address and Zip Code Arthur-Graphic Clarion 113 E. Illinois PO Box 19	Purpose of Disbursement Subscriptions Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/15/2000	Amount of Each Disbursement This Period 22.00
Full Name, Mailing Address and Zip Code AT&T Cable 303 R. Fairlawn Urbana, IL 61801-	Purpose of Disbursement Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/15/2000	Amount of Each Disbursement This Period 113.47
Full Name, Mailing Address and Zip Code Bank Illinois 100 W. University Avenue Champaign, IL 61820-	Purpose of Disbursement Bank Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/02/2000	Amount of Each Disbursement This Period 56.75
Full Name, Mailing Address and Zip Code Bank Illinois 100 W. University Avenue Champaign, IL 61820-	Purpose of Disbursement Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/11/2000	Amount of Each Disbursement This Period 7,900.50
Full Name, Mailing Address and Zip Code Matt Bisbee 639 St. Andrews Circle Rantoul, IL 61866-	Purpose of Disbursement Services/Press Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 04/05/2000	Amount of Each Disbursement This Period 775.48
Full Name, Mailing Address and Zip Code Matt Bisbee 639 St. Andrews Circle Rantoul, IL 61866-	Purpose of Disbursement Services/Press Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 04/24/2000	Amount of Each Disbursement This Period 775.48

SUBTOTAL of Disbursements This Page (optional)	8,869.68
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 Services/Press	Date (month, day, year)	Amount of Each Disbursement This Period
Matt Bisbee 639 St. Andrews Circle Rantoul, IL 61866-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/02/2000	1,000.00
Matt Bisbee 639 St. Andrews Circle Rantoul, IL 61866-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/02/2000	775.48
Matt Bisbee 639 St. Andrews Circle Rantoul, IL 61866-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/11/2000	775.48
Matt Bisbee 639 St. Andrews Circle Rantoul, IL 61866-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/22/2000	1,000.00
Matt Bisbee 639 St. Andrews Circle Rantoul, IL 61866-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/2000	775.48
Matt Bisbee 639 St. Andrews Circle Rantoul, IL 61866-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/19/2000	775.48
Central Waste Service PO Box 3069 Champaign, IL 61826-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	20.40

SUBTOTAL of Disbursements This Page (optional)	5,122.32
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

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FOR LINE NUMBER
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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, unless they 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
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)	06/25/2000	40.00
Champaign Park Distr 706 Kenwood Champaign, IL 61820-	Booth Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/2000	15.00
Clinton Daily Journal Rt 54 West Clinton, IL 61727-	newspaper subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	59.65
County Star 101 E. Hugdon Tolono, IL 61880-	newspaper subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	20.00
Daily Leader 318 N Main Pontiac, IL 61764-	newspaper subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	70.00
Danville Commercial News 17W. North Danville, IL 61822-	newspaper subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/05/2000	104.25
Dreamscape Design 1 Henson Place Champaign, IL 61820-	Advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/05/2000	17,876.71

SUBTOTAL of Disbursements This Page (optional)	18,185.61
TOTAL This period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied from such reports and statements may not be valid 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
Dwight Star And Here 204 E. Chippewa PO Box 159 Dwight, IL 60420-	Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/2000	28.00
East Central Communications 1332 Harmon Drive Rantoul, IL 61866-	Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	156.00
Farmer City Journal 221 S. Main Farmer City, IL 61842-	Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	26.00
Federal Express 2001 Federal Way Urbana, IL 61801-	Shipping Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/05/2000	13.26
Federal Express 2001 Federal Way Urbana, IL 61801-	Shipping Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/2000	13.52
Gilman Star P.O. Box 7 Gilman, IL 60938-	Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	22.00
Dennis Graff 177 Riverside Newport Beach, CA 92663	Reimbursement/Fundraisin Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/03/2000	5,000.00

SUBTOTAL of Disbursements This Page (optional)	5,250.78
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/ Field Director Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/05/2000	1,101.15
Brad Graven 2648 Village Green Aurora, IL 60504-	Reimbursement/Gas Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/05/2000	541.57
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)	05/02/2000	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)	06/16/2000	1,599.00
GTE 2103 N Veterans Parkway Bloomington, IL 61704-	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/11/2000	895.95
Gregory Harman 8 Elmwood Fisher, IL 61843-	Internet Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/23/2000	400.00
Nike Rosier 603 W. Green Champaign, IL 61820-	Telephone Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/23/2000	885.00 IN KIND

SUBTOTAL of Disbursements This Page (optional)	6,523.82
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
Illinois Power P.O. Box 511 Decatur, IL 62525-	Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/05/2000	157.09
Illinois Power P.O. Box 511 Decatur, IL 62525-	Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/11/2000	139.32
Illinois Power P.O. Box 511 Decatur, IL 62525-	Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/2000	162.63
Illinois State University Normal, IL 61761-	Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	113.00
Independent News 302 Mill Street Suite 101 Georgetown, IL 61846-	Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	25.00
Jack Johnson 642 N Sangamon Gibson City, IL 60936-	Reimbursements/Travel Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/02/2000	2,802.68
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)	04/05/2000	591.10

SUBTOTAL of Disbursements This Page (optional)	3,990.82
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 Services/Assistant	Date (month, day, year)	Amount of Each Disbursement This Period
Kevin Johnson 3608 State Route 9 Rankin, IL 60960-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/24/2000	591.10
Kevin Johnson 3608 State Route 9 Rankin, IL 60960-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/11/2000	591.10
Kevin Johnson 3608 State Route 9 Rankin, IL 60960-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/22/2000	591.10
Kevin Johnson 3608 State Route 9 Rankin, IL 60960-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/05/2000	591.10
Kevin Johnson 3608 State Route 9 Rankin, IL 60960-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/19/2000	591.10
Kinkoa 505 S. Mattis Champaign, IL 61821-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/05/2000	6,947.88
Kinkoa 505 S. Mattis Champaign, IL 61821-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/11/2000	13,308.53

SUBTOTAL of Disbursements This Page (optional)	23,211.91
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 Rachael Leman 3303 Summerview Champaign, IL 61822-	Purpose of Disbursement Services/Administration Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/05/2000	Amount of Each Disbursement This Period 570.18
Full Name, Mailing Address and Zip Code Rachael Leman 3303 Summerview Champaign, IL 61822-	Purpose of Disbursement Reimbursement/Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/11/2000	Amount of Each Disbursement This Period 400.00
Full Name, Mailing Address and Zip Code Rachael Leman 3303 Summerview Champaign, IL 61822-	Purpose of Disbursement Services/Administration Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/19/2000	Amount of Each Disbursement This Period 570.18
Full Name, Mailing Address and Zip Code Joe Leventhal 115 D Street, SE Washington, DC 20003-	Purpose of Disbursement Contractual Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/19/2000	Amount of Each Disbursement This Period 250.00
Full Name, Mailing Address and Zip Code Mahomet Citizen 427 E. Main Mahomet, IL 61853-	Purpose of Disbursement Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/15/2000	Amount of Each Disbursement This Period 26.00
Full Name, Mailing Address and Zip Code Majority Leader Fund Honorable Dick Army P.O. Box 995 Lewisville, TX 75067-	Purpose of Disbursement Travel Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/17/2000	Amount of Each Disbursement This Period 957.98 IN KIND
Full Name, Mailing Address and Zip Code Annette Martin 1502 Golfview Drive Rantoul, IL 61866-	Purpose of Disbursement Reimbursement/Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/15/2000	Amount of Each Disbursement This Period 7.11

SUBTOTAL of Disbursements This Page (optional)	2,781.45
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

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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
MCI World Com 115 N Neil Champaign, IL 61820-	Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/15/2000	5.64
MCI World Com 115 N Neil Champaign, IL 61820-	Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/05/2000	6.02
Mcleod USA 2302 Fox Dr Champaign, IL 61820-	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/11/2000	1,732.09
Mcleod USA 2302 Fox Dr Champaign, IL 61820-	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/05/2000	443.69
Kathy Michael 110 Diane Lane PO Box 184 Lexington, IL 61753-	Reimbursement/Cell phone bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/05/2000	1,625.24
Mid America Club 200 E. Randolph Suite 8000 Chicago, IL 60601-	Fund-raising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/26/2000	1,913.81
Milford Herald News 18 Axel Milford, IL 60953-	Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/15/2000	19.00

SUBTOTAL of Disbursements This Page (optional)	5,745.49
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
News Gazette 15 Main Street Champaign, IL 61820-	Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/05/2000	\$1.90
NRCC 320 First Street, SE Washington, DC 20003-	Blast Fax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/05/2000	33.00 IN KIND
NRCC 320 First Street, SE Washington, DC 20003-	Blast Fax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/09/2000	33.00 IN KIND
NRCC 320 First Street, SE Washington, DC 20003-	Blast Fax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/20/2000	33.00 IN KIND
NRCC 320 First Street, SE Washington, DC 20003-	Blast Fax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/22/2000	33.00 IN KIND
NRCC 320 First Street, SE Washington, DC 20003-	Blast Fax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/22/2000	98.00 IN KIND
Office Depot 111 Convenience Center Champaign, IL 61820-	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/16/2000	13.96

SUBTOTAL of Disbursements This Page (optional)	325.86
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
Oscro Drug 107 W. Green Champaign, IL 61820-	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/21/2000	16.86
Paris Beacon News 218 N. Main Paris, IL 61944-	Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/2000	38.50
Piatt County Journal 118 E. Washington Monticello, IL 61856-	Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	14.50
Premier Technologies P.O. Box 14064 Newark, NJ 07198-0024	Fax Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/11/2000	515.89
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)	04/05/2000	105.13
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)	06/05/2000	448.87
Ridgeview Review PO Box 217 Carlock, IL 61725-	Newspaper Advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/05/2000	1,775.00

SUBTOTAL of Disbursements This Page (optional)	2,914.75
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

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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
Rogard's 214 S Walnut Champaign, IL 61820-	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/19/2000	22.53
Rose Heating 2207 E University Urbana, IL 61802-	Office Repair Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/11/2000	250.00
Sam's Club 915 W Marketview Drive Champaign, IL 61822-	Parade Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/29/2000	45.36
Sidell Reporter P.O. Box 475 Sidell, IL 61876-	Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	22.00
Simplified Computers 901 S Neil Champaign, IL 61820-	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/28/2000	107.50
Special Moments 804 Eastwood Center Mahomet, IL 61853-	Fundraising Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/11/2000	328.32
Charles Stephens 2609 Galen Drive Champaign, IL 61821-	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/02/2000	1,600.00

SUBTOTAL of Disbursements This Page (optional)	2,375.72
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
Charles Stephens 2609 Galen Drive Champaign, IL 61821-	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/11/2000	800.00
Charles Stephens 2609 Galen Drive Champaign, IL 61821-	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/11/2000	800.00
Strategic Marketing 2602 1/2 N Mattis Avenue Champaign, IL 61822-	Mailing Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/11/2000	2,440.36
Strategic Marketing 2602 1/2 N Mattis Avenue Champaign, IL 61822-	Mailing Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/2000	4,420.83
The Chronicle PO Box 190 Hoopston, IL 60942-	Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	45.00
The Pantagraph 301 W. Washington Bloomington, IL 61701-	Newspaper Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	47.25
The Times Republic PO Box 250 Wataeka, IL 60970-	Subscriptions Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/2000	57.50

SUBTOTAL of Disbursements This Page (optional)	8,610.94
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

See separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
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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 of I Alumni Associ 227 Illini Union Urbana, IL 61801-	Event Ticket Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/16/2000	21.00
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)	04/03/2000	350.53
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)	04/03/2000	57.00
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)	04/05/2000	66.00
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)	06/16/2000	99.00
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)	05/30/2000	3,700.00
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)	05/30/2000	5,500.00

SUBTOTAL of Disbursements This Page (optional)	9,801.53
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
Bart Witter	Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify):	06/05/2000	16.12
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify):	/ /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	16.12
TOTAL This Period (last page this line number only)	103,734.79

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	Cumulative Payment To Date	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)				
Terms: Date loaned 02/18/2000 term by 02/01/2001 Interest Rate 8.50 % (apr) Secured YES				
List all endorser 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: \$90.000000	[Hatched Area]	
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)	

NAME OF COMMITTEE (In Full)			
A. 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 Incurred <u>01/24/2000</u> DATE DUE <u>12/10/2000</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: \$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 LENDER (In Full)			
A. Full Name, Mailing Address and ZIP Code of Loan Source Busby Bank 201 W. Main Urbana, IL 61801- Secured: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original Amount of Loan 190,000.00	Cumulative Payment to Date	Balance Outstanding at Close of this Period 190,000.00
Terms: Date Incurred <u>01/24/2000</u> Date Due <u>12/10/2000</u> Interest Rate <u>8.50</u> % (Apr) Secured <u>YES</u>			
List all Endorsers or Guarantors (If any) on Item A			
Full Name, Mailing Address and Zip Code Timothy V. Johnson 2151 County Road 1103 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

(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 Dennis Greff 177 Riverside Newport Beach, CA 92663	10,869.65		5,000.00	5,869.65
Nature of Debt (Purpose) Reimbursement/Fundraising				
*Full Name, Mailing Address and Zip Code Bank Illinois 100 W. University Avenue Champaign, IL 61820-		2,915.98		2,915.98
Nature of Debt (Purpose) Interest				
*Full Name, Mailing Address and Zip Code Kirkos 505 S. Mattis Champaign, IL 61821-	6,947.88		6,947.88	
Nature of Debt (Purpose) Printing				
*Full Name, Mailing Address and Zip Code Wirthlin Worldwide 1363 Beverly Road Mc Lean, VA 22101-	5,500.00	7,400.00		12,900.00
Nature of Debt (Purpose) Polling				

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 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D
(Revised 3/80)

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 Dreamscape Design 1 Henson Place Champaign, IL 61820-	17,876.71		17,876.71	
Nature of Debt (Purpose) Advertising				
* Full Name, Mailing Address and Zip Code Strategic Marketing 2602 1/2 N Mattis Avenue Champaign, IL 61822-	6,861.19		2,440.36 4,420.83	
Nature of Debt (Purpose) Mailing Service				
* Full Name, Mailing Address and Zip Code Sussey Bank 201 N. Main Urbana, IL 61801-	1,657.50	3,008.05		4,665.55
Nature of Debt (Purpose) Interest				
* Full Name, Mailing Address and Zip Code Champaign Telephone 1300 S. Neil Champaign, IL 61820-		925.00		925.00
Nature of Debt (Purpose) Telephone System				

1) SUBTOTAL this period (this page optional)	
2) TOTAL This Period (last page this line number only)	27,276.18
3) TOTAL OUTSTANDING LOANS (from schedule D last page only)	240,000.00
4) ADD (stand stand carry forward to appropriate line of Summary Page (last page only)	267,276.18

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	
CR PREPARER	9/29/00 DATE PREPARED