

## FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

James Bray, Treasurer Friends of Tim Johnson P.O. Box 17097 Urbana, IL 61803

Identification Number:

C00350421

Reference:

12 Day Pre-General Report (10/1/00-10/18/00)

9 2001

Dear Mr. Bray:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule A of your report discloses a contribution(s) which appears to exceed the limits set forth in the Act (copies attached). You should examine all of your contributions to check for additional excessives. The Committee's procedures for processing contributions should also be reviewed.

An individual or a political committee other than a qualified multicandidate committee may not make a contribution to a candidate for federal office in excess of \$1,000 per election. A qualified multicandidate committee and all affiliated committees may not make a contribution(s) to a candidate for federal office in excess of \$5,000 per election. The term "contribution" includes any gift, subscription, loan, advance, or deposit of money or anything of value made by any person for the purpose of influencing any election for federal office. (2 U.S.C. §441a(a) and (f); 11 CFR §110.1(b), (e) and (k))

If the contribution(s) in question was not completely or correctly reported, you should amend your original report using the new or corrected information. If the contribution(s) exceeds the limits, you should either refund to the donor the amount in excess of \$1,000 or request a written redesignation and/or reattribution of the contribution(s) from the donor. All

refunds, redesignations, and reattributions must be made within sixty days of receipt of the contribution. Copies of refund checks and copies of letters reattributing or redesignating the contributions in question may be used to respond to this letter. Refunds are reported on Line 20 of the Detailed Summary Page and on a supporting Schedule B of the report covering the period in which they are made. Redesignations and reattributions are reported as memo entries on Schedule A of the report covering the period in which the authorization for the redesignation and/or reattribution is received. (11 CFR §104.8(d)(2), (3) and (4))

The acceptance of excessive contributions is a serious problem. Again, the committee's procedures for processing contributions should be examined and corrected in order to avoid this problem. Although the Commission may take further legal action, prompt action by you to refund or seek redesignation and/or reattribution of the excessive amount will be considered.

-Commission Regulations require the continuous reporting of all outstanding loans. This report omits the loan(s) itemized on your previous report(s). Please amend your report(s) to indicate the current status of the following loan(s): Bank of Illinois and Busey Bank. (11 CFR §§104.3(d) and 104.11)

-Commission Regulations require that a committee disclose the identification of all individuals who contribute in excess of \$200 in a calendar year. (11 CFR §104.3(a)(4)(i)) Identification for an individual is defined as the full name, mailing address, occupation and name of employer. (11 CFR §100.12) Your report discloses contributions from individuals for which the identification is not complete.

You must provide the missing information, or if you are unable to do so, you must demonstrate that "best efforts" have been used to obtain the information. To establish "best efforts," you must provide the Commission with a detailed description of your procedures for requesting the information. Establishing "best efforts" is a three-fold process.

First, your original solicitation must include a clear and conspicuous request for the contributor information and must inform the contributor of the requirements of federal law for the reporting of such information. (11 CFR §104.7(b)(1))

Second, if the information is not provided, you must make one follow-up,

stand alone effort to obtain this information, regardless of whether the contribution(s) was solicited or not. This effort must occur no later than 30 days after receipt of the contribution and may be in the form of a written request or an oral request documented in writing. (11 CFR § 104.7(b)(2)) The request must:

- clearly ask for the missing information, without soliciting a contribution;
- inform the contributor of the requirements of federal law for the reporting of such information, and
- if the request is written, include a pre-addressed post card or return envelope.

Third, if you receive contributor information after the contribution(s) has been reported, you shall either a) file with your next regularly scheduled report, an amended memo Schedule A listing all the contributions for which additional information was received; or b) file on or before your next regularly scheduled reporting date, amendments to the report(s) originally disclosing the contribution(s). (11 CFR §104.7(b)(4))

Please provide the missing information or a detailed description of your procedures for requesting the information. For more information on demonstrating "best efforts," please refer to the Campaign Guide.

-Your report indicates loan(s) of \$100,000, \$50,000 and \$90,000 owed to the Bank of Illinois and Busey Bank which were previously reported in the Amended July Quarterly Report for the 2000 Election Cycle. In your prior report, all required information regarding the loan(s) was provided. However, your current report fails to provide this information. With every report submitted, you must provide the date incurred, the original source and amount of the loan, the due date, the interest rate, the cumulative payment, and the outstanding balance. In addition, if there are any endorsers or guarantors, their mailing address along with the name of their employer and occupation must be disclosed. Please amend your report to include the due date. 11 CFR §§100.7(a)(1) and 104.3(d))

-Schedule C of your report fails to include information required by Commission Regulations. You must provide the date incurred, the original source and amount of the loan, the due date, the interest rate, the cumulative payment, and the outstanding balance. In addition, if there are any endorsers or guarantors, their mailing address along with the name of their employer and occupation must be disclosed. Please amend your report to include the due date. (11 CFR §§100.7(a)(1) and 104.3(d))

## PAGE 4 FRIENDS OF TIM JOHNSON

-Your report discloses a loan from a lending institution; however, you have not submitted a Schedule C-1 (copy attached) and a copy of the loan agreement. Please submit the missing documents. 11 CFR §104.3(d)(2)

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530 (at the prompt press 1, then press 2 to reach the Reports Analysis Division). My local number is (202) 694-1130.

Sincerely,

Kimberly Willis

Reports Analyst

Reports Analysis Division

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NAME OF COMMITTEE (in Full) Friends of Tim Johnson		·	
Full Name, Mailing Address, and ZIP Code Bill Ciscol.	Name of Employer Associated Beer Distribut-	Date (month, day, year) 10/18/2000	Amount of Each Receipt this Period 200.00
112 Tamansk Drive Springrisid : IL 52704	Occupation Executive		i
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Full Name, Mailing Address, and ZIP Code Cive Fairner 302 E Shewin Circle	Name of Employer Self-employed	Date (month, day, year) 10/10/2000	Amount of Each Receipt this Period 100,00
Urbana IL 61802- Receipt For: Primary X General	Occupation Alterney	<del></del>	
Other (specify) :	Appregate Year-to-Date > \$	350.00	1
Full Name, Mailing Address, and ZIP Code Jim Barham 211 Starage	Name of Employer	Date (month, day, year) 10/04/2000	Amount of Each Receipt this Penod 200.00
Chempagn tL 51820-	Occupation		
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Full Name, Mailing Address, and ZIP Code Mark Stolin 2409 N High Cross Road	Name of Employer Rogers Chevrolet	Date (month: day, year) 10/16/2000	Amount of Each Receipt this Period 1000.00
Urbens 4 IL 51802-9644	Cocupation Automobile dealer		
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Champaign IL 51821-  Receipt For: Primary X General	Occupation Attorney		
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11072 West Armory  Champaign IL 61821-  Receipt For: Primary X General	Occupation Altomay		
Receipt For: Primary X General Officer (specify):	Aggregate Year-to-Dale > \$	1250.00	1
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S05 Booth First  Champaign I. 61825  Receipt For V. Primary X. General	Occupation		
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SUBTOTALS of Receipts This Page (Optional)

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SCHEDULE A

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#### ITEMIZED RECEIPTS

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any information, capted from much reports and Statements may not be made or used by any person for the purpose of spliciting contributions or for connected purposes, other than using the name and address of any political consister to solicit contributions from such constitue. NAME OF COMMITTEE (In Full) Friends of Tim Johnson Date booth. Amount of Rach Name of Employer A. Pull Name, Kailing Address and Eip Code Receipt this day, year) Flynn, Palmer & Tague Leonard Flynn Period 53 Greencroft Drive 04/03/2000 250.00 Mag Occupation Champaign IL 61821 Attorney Printry X General Recuipt Port Aggregate Year-to-Date -> 250.00 \_\_\_Other (specify) Data (month, Amount of Each Name of Employer B. Full Rame, Meiling Address and Zip Code Receipt this day, year] Frasca International Rudy Frasca Period 06/28/2000 1,000.00 906 Airport Road Occupation Urbana IL 61801-Primary X General Receipt For: 1,000.00 Aggragate Year-to-Date -> Drhar (specify) Date (month, amount of Each Name of Employer C. Full Hame, Mailing Address and Min Code day. year) Receipt this United Airlines Rerbert Gardner Period 433 Sherwood Road 04/06/2000 250.00 desupation La Grange Park, IL 60526-Public Affairs X General Receipt For Trimmy Director Aggregate Tear-to-Date -> 250.00 Other (specify) Amount of Bach Date (month. D. Full Kame. Mailing Address and Min Code Hame of Employer Repeipt this day, year) Requested Info Ronald Gidwitz Period 04/03/2000 250.00 225 W: Wacker Dr. Suite 18.00 Decumation Chicago, IL 60606-Primary Receipt For: X General Aggregate Year-to-Date -> 250.00 ........ Other (specify) Amount of Rech Date menth, Name of Suplayer B. Full Mann, Meiling 144ress and Bip Code Receipt this day, year) Grumich & Lee Steve Grumiah **04/03/2000** 500.00 606 Park Lame Drive Occupation Champaign, IL 61920-Automotive Warehouse Primary George 1 Receipt For: Director 500.00 Aggregate Tear-to-Date -> Cher (specity) Amount of Nech bate mente, Name of Imployer P. Pall Home, Mailing Address and hip Code day, year) Repeipt this JSM Apartments Pariod Jeff Harrman 06/30/2000 500.00 505 9outh First Consupation | Champaign, IL 61625 Baceips For: X General Primary Aggregate Year-to-Date -> 1,000.00 Other (specify) Amount of Each Date month Name of Imployer G. Poll Hems. Heiling Address and Zip Code day, year) Mereipt this JSM Apartments Paziod Michael R. Hartman 06/30/2000 Box 2972 1.000.00 Cecupation station A Champaign, IL 61825-2972 Owner General Primary Receipt Port

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NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
Detai Shewart  1004.Galon Drive	Name of Employer Information Recuested	Daie (month, day, year) 08/22/2000	Amount of Each Receipt this Period 500.00
CHampakin IL 61821.  Receipt/For: Primary X General	Occupation Retired		
Other (specify):	Appregate Year-to-Date > \$	1000.00	<u> </u>
uli Name, Malling Address, and ZIP Code Jon Stavelt 807 La Set Drive	Name of Employer TRI Star	Date (month, dey, year) 07/27/2000	Amount of Each Receipt this Period 500.00
Champeign IL 61820	Cocupation Executive		
Receipt For. Primary X General	Aggregate Year-to-Date > \$	500.00	_
Cither (specify) : us Name, Malling Address, and ZIP Code	Name of Employer	Date (month)	Amount of Each
Kip Pope  P.O. Box 746	C & U Poster Advertising	day, year) 08/02/2000	Receipt this Period 1000.00
Chámicaican IL 61524-0746	Ciccupation		<b>!</b>
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Olher (specify):	Aggregate Year-to-Date > \$	2000.00	h 1 2 5 5 2 1
Full Name, Masing Address, and ZIP Code  E.J. Hynds  608 South James Street	Name of Employer English Brothers Co.	Dete (month, day, year) 06/16/2000	Amount of Each Receipt this Period 200,00
Champelon II 81821	Occupation Engineer/CEO		
Receipt Fign. Primary X General	Aggregate Year-to-Date > \$	200.00	- !
Other (specify):  Full Name, Mailing Address, and ZIP Code  E.J. Hynds  609 South James Street	Name of Employer English Brothers Co.	Date (month, day, year) 09/27/2000	Amount of Each Receipt this Period 200.00
Chempalgh IL 61921- Receipt Ept; 3- Primary X General	Occupation Engineer/CEO		]
Other (specify):	Aggregate Year-to-Date > \$	400.00	<u> </u>
Full Name: Mailing Address, and ZIP Code Rendy Paightt.  Rt. 1, P.O. Box 780	Name of Employer Information Requested	Date (month, day, year) 08/07/2000	Amount of Each Receipt this Period 250.00
Marton IL 52959- Receipt For: Primary X General	Occupation Attorney		
Other (spedily)	Aggregate Year-to-Date > 2	500.00	
Full Name, Mailing Address, and ZIP Code Nicole Storch	Name of Employer Information Requested	Dete (month: day, year) 06,412/2000	Amount of Each Receipt Itis Period 50.00
2211 North Berker Roed Champaign It 61821- Recipt Fari Primary X General	Occupation Retired		
Other (spedily)	Aggregate Year-to-Date > \$	250.00	1

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Full Name, Malling Address, and ZIP Code Betty Slewart	Name of Employer	Date (month, day, year) 10/03/2000	Amount of Sect Receipt this Period 480.00
1004 Galen Drive	Cocupetion		
Receipt For Primary X General Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Batting Address, and ZIP Code Ray Block 110 Pleasant Drive, Box 425	Name of Employer	Date (month, day, year) 10/06/2000	Amount of Each Receipt this Peri 200.00
Sidney   IL 61877-	Occupation		
Receipt For region Primary X General	Refired Aggregate Year-to-Dake > \$	1200.00	
Full Name, Mailing Address, and ZIP Code Marvin Parzee  1487 E 2500 North Road	Name of Employer Timberlawn Form	Dete (month: day: year) 10/14/2000	Amount of Eac Receipt this Per 100.00
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Full Name, Mailing Address, and ZiP Code James Avers 114 S Charter Street	Name of Employer Shorkwiler, Ayers & Rhoad- es	Date (month, day, year) 10/04/2000	Amount of Ear Receipt this Per 200.00
Montrello IL 81858-  Receipt For: Primary X General	Decupation Attorney		
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Full Name, Malling Address, and ZIP Code Jan Stewart	Name of Employer TRI Star	Dete (month, day, year) 10/04/2000	Amount of Ea Receipt this Pe 1000 00
807 La Sel Drive Crismpaign   L 51820-	Occupation		
Receipt For Primary X General	Executive Aggregate Year-to-Date > \$	1500.00	_

Name of Employer

Occupation

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Big R Stores

Retail Sales

Aggregata Year-to-Date > \$

Date (month.

day, year)

10/10/2000

440.00

Amount of Each

Receipt this Period

40.00



Full Name, Malling Address, and ZIP Code

Primary

60970-

X General

Jerry Gibbs

Other (specify)

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Receipt For:

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113 S. Loveridge Lane

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### SCHEDULE C-1 Federal Election Commission Washington, D.C. 20463

Supplementary for	Information
found on Page	of Schedule C

# LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

NAME OF COMMITTEE (IN FULL)	FEC IDENTIFICATION NUMBER	
FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER)	AMOUNT OF LOAN	NYEREST NATE (APR)
	DATE INCURRED OR ESTABLISHED	DATE DUË
A. Has loan been restructured? No Yes if yes, date orig		
B. If line of credit, amount of this draw:; total outstant	ding balance:	
C. Are other parties secondarily liable for the debt incurred?  No Yes (Endorsers and guarantors must be reported on So		
D. Are any of the following piedged as collateral for the loan: real estate certificates of deposit, chattet papers, stocks, accounts receivable, cash  No Yes If yes, specify:	n on deposit, or other similar tradition	able instruments, nal collateral?
What is the value of this collateral?		<del></del> _
Does the lender have a perfected security interest in it?	o Yes	
E. Are any future contributions or future receipts of interest income, pl		
No Yes If yes, specify:	What is the estimated value	o?
A depository account must be established pursuant to 11 CFR 100.7	(b)(11)(i)(B) and 100.8(b)(12)(i)(B)	, Date account
established:Location of account:		dean pot agriol or
F. If neither of the types of collateral described above was pledged for exceed the loan amount, state the basis upon which this loan was made	this loan, or it the amount pleaged ( ie and the basis on which it assure:	repayment.
G. COMMITTEE TREASURER	<u>"</u>	DATE
TYPED NAME SIGNATURE		
H. Attach a signed copy of the loan agreement.		
I. TO BE SIGNED BY THE LENDING INSTITUTION:  I. To the best of this institution's knowledge, the terms of the loan the loan are accurate as stated above.		
11. The loan was made on terms and conditions (including interest imposed for similar extensions of credit to other borrowers of compar	radia credit worminess.	
III. This institution is aware of the requirement that a loan must be complied with the requirements set forth at 11 CFR 100.7(b)(11) and	made on a basis which assures re	payment, and has
ALITHORIZED REPRESENTATIVE TITLE		DATE
TYPED NAME SIGNATURE	<u> </u>	12/9