

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) **PO Box 17087**
 Check if different than previously reported. (ACC) **Urbana** **IL** **61820**

2. **FEC IDENTIFICATION NUMBER** **C00350421**
CITY **STATE** **ZIP CODE**
STATE **DISTRICT**
 3. **IS THIS REPORT** **NEW (N)** **OR** **X** **AMENDED (A)**
IL **15**

4. **TYPE OF REPORT** (Choose One)
 (a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
 Election on _____ In the State of _____
 (c) 30-Day **POST-Election** Report for the:
 X General (30G) Runoff (30R) Special (30S)
 Election on 11 05 2002 in the State of IL

5. Covering Period 10 17 2002 through 11 25 2002

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jim Bray

Signature of Treasurer Electronically Filed by Jim Bray Date 04 15 2003

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

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Friends of Tim Johnson

Report Covering the Period: From: ^M ^M ^Y ^Y ^V ^V To: ^Y ^M ^Y ^Y ^V ^V
 1 0 1 7 2 0 0 2 1 1 2 5 2 0 0 2

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a)).....	41529.49	515768.99
(b) Total Contribution Refunds (from Line 20(d)).....	4000.00	9244.33
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	37529.49	506524.66
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	94442.85	420170.12
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	6614.62
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	94442.85	413555.50
8. Cash on Hand at Close of Reporting Period (from Line 27).....	133774.39	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	339576.42	

For further information contact:

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

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

**POST-ELECTION DETAILED
SUMMARY PAGE**

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Report of Receipts and Disbursements

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. If the candidate participated in the general election, use this form for the 30-day Post-General report.

. If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Friends of Tim Johnson

Report Covering the Period: From: M M D D Y Y Y Y To: M M D D Y Y Y Y
 1 0 1 7 2 0 0 2 1 1 2 5 2 0 0 2

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of	COLUMN C Total for
Text CONTRIBUTIONS (other than loans) FROM:	M M J J Y Y Y Y 1 1 0 5 2 0 0 2 (date of general election)	M M D D Y Y Y Y 1 1 0 6 2 0 0 2 (date after general election)
(a) Individuals/Persons Other than Political Committees		through
(i) Itemized (Use Schedule A)		M M D D Y Y Y Y 1 1 2 5 2 0 0 2 (last day of reporting period)
20275.00		
(ii) Unitemized		
2101.00		
(iii) Total of contributions from Individuals		
22376.00	209723.00	4901.00
(b) Political Party Committees		
292.13	3608.10	100.00
(c) Other Political Committees		
16661.36	302437.89	3361.36

**POST-ELECTION DETAILED
SUMMARY PAGE
Report of Receipts and Disbursements**

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general Election) (* See page 5 for date)	COLUMN C Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)	
(d) The Candidate	0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(III), (b), (c) and (d))	41529.49	515768.99	8362.36
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	0.00
13. LOANS:			
(a) Made or Guaranteed by the Candidate	0.00	0.00	0.00
(b) All Other Loans	0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)	0.00	6614.62	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc)	0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	41529.49	522383.61	8362.36

**POST ELECTION DETAILED
SUMMARY PAGE**
Report of Receipts and Disbursements

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Write or Type Committee Name

Friends of Tim Johnson

Report the covering period

From:

10th

01st

2002

To:

11th

25th

2002

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
17. OPERATING EXPENDITURES		
94442.85	420170.12	17101.14
18. TRANSFER TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN PAYMENTS		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	423.58	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	423.58	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
500.00	825.00	0.00
(b) Political Party Committees		
0.00	1200.00	0.00

**POST ELECTION DETAILED
SUMMARY PAGE**

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Report of Receipts and Disbursements

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COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
(c) Other political committees (such as PACs)			
3500.00	7219.33		0.00
(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))			
4000.00	9244.33		0.00
21. OTHER DISBURSEMENTS			
26850.00	25090.00		4500.00
22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)			
125292.85	454928.03		21601.14
<hr/> III. NET CONTRIBUTIONS (OTHER THAN LOANS) <hr/>			
<i>(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))</i>			
37529.49	506524.66		8362.36
<hr/> IV. NET OPERATING EXPENDITURES <hr/>			
<i>(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)</i>			
94442.85	413555.50		17101.14
<hr/> V. CASH SUMMARY <hr/>			
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD			217537.75
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 18)			41529.49
25. SUBTOTAL (add Line 23 and Line 24)			259067.24
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22)			125292.85
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25)			133774.39

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 / 45	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. AMPAC		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address P.O. Box 6114		Transaction ID: 1030200227C5033
City Westerville	State OH	Zip Code 43081-6114
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Activator PAC		Date of Receipt M / D / Y 11 / 14 / 2002
Mailing Address 1701 Towanda Ave.		Transaction ID: 1204200232C5051
City Bloomington	State IL	Zip Code 61701-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 136.36
Name of Employer	Occupation	In-Kind Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 138.36	

Full Name (Last, First, Middle Initial) C. Amaren Fad PAC		Date of Receipt M / D / Y 10 / 22 / 2002
Mailing Address 607 E. Adams Street		Transaction ID: 1022200213C4991
City Springfield	State IL	Zip Code 62739-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1636.36
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 / 45	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. American Banker Association PAC		Date of Receipt M / D / Y 10 / 29 / 2002
Mailing Address 1120 Connecticut Avenue, NW		Transaction ID: 1029200257C5018
City	State	Zip Code
Washington	DC	20036-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Chicago Mercantile Exchange PAC		Date of Receipt M / D / Y 11 / 22 / 2002
Mailing Address 30 S. Wacker Drive		Transaction ID: 1204200232C5059
City	State	Zip Code
Chicago	IL	60606-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. American Crystal Sugar PAC		Date of Receipt M / D / Y 10 / 29 / 2002
Mailing Address 101 North Third Street		Transaction ID: 1029200257C5020
City	State	Zip Code
Moorhead	MN	56560-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00	

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 / 45	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Dynegy INC PAC		Date of Receipt M / D / Y 11 / 22 / 2002
Mailing Address 1000 Louisiana Suite 5800		Transaction ID: 1204200232C5058
City Houston	State TX	Zip Code 77002-5050
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Exelon PAC		Date of Receipt M / D / Y 10 / 21 / 2002
Mailing Address PO Box 805379		Transaction ID: 1021200237C4981
City Chicago	State IL	Zip Code 60690-5379
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 7000.00	

Full Name (Last, First, Middle Initial) C. Fund For A Free Market America PAC		Date of Receipt M / D / Y 10 / 29 / 2002
Mailing Address 613 S. Taylor Street		Transaction ID: 1029200248C502B
City Arlington	State VA	Zip Code 22204-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	3500.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 / 45	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Kemper Insurance PAC		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address 1 Kemper Drive, C-3		Transaction ID: 1030200227C5031
City Long Grove	State IL	Zip Code 60049-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. League of Conservation Voters PAC		Date of Receipt M / D / Y 10 / 22 / 2002
Mailing Address 1920 L Street, NW Suite 800		Transaction ID: 1022200257C4994
City Washington	State DC	Zip Code 20036-4201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. NAA PAC		Date of Receipt M / D / Y 10 / 22 / 2002
Mailing Address 201 N Union St Suite 200		Transaction ID: 1022200213C4993
City Alexandria	State VA	Zip Code 22314-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 / 45	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Nat. Assoc. of Retired Fed. Employees		Date of Receipt M / D / Y 10 / 22 / 2002
Mailing Address (NARFE) 606 N Washington St		Transaction ID: 1022200213C4992
City Alexandria	State VA	Zip Code 22314-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. National Beer Wholesalers Assn PAC		Date of Receipt M / D / Y 10 / 18 / 2002
Mailing Address 110D South Washington Street		Transaction ID: 1018200230C4978
City Alexandria	State VA	Zip Code 22314-4494
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 4500.00	

Full Name (Last, First, Middle Initial) C. PPG Employees Voluntary Political Fund		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address 1 PPG Place		Transaction ID: 1030200227C5034
City Pittsburgh	State PA	Zip Code 15272-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 / 45	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. National League of Postmasters PAC		Date of Receipt M / D / Y 10 / 20 / 2002
Mailing Address 1023 N Royal St		Transaction ID: 1029200246C5026
City Alexandria	State VA	Zip Code 22314-1569
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Sierra Club Political Committee		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address 85 2nd St Second Floor		Transaction ID: 1030200227C5036
City San Francisco	State CA	Zip Code 94105-3441
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. The New Democrat Network		Date of Receipt M / D / Y 11 / 22 / 2002
Mailing Address 501 Capitol Ct, NE Suite 200		Transaction ID: 1204200232C5082
City Washington	State DC	Zip Code 20002-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 / 45	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. The New Democrat Network		Date of Receipt M / D / Y 11 / 22 / 2002
Mailing Address 501 Capital Ct, NE Suite 200		Transaction ID: 1204200232C5057
City Washington	State DC	Zip Code 20002-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1725.00	

Full Name (Last, First, Middle Initial) B. UPS PAC		Date of Receipt M / D / Y 10 / 31 / 2002
Mailing Address 55 Glenlake Parkway NE		Transaction ID: 103120023C5048
City Atlanta	State GA	Zip Code 30328-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. United Airlines PAC		Date of Receipt M / D / Y 11 / 02 / 2002
Mailing Address PO Box 66423		Transaction ID: 1104200258C5050
City Amf Ohare	State IL	Zip Code 60666-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1725.00
TOTAL This Period (last page this line number only)	▶	18861.36

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 / 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. David Albin		Date of Receipt M / D / Y 10 / 22 / 2002
Mailing Address PD Box 200		Transaction ID: 1022200213C4987
City Newman	State IL	Zip Code 61842-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-employed	Occupation Farmer	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. John Blair		Date of Receipt M / D / Y 11 / 22 / 2002
Mailing Address 4 Waters Edge		Transaction ID: 1204200232C5063
City Paris	State IL	Zip Code 61844-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Fentz Contractors, Inc	Occupation Civil Engineer	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Michael Block		Date of Receipt M / D / Y 10 / 30 / 2002
Mailing Address 19 W Jefferson St		Transaction ID: 1030200227C5035
City Joliet	State IL	Zip Code 60432-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Block & Block	Occupation Attorney	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 125.00	

SUBTOTAL of Receipts This Page (optional)	1625.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 / 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Bill Celini		Date of Receipt M / D / Y 11 / 22 / 2002
Mailing Address 2166 Wiggins Avenue		Transaction ID: 1204200232C5068
City Springfield	State IL	Zip Code 62704-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer William F. Celini	Occupation Owner	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Juliana Celini		Date of Receipt M / D / Y 11 / 22 / 2002
Mailing Address 2166 Wiggins		Transaction ID: 1204200232C5068
City Springfield	State IL	Zip Code 62704-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Best Efforts	Occupation Best Efforts	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Shawn Goady		Date of Receipt M / D / Y 10 / 29 / 2002
Mailing Address 724 Bayshore Dr		Transaction ID: 1029200257C5021
City Loda	State IL	Zip Code 60548-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Hicks Gas	Occupation Owner	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 45	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Allen Everett		Date of Receipt M / D / Y 10 / 19 / 2002
Mailing Address 400B Riverknoll Drive		Transaction ID: 1019200230C4979
City Champaign	State IL	Zip Code 61821-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Orange & Blue Distributing	Occupation Owner	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Rudy Frasca		Date of Receipt M / D / Y 10 / 22 / 2002
Mailing Address 906 Airport Road		Transaction ID: 1022200213C4989
City Urbana	State IL	Zip Code 61801-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer Frasca International	Occupation Owner	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. R.O. Grant		Date of Receipt M / D / Y 11 / 22 / 2002
Mailing Address 1209 Garden Lane		Transaction ID: 1204200232C5056
City Champaign	State IL	Zip Code 61820-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer retired	Occupation Retired	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 / 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Tom Hagle		Date of Receipt M / D / Y 11 / 22 / 2002
Mailing Address 3831 Blanchan Avenue		Transaction ID: 1204200232C5055
City Brookfield	State IL	Zip Code 60513-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer State of Illinois	Occupation Marketing Representative	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Steven Jambois		Date of Receipt M / D / Y 10 / 22 / 2002
Mailing Address 423 West Willow		Transaction ID: 1022200213C4988
City Chicago	State IL	Zip Code 60614-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Kralovec, Jambois & Schwartz	Occupation Attorney	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Roger Joalin		Date of Receipt M / D / Y 10 / 22 / 2002
Mailing Address 2001 E. Cloud		Transaction ID: 1022200213C4985
City Bloomington	State IL	Zip Code 61701-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer State Farm	Occupation Agent	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 / 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Dave Kuhl		Date of Receipt M / D / Y 10 / 29 / 2002
Mailing Address 101 Greencraft Drive		Transaction ID: 1029200257C5019
City Champaign	State IL	Zip Code 61821-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Bussey Bank	Occupation Banker	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. Gene Lamb		Date of Receipt M / D / Y 10 / 29 / 2002
Mailing Address 140B Waverly Drive		Transaction ID: 1029200257C5017
City Champaign	State IL	Zip Code 61821-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer retired	Occupation Retired	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Joe Lamb		Date of Receipt M / D / Y 10 / 29 / 2002
Mailing Address 3101 Glenhill Drive		Transaction ID: 1029200257C5018
City Champaign	State IL	Zip Code 61821-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Champaign Asphalt	Occupation Owner	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 / 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
 Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. J.D. Lynch		Date of Receipt M / D / Y 10 / 20 / 2002
Mailing Address 339 East Mulberry Street		Transaction ID: 1029200257C5022
City Watseka	State IL	Zip Code 60970-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Iroquois Paving Corp.	Occupation Chairman	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. August C. Meyer		Date of Receipt M / D / Y 10 / 20 / 2002
Mailing Address 1408 S. Prospect Avenue		Transaction ID: 1029200257C5023
City Champaign	State IL	Zip Code 61820-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Mid-West Television, Inc.	Occupation Business Executive	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Arthur Murney		Date of Receipt M / D / Y 10 / 31 / 2002
Mailing Address 601 E. Jones		Transaction ID: 103120023C5045
City Milford	State IL	Zip Code 60553-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Citizens State-Milford	Occupation Banker	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	▶	2200.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 45	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Richard Owen		Date of Receipt M / D / Y 11 / 02 / 2002
Mailing Address 1700 Morrissey Drive		Transaction ID: 1104200256C5049
City Bloomington	State IL	Zip Code 61704-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Owen Nursery	Occupation Owner	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Chris Patrick		Date of Receipt M / D / Y 10 / 29 / 2002
Mailing Address 5566 N 1175th St.		Transaction ID: 1029200246C5024
City Paris	State IL	Zip Code 61844-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Zimerty Ready Mfg	Occupation Owner	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Leland Phipps		Date of Receipt M / D / Y 10 / 22 / 2002
Mailing Address 310 W Madison		Transaction ID: 1022200213C4984
City Paris	State IL	Zip Code 61844-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-employed	Occupation Physician	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 45	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Kip Pope		Date of Receipt M / D / Y 10 / 19 / 2002
Mailing Address P.O. Box 746		Transaction ID: 1019200230C4980
City Champaign	State IL	Zip Code 61824-0746
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer C & U Poster Advertising Co.	Occupation Owner	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Chris Rotranel		Date of Receipt M / D / Y 11 / 22 / 2002
Mailing Address 907 Post Oak Lane		Transaction ID: 1204200232C5054
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer MRC	Occupation Owner	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. King Sutton		Date of Receipt M / D / Y 10 / 22 / 2002
Mailing Address E 800 Court Street		Transaction ID: 1022200213C4983
City Paris	State IL	Zip Code 61544-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Sutton & Sons Funeral Homes	Occupation Funeral Director	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1850.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 45	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
 Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Murrey Wise		Date of Receipt M / D / Y 10 / 22 / 2002
Mailing Address 1604D Lyndhurst Drive		Transaction ID: 1022200213C4986
City Savoy	State IL	Zip Code 61874-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Weschester Group	Occupation Company president	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 X Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. Janis Yairi		Date of Receipt M / D / Y 11 / 22 / 2002
Mailing Address 100 E McHenry		Transaction ID: 1204200232C5066
City Urbana	State IL	Zip Code 61801-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Homemaker	Occupation Homemaker	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2002 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 100.00	

SUBTOTAL of Receipts This Page (optional)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	20275.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 45	
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
 Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. DeWitt County GOP Central Committee		Date of Receipt M / D / Y 11 / 22 / 2002	
Mailing Address Jared Hooker 29 Cypress Dr		Transaction ID: 1204200232C5060	
City Clinton	State IL	Zip Code 61727-	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)-(1))	
Name of Employer	Occupation	Election Cycle-to-Date 100.00	
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼	

Full Name (Last, First, Middle Initial) B. McLean County Repub. Central Committee		Date of Receipt M / D / Y 10 / 31 / 2002	
Mailing Address PO Box 5056		Transaction ID: 0415200355C5174	
City Bloomington	State IL	Zip Code 61702-5056	Amount of Each Receipt this Period 192.13
FEC ID number of contributing federal political committee. C		In-Kind Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)-(1))	
Name of Employer	Occupation	Election Cycle-to-Date 192.13	
Receipt For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼	

SUBTOTAL of Receipts This Page (optional)	▶	292.13
TOTAL This Period (last page this line number only)	▶	292.13

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 24 / 45
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Abbots Florists		Transaction ID: 1204200233E1374 Date of Disbursement 11 / 22 / 2002
Mailing Address PO Box 1561		Amount of Each Disbursement this Period 46.58 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FLOWERS
City Champaign	State IL	
Zip Code 61824-	Category/ Type	
Purpose of Disbursement FLOWERS	Candidate Name	
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) B. Accurate Word		Transaction ID: 1204200233E1367 Date of Disbursement 11 / 22 / 2002
Mailing Address PO Box 1765		Amount of Each Disbursement this Period 368.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 STATIONERY
City White Plains	State MD	
Zip Code 20605-	Category/ Type	
Purpose of Disbursement STATIONERY	Candidate Name	
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) C. Activator PAC		Transaction ID: 1204200232C5051IK Date of Disbursement 11 / 14 / 2002
Mailing Address 1701 Towanda Ave.		Amount of Each Disbursement this Period 136.36 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 IN KIND: ADVERTISEMENT
City Bloomington	State IL	
Zip Code 61701-	Category/ Type	
Purpose of Disbursement ADVERTISEMENT	Candidate Name	
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District		

SUBTOTAL of Disbursements This Page (optional)	570.94
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 25 / 45
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
 Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. AT&T Phone Company		Transaction ID: 1204200233E1330 Date of Disbursement 10 / 29 / 2002	
Mailing Address PO Box 105308			
City Atlanta	State GA	Zip Code 30348-5308	Amount of Each Disbursement this Period 4.92 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PHONE SERVICE
Purpose of Disbursement PHONE SERVICE		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. ATLA PAC		Transaction ID: 1204200233E1312 Date of Disbursement 10 / 17 / 2002	
Mailing Address 1050 31st Street, NW			
City Washington	State DC	Zip Code 20007-	Amount of Each Disbursement this Period 3619.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TRIAL LAWYER LISTS
Purpose of Disbursement TRIAL LAWYER LISTS		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sherri Bisbee		Transaction ID: 1204200233E1357 Date of Disbursement 10 / 30 / 2002	
Mailing Address 308 S Cherry			
City Paxton	State IL	Zip Code 60957-1405	Amount of Each Disbursement this Period 41.80 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 REIMBURSEMENTS:PHONE
Purpose of Disbursement REIMBURSEMENTS:PHONE		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	3665.52
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 26 / 45
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Jennifer Callahan		Transaction ID: 1204200233E1363 Date of Disbursement 11 / 13 / 2002	
Mailing Address 611 Compton Ave.			
City Champaign	State IL	Zip Code 61822-	Amount of Each Disbursement this Period 100.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FINANCE SERVICES
Purpose of Disbursement FINANCE SERVICES		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Cingular Wireless		Transaction ID: 1204200233E1368 Date of Disbursement 11 / 22 / 2002	
Mailing Address PO Box 806055			
City Chicago	State IL	Zip Code 60680-6055	Amount of Each Disbursement this Period 221.67 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PHONE SERVICE
Purpose of Disbursement PHONE SERVICE		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Federal Express		Transaction ID: 1204200233E1319 Date of Disbursement 10 / 22 / 2002	
Mailing Address 2001 Federal Way			
City Urbana	State IL	Zip Code 61801-	Amount of Each Disbursement this Period 13.48 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE
Purpose of Disbursement POSTAGE		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	335.16
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 27 / 45
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Federal Express		Transaction ID: 1204200233E1324 Date of Disbursement 10 / 22 / 2002	
Mailing Address 2001 Federal Way			
City Urbana	State IL	Zip Code 61801-	Amount of Each Disbursement this Period 15.91 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE
Purpose of Disbursement POSTAGE		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Federal Express		Transaction ID: 1204200233E1358 Date of Disbursement 10 / 31 / 2002	
Mailing Address 2001 Federal Way			
City Urbana	State IL	Zip Code 61801-	Amount of Each Disbursement this Period 15.71 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE
Purpose of Disbursement POSTAGE		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Federal Express		Transaction ID: 1204200233E1359 Date of Disbursement 11 / 02 / 2002	
Mailing Address 2001 Federal Way			
City Urbana	State IL	Zip Code 61801-	Amount of Each Disbursement this Period 15.71 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE
Purpose of Disbursement POSTAGE		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	45.33
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 28 / 45
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Federal Express		Transaction ID: 1204200233E1364 Date of Disbursement 11 / 13 / 2002	
Mailing Address 2001 Federal Way			
City Urbana	State IL	Zip Code 61801-	Amount of Each Disbursement this Period 15.71 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement POSTAGE		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District	POSTAGE		

Full Name (Last, First, Middle Initial) B. Huntington Towers		Transaction ID: 1204200233E1328 Date of Disbursement 10 / 29 / 2002	
Mailing Address PO Box 140			
City Champaign	State IL	Zip Code 61824-0140	Amount of Each Disbursement this Period 546.25 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement RENT EXPENSE		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District	RENT EXPENSE		

Full Name (Last, First, Middle Initial) C. Illinois Power		Transaction ID: 1204200233E1316 Date of Disbursement 10 / 19 / 2002	
Mailing Address P.O. Box 511			
City Decatur	State IL	Zip Code 62525-	Amount of Each Disbursement this Period 43.38 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement UTILITIES		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District	UTILITIES		

SUBTOTAL of Disbursements This Page (optional)	605.35
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 29 / 45
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Illinois Power		Transaction ID: 1204200233E1373 Date of Disbursement 11 / 22 / 2002	
Mailing Address P.O. Box 511			
City Decatur	State IL	Zip Code 62525-	Amount of Each Disbursement this Period 32.25 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 UTILITIES
Purpose of Disbursement UTILITIES		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Keelen Communications		Transaction ID: 1204200233E1321 Date of Disbursement 10 / 22 / 2002	
Mailing Address PO Box 2776			
City Arlington	State VA	Zip Code 22202-	Amount of Each Disbursement this Period 424.38 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING EXPENSE
Purpose of Disbursement FUNDRAISING EXPENSE		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Keelen Communications		Transaction ID: 1204200233E1368 Date of Disbursement 11 / 22 / 2002	
Mailing Address PO Box 2776			
City Arlington	State VA	Zip Code 22202-	Amount of Each Disbursement this Period 3833.73 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING EXPENSE
Purpose of Disbursement FUNDRAISING EXPENSE		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	4290.36
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 30 / 45
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Kinkos		Transaction ID: 1204200233E1372 Date of Disbursement 11 / 22 / 2002	
Mailing Address 505 S. Mattis			
City Champaign	State IL	Zip Code 61821-	Amount of Each Disbursement this Period 202.75 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement COPIES/FAXES		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		COPIES/FAXES

Full Name (Last, First, Middle Initial) B. Moleod USA		Transaction ID: 1204200233E1333 Date of Disbursement 10 / 29 / 2002	
Mailing Address 2302 Fox Dr			
City Champaign	State IL	Zip Code 61820-	Amount of Each Disbursement this Period 52.44 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement PHONE SERVICE		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		PHONE SERVICE

Full Name (Last, First, Middle Initial) C. Personal Service		Transaction ID: 1204200233E1370 Date of Disbursement 11 / 22 / 2002	
Mailing Address 1129 S. Grand East PO Box 4586			
City Springfield	State IL	Zip Code 62708-	Amount of Each Disbursement this Period 1658.16 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement ADVERTISING		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		ADVERTISING

SUBTOTAL of Disbursements This Page (optional)	▶	1914.35
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 31 / 45
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Simplified Computers		Transaction ID: 1204200233E1318 Date of Disbursement 10 / 22 / 2002	
Mailing Address 901 S Neil		Amount of Each Disbursement this Period 60.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 COMPUTER SUPPLIES	
City Champaign	State IL		Zip Code 61820-
Purpose of Disbursement COMPUTER SUPPLIES	Category/ Type		
Candidate Name	Office Sought: House Senate President State: District		
Disbursement For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Strategic Marketing		Transaction ID: 1204200233E1313 Date of Disbursement 10 / 17 / 2002	
Mailing Address 2602 1/2 N Mattis Avenue		Amount of Each Disbursement this Period 4710.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PRODUCTION/ADVERTISING	
City Champaign	State IL		Zip Code 61822-
Purpose of Disbursement PRODUCTION/ADVERTISING	Category/ Type		
Candidate Name	Office Sought: House Senate President State: District		
Disbursement For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Strategic Marketing		Transaction ID: 1204200233E1326 Date of Disbursement 10 / 22 / 2002	
Mailing Address 2602 1/2 N Mattis Avenue		Amount of Each Disbursement this Period 9053.33 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISING	
City Champaign	State IL		Zip Code 61822-
Purpose of Disbursement ADVERTISING	Category/ Type		
Candidate Name	Office Sought: House Senate President State: District		
Disbursement For: Primary General Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional)	▶	13823.33
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 32 / 45
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Super 8 Motel		Transaction ID: 1204200233E1322 Date of Disbursement 10 / 19 / 2002	
Mailing Address 937 Enterprise Lane			
City Mount Carmel	State IL	Zip Code 62863-	Amount of Each Disbursement this Period 388.58 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement HOTEL EXPENSE		Category/ Type	
Candidate Name			HOTEL EXPENSE
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Super 8 Motel		Transaction ID: 1204200233E1380 Date of Disbursement 10 / 25 / 2002	
Mailing Address 937 Enterprise Lane			
City Mount Carmel	State IL	Zip Code 62863-	Amount of Each Disbursement this Period 64.76 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement HOTEL EXPENSE		Category/ Type	
Candidate Name			HOTEL EXPENSE
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. U.S. Postmaster		Transaction ID: 1204200233E1385 Date of Disbursement 11 / 13 / 2002	
Mailing Address 2001 N. Mattis			
City Champaign	State IL	Zip Code 61821-	Amount of Each Disbursement this Period 373.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement POSTAGE		Category/ Type	
Candidate Name			POSTAGE
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	826.32
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 33 / 45
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Upclose Printing		Transaction ID: 1204200233E1371 Date of Disbursement 11 / 22 / 2002	
Mailing Address 714 S. 6th		Amount of Each Disbursement this Period 356.80 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PRINTING	
City Champaign	State IL		Zip Code 61820-
Purpose of Disbursement PRINTING	Category/ Type		
Candidate Name	Office Sought: House Senate President State: District		
Disbursement For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: 1204200233E1332 Date of Disbursement 10 / 29 / 2002	
Mailing Address PO Box 6170		Amount of Each Disbursement this Period 127.46 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PHONE SERVICE	
City Carol Stream	State IL		Zip Code 60197-
Purpose of Disbursement PHONE SERVICE	Category/ Type		
Candidate Name	Office Sought: House Senate President State: District		
Disbursement For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Transaction ID: 1204200233E1376 Date of Disbursement 11 / 22 / 2002	
Mailing Address PO Box 6170		Amount of Each Disbursement this Period 570.46 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PHONE SERVICE	
City Carol Stream	State IL		Zip Code 60197-
Purpose of Disbursement PHONE SERVICE	Category/ Type		
Candidate Name	Office Sought: House Senate President State: District		
Disbursement For: Primary General Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional)	▶	1054.72
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 34 / 45
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: 1204200233E1377 Date of Disbursement 11 / 22 / 2002	
Mailing Address PO Box 6170		Amount of Each Disbursement this Period 175.61 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PHONE SERVICE	
City Carol Stream	State IL		Zip Code 60197-
Purpose of Disbursement PHONE SERVICE			Category/ Type
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Wilson Grand		Transaction ID: 1204200233E1317 Date of Disbursement 10 / 19 / 2002	
Mailing Address 429 N. Street Asaph		Amount of Each Disbursement this Period 16179.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISING	
City Alexandria	State VA		Zip Code 22314-
Purpose of Disbursement ADVERTISING			Category/ Type
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Wilson Grand		Transaction ID: 040320031E1482 Date of Disbursement 10 / 19 / 2002	
Mailing Address 429 N. Street Asaph		Amount of Each Disbursement this Period 41414.46 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISING	
City Alexandria	State VA		Zip Code 22314-
Purpose of Disbursement ADVERTISING			Category/ Type
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	57769.07
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Wilson Grand		Transaction ID: 12042D0233E1366	
Mailing Address 429 N. Street Asaph		Date of Disbursement 11 / 22 / 2002	
City Alexandria	State VA	Zip Code 22314-	Amount of Each Disbursement this Period 8970.06 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISING
Purpose of Disbursement ADVERTISING		Category/ Type	
Candidate Name			
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	8970.06
TOTAL This Period (last page this line number only)	▶	93870.51

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 36 / 45
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
 Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. NRCC		Transaction ID: 1204200233E1362 Date of Disbursement 11 / 13 / 2002		
Mailing Address 320 First Street, SE		Amount of Each Disbursement this Period 4500.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Washington	State DC			Zip Code 20003-
Purpose of Disbursement FUNDRAISING				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼			
State: District				

Full Name (Last, First, Middle Initial) B. NRCC		Transaction ID: 1204200233E1360 Date of Disbursement 11 / 02 / 2002		
Mailing Address 320 First Street, SE		Amount of Each Disbursement this Period 18000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Washington	State DC			Zip Code 20003-
Purpose of Disbursement FUNDRAISING				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼			
State: District				

Full Name (Last, First, Middle Initial) C. NRCC		Transaction ID: 1204200233E1361 Date of Disbursement 11 / 02 / 2002		
Mailing Address 320 First Street, SE		Amount of Each Disbursement this Period 2250.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Washington	State DC			Zip Code 20003-
Purpose of Disbursement FUNDRAISING				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼			
State: District				

SUBTOTAL of Disbursements This Page (optional)	▶	24750.00
TOTAL This Period (last page this line number only)	▶	24750.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 37 / 45
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. American Assoc. of Crop Insurers PAC		Transaction ID: 1204200233E1353 Date of Disbursement 10 / 29 / 2002
Mailing Address 1 Massachusetts Ave, Suite 800		Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington	State DC Zip Code 20001-	
Purpose of Disbursement Refund of Contribution	Category/ Type	
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: 2002 Primary X General Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Optometric PAC		Transaction ID: 1204200233E1354 Date of Disbursement 10 / 29 / 2002
Mailing Address 1505 Prince St		Amount of Each Disbursement this Period 500.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Alexandria	State VA Zip Code 22314-	
Purpose of Disbursement Refund of Contribution	Category/ Type	
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: 2002 Primary X General Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Farm Credit PAC		Transaction ID: 1204200233E1355 Date of Disbursement 10 / 29 / 2002
Mailing Address 50 F Street, NW Suite 900		Amount of Each Disbursement this Period 500.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington	State DC Zip Code 20001-	
Purpose of Disbursement Refund of Contribution	Category/ Type	
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: 2002 Primary X General Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
 (check only one)

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<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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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, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
 Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Minnesota Sugar PAC		Transaction ID: 1204200233E1356 Date of Disbursement 10 / 29 / 2002	
Mailing Address PO Box 500		Amount of Each Disbursement this Period 500.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Renville	State MN		Zip Code 56284-0500
Purpose of Disbursement Refund of Contribution			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼	State: District	

Full Name (Last, First, Middle Initial) B. United Airlines PAC		Transaction ID: 1204200233E1375 Date of Disbursement 10 / 29 / 2002	
Mailing Address PO Box 66423		Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Amf Ohare	State IL		Zip Code 60666-
Purpose of Disbursement Refund of Contribution			Category/ Type
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼	State: District	

SUBTOTAL of Disbursements This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	3500.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
 (check only one)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input checked="" type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
 Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Clint Atkins		Transaction ID: 1204200233E1320 Date of Disbursement 10 / 22 / 2002		
Mailing Address 1007 Galen Drive		Amount of Each Disbursement this Period 500.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
City Champaign	State IL			Zip Code 61821-
Purpose of Disbursement Refund of Contribution				Category/ Type
Candidate Name				
Office Sought: House Senate President State: District	Disbursement For: 2002 Primary X General Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	500.00

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 40 / 45
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 13a <input checked="" type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Friends of Tim Johnson

Transaction ID: LS1015200017C2023

LOAN SOURCE Full Name (Last, First, Middle Initial) Bank Illinois	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 100 W. University Avenue	
City Champaign State IL ZIP Code 61820	

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

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	01 ^M 06 ^N 2000 ^Y	01 ^M 10 ^N 2003 ^Y	5.250 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	100000.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 41 / 45
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 13a <input checked="" type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Friends of Tim Johnson

Transaction ID: LS1015200017C2024

LOAN SOURCE Full Name (Last, First, Middle Initial) Busey Bank	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 201 W. Main	
City Urbana State IL ZIP Code 61801-	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	423.58	99576.42

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
01 ^m 24 ^d 2000 ^y	06 ^m 16 ^d 2003 ^y	6.500 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	99576.42
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 42 / 45
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 13a <input checked="" type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Friends of Tim Johnson

Transaction ID: LS1015200017C2098

LOAN SOURCE Full Name (Last, First, Middle Initial) Busey Bank	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 201 W. Main	
City Urbana State IL ZIP Code 61801-	

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

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
03 ^m 09 ⁿ 2000 ^y	06 ^m 16 ⁿ 2003 ^y	6.500 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	40000.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 43 / 45
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 13a <input checked="" type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Friends of Tim Johnson

Transaction ID: LS102020002C2771

LOAN SOURCE Full Name (Last, First, Middle Initial) First State Bank of Monticello	Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 201 West Main Street PO Box 260	
City Monticello State IL ZIP Code 61855-	

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

TERMS		Date Incurred	Date Due	Interest Rate	Secured:
M	D	Y	M	% (APR)	Yes No
10	05	2000	10 05 2003	7.000	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	100000.00
TOTALS This Period (last page in this line only)	339576.42
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:
(check only one)

9
 10

NAME OF COMMITTEE (In Full)
Friends of Tim Johnson

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wilson Grand

Nature of Debt (Purpose):
Advertising

Mailing Address 428 N. Street Asaph

City	State	ZIP Code
Alexandria	VA	22314-

Outstanding Balance Beginning This Period

Transaction ID: LS1204200233E1317

16179.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

16179.00

0.00

1) SUBTOTALS This Period This Page (optional)	▶	0.00
2) TOTALS This Period (last page this line number only)	▶	0.00
3) TOTALS 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)	▶	

Form/Schedule: F3A
Transaction ID: CD0350421

We are amending this report to show the removal of an in-kind contribution from the Bloomington Pantagraph on line 17 of Schedule B in the amount of \$192.13. It was an in-kind contribution from the McLean County Central Republican Committee for an advertisement on our behalf in the Bloomington Pantagraph. We are also amending Schedule D to reflect the payment of an outstanding debt to Wilson Grand. Schedule C has also been updated to reflect the correct amount of principle paid on the Busey Bank loan. Schedule A employment/occupation info has also been updated.