

**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

61803

2. **FEC IDENTIFICATION NUMBER**

C00350421

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT  NEW (N) OR  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:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period 07 01 2004 through 09 30 2004

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 James P. Bray

Signature of Treasurer Electronically Filed by James P. Bray Date 10 14 2004

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

**FEC FORM 3**  
(Revised 02/2003)

**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: <sup>M M</sup> 0 7 <sup>D D</sup> 0 1 <sup>Y Y Y Y</sup> 2 0 0 4 To: <sup>V M</sup> 0 9 <sup>D D</sup> 3 0 <sup>Y Y Y Y</sup> 2 0 0 4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(a)).....	33707.85	451140.89
(b) Total Contribution Refunds (from Line 20(d)).....	50.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	33657.85	450940.89
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	38645.44	252341.28
(b) Total Offsets to Operating Expenditures (from Line 14).....	854.99	1256.89
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	37790.45	251084.39
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	241019.13	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	246552.51	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name  
Friends of Tim Jahnsan

Report Covering the Period: From: <sup>M M</sup> 0 7 <sup>D J</sup> 0 1 <sup>Y</sup> 2 0 0 4 To: <sup>V V</sup> 0 9 <sup>U J</sup> 3 0 <sup>Y</sup> 2 0 0 4

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	15527.85	
(i) Itemized (use Schedule A).....	3680.00	
(ii) Unitemized.....		
(iii) TOTAL of contributions	19207.85	198366.84
from individuals..... ▶		
(b) Political Party Committees.....	0.00	1392.39
(c) Other Political Committees (such as PACS).....	14500.00	251381.66
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	33707.85	451140.89
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	0.00
<b>13. LOANS</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES</b> (Refunds, Rebates, etc.).....	854.99	1256.89
<b>15. OTHER RECEIPTS</b> (Dividends, Interest, etc.).....	0.00	0.00
<b>16. TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	34562.84	452397.78

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	38645.44	252341.28
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	100301.54
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	100301.54
<hr/>		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	50.00	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	50.00	200.00
<hr/>		
21. OTHER DISBURSEMENTS.....	149.00	5549.00
<hr/>		
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) [ > ]	<b>38844.44</b>	<b>358391.82</b>

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	245300.73
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	34562.84
25. SUBTOTAL (add Line 23 and Line 24).....	279863.57
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	38844.44
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	241019.13

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

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

FOR LINE NUMBER: PAGE 6 / 47

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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) <b>A. American Council of Engineering Co. PAC</b>		Date of Receipt M / D / Y 07 / 01 / 2004
Mailing Address 1015 15th Street, NW		Transaction ID: 0709200459C6164
City	State	Zip Code
Washington	DC	20005-2605
FEC ID number of contributing federal political committee. <b>C C00010868</b>		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: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>B. Amalgamated Transit Union COPE</b>		Date of Receipt M / D / Y 09 / 13 / 2004
Mailing Address 5025 Wisconsin Ave., NW		Transaction ID: 1004200424C6241
City	State	Zip Code
Washington	DC	20016-
FEC ID number of contributing federal political committee. <b>C CD0032895</b>		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: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) <b>C. Amaren Fad PAC</b>		Date of Receipt M / D / Y 07 / 19 / 2004
Mailing Address 607 E. Adams Street		Transaction ID: D819200434C8175
City	State	Zip Code
Springfield	IL	62739-
FEC ID number of contributing federal political committee. <b>C CD0206138</b>		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: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>4000.00</b>
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 6 / 47

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. CWA COPE		Date of Receipt M / D / Y 07 / 06 / 2004
Mailing Address 501 3rd Street, NW		Transaction ID: 0709200459C6171
City Washington	State DC	Zip Code 20001-
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: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Calapilar Employees PAC		Date of Receipt M / D / Y 09 / 13 / 2004
Mailing Address 100 NE Adams Street		Transaction ID: 1004200424C6240
City Peoria	State IL	Zip Code 61623-
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: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Community Bankers Association of IL PAC		Date of Receipt M / D / Y 07 / 19 / 2004
Mailing Address 901 Community Drive		Transaction ID: D819200434C8176
City Springfield	State IL	Zip Code 62703-
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: 2004 Primary X General 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: PAGE 7 / 47

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) <b>A. DVAMC PAC</b>		Date of Receipt M / D / Y 08 / 16 / 2004
Mailing Address P O Box 7434		Transaction ID: 0819200434C6185
City	State	Zip Code
Mobile	AL	36670-
FEC ID number of contributing federal political committee. <b>C</b>		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: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Realtors PAC</b>		Date of Receipt M / D / Y 09 / 21 / 2004
Mailing Address 430 N Michigan Ave		Transaction ID: 1004200424C6259
City	State	Zip Code
Chicago	IL	60611-
FEC ID number of contributing federal political committee. <b>C</b>		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: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. PepsiCo Concerned Citizens Fund PAC</b>		Date of Receipt M / D / Y 09 / 01 / 2004
Mailing Address 700 Anderson Hill Road		Transaction ID: 1004200424C8224
City	State	Zip Code
Purchase	NY	10577-
FEC ID number of contributing federal political committee. <b>C</b>		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: 2004 Primary <input type="checkbox"/> General <input type="checkbox"/> <input checked="" type="checkbox"/> Other (specify) ▼ 2000 Primary Debt Re	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 47

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<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) <b>A. Society of Independent Gasoline Marketer</b>		Date of Receipt M / D / Y 08 / 10 / 2004	
Mailing Address 11911 Freedom Drive Suite 580		Transaction ID: 0819200434C6180	
City Reston	State VA	Zip Code 20180-	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. <b>C C00120030</b>		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer  Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation  Election Cycle-to-Date ▼ 4000.00		

Full Name (Last, First, Middle Initial) <b>B. Illinois Corn Growers Association</b>		Date of Receipt M / D / Y 08 / 24 / 2004	
Mailing Address P O Box 1623		Transaction ID: 1004200424C6199	
City Bloomington	State IL	Zip Code 61702-1623	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer  Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation  Election Cycle-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) .....	4000.00
TOTAL This Period (last page this line number only) .....	14500.00



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

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

FOR LINE NUMBER: PAGE 9 / 47

(check only one)  
 11a     11b     11c     11d  
           12       13a       13b       14       15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Dr. Richard Bianco		Date of Receipt M / D / Y 09 / 28 / 2004
Mailing Address 2401 High Meadow Ln.		Transaction ID: 1004200424C6267
City Champaign	State IL	Zip Code 61821-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 175.00
Name of Employer Christie Clinic	Occupation Oral Surgeon	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary    X General Other (specify) ▼	Election Cycle-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) B. John Blair		Date of Receipt M / D / Y 09 / 13 / 2004
Mailing Address 4 Waters Edge		Transaction ID: 1004200424C6267
City Paris	State IL	Zip Code 61844-
FEC ID number of contributing federal political committee. <b>C</b>		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: 2004 Primary    X General Other (specify) ▼	Election Cycle-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. Ray Block		Date of Receipt M / D / Y 09 / 01 / 2004
Mailing Address 110 Pleasant Drive, Box 425		Transaction ID: 1004200424C8217
City Sidney	State IL	Zip Code 61877-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
Name of Employer retired	Occupation Retired	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary    X General Other (specify) ▼	Election Cycle-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>825.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 47  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) <b>A. Joe Brown</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2004
Mailing Address 413 Indian Hills		Transaction ID: 0819200434C6179
City Rantoul	State IL	Zip Code 61866-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 125.00
Name of Employer Village of Rantoul	Occupation Mayor	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) <b>B. Arthur Bunting</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 24 / 2004
Mailing Address 27998 N 2900 East Rd		Transaction ID: 1004200424C6198
City Dwight	State IL	Zip Code 60420-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Information Requested	Occupation Information Requested	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Dorothy Collins</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2004
Mailing Address 503 McGee Road		Transaction ID: 1004200424C8242
City Urbana	State IL	Zip Code 61802-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 175.00
Name of Employer Collins Oil	Occupation Owner	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 325.00	

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 47  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) <b>A. Robert Colvin</b>		Date of Receipt M / D / Y 09 / 13 / 2004
Mailing Address 330 N Central Ave		Transaction ID: 1004200424C6262
City	State	Zip Code
Paris	IL	61844-
FEC ID number of contributing federal political committee. <b>C</b>		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: 2004 Primary    X General Other (specify) ▼	Engineer Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Greg Crawford</b>		Date of Receipt M / D / Y 08 / 23 / 2004
Mailing Address 14 Foothill Rd		Transaction ID: 1004200424C6181
City	State	Zip Code
Monticello	IL	61856-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 175.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary    X General Other (specify) ▼	C F & H Insurance Owner Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. Michael Dooley</b>		Date of Receipt M / D / Y 09 / 01 / 2004
Mailing Address PO Box 17123		Transaction ID: 1004200424C8218
City	State	Zip Code
Urbana	IL	61803-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary    X General Other (specify) ▼	Illinois Dept. of Corrections Superintendent Election Cycle-to-Date ▼ 1150.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>925.00</b>
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 12 / 47  
(check only one)  
 11a     11b     11c     11d  
           12       13a       13b       14       15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) <b>A. David Downs</b>		Date of Receipt M / D / Y 09 / 28 / 2004
Mailing Address 402 Sycamore Lane		Transaction ID: 1004200424C6265
City Allerton	State IL	Zip Code 61810-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 175.00
Name of Employer Information Requested	Occupation Information Requested	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B. William Furry</b>		Date of Receipt M / D / Y 08 / 24 / 2004
Mailing Address 10242 N County Rd 1300 E		Transaction ID: 1004200424C6196
City Charleston	State IL	Zip Code 61820-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Information Requested	Occupation Information Requested	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. J.W. Hasler</b>		Date of Receipt M / D / Y 09 / 13 / 2004
Mailing Address 14 Poplar Street		Transaction ID: 1004200424C823D
City Paris	State IL	Zip Code 61544-9614
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer retired	Occupation Retired	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>925.00</b>
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 13 / 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) <b>A. Craig Hays</b>		Date of Receipt M / D / Y 08 / 26 / 2004
Mailing Address 28 Greencroft Drive		Transaction ID: 1004200424C6212
City Champaign	State IL	Zip Code 61821-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer C-U News Agency	Occupation Newspaper Distributor	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) <b>B. Roger Huddleston</b>		Date of Receipt M / D / Y 08 / 24 / 2004
Mailing Address 1102 Beaver Creek Ln. PO Box 739		Transaction ID: 1004200424C6210
City Mahomet	State IL	Zip Code 61853-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Huddleston Homes	Occupation Owner	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 675.00	

Full Name (Last, First, Middle Initial) <b>C. Carl Hudson</b>		Date of Receipt M / D / Y 08 / 27 / 2004
Mailing Address PO Box 70		Transaction ID: 1004200424C8284
City Paxton	State IL	Zip Code 60567-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 125.00
Name of Employer Self-employed	Occupation Pharmacist	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>875.00</b>
<b>TOTAL</b> 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 14 / 47  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) <b>A. Ned Jerison</b>		Date of Receipt M / D / Y 08 / 24 / 2004
Mailing Address 413 W. Court Street		Transaction ID: 1004200424C6209
City	State	Zip Code
Paris	IL	61844-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Paris Beacon News	Occupation Owner	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary    X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Joe Keys</b>		Date of Receipt M / D / Y 09 / 13 / 2004
Mailing Address 13338 N. 1900th Street		Transaction ID: 1004200424C6233
City	State	Zip Code
Paris	IL	61844-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation Farmer	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary    X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Dave Kuhl</b>		Date of Receipt M / D / Y 08 / 26 / 2004
Mailing Address 101 Greencroft Drive		Transaction ID: 1004200424C8213
City	State	Zip Code
Champaign	IL	61821-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Busey Bank	Occupation Banker	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary    X General Other (specify) ▼	Election Cycle-to-Date ▼ 1175.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2000.00</b>
<b>TOTAL</b> 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 15 / 47  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) <b>A. William Meyers</b>		Date of Receipt M / D / Y 09 / 13 / 2004
Mailing Address 5 Waters Edge		Transaction ID: 1004200424C6236
City	State	Zip Code
Paris	IL	61844-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Ineco	Occupation President	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Karen K. Miller</b>		Date of Receipt M / D / Y 09 / 01 / 2004
Mailing Address 701 Devonshire Dr., Ste. B14		Transaction ID: 1004200424C6216
City	State	Zip Code
Champaign	IL	61820-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 175.00
Name of Employer Karen Miller Appraisal Agency	Occupation Real Estate Appraiser	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. Robert Morgan</b>		Date of Receipt M / D / Y 09 / 13 / 2004
Mailing Address PO Box 877		Transaction ID: 1004200424C6234
City	State	Zip Code
Paris	IL	61844-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00
Name of Employer Robert Morgan, Inc.	Occupation President	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>2175.00</b>
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 / 47  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) <b>A. William Maser</b>			Date of Receipt M / D / Y 08 / 24 / 2004		
Mailing Address 188D CR 1400N			Transaction ID: 1004200424C6194		
City Urbana	State IL	Zip Code 61801-	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))		
Name of Employer	Occupation Farmer	Election Cycle-to-Date ▼ 250.00			
Receipt For: 2004 Primary    X General Other (specify) ▼					

Full Name (Last, First, Middle Initial) <b>B. Jon Nall</b>			Date of Receipt M / D / Y 08 / 02 / 2004		
Mailing Address 802 South Second			Transaction ID: 0819200434C6178		
City Springfield	State IL	Zip Code 62704-	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))		
Name of Employer Self-employed	Occupation Attorney	Election Cycle-to-Date ▼ 500.00			
Receipt For: 2004 Primary    X General Other (specify) ▼					

Full Name (Last, First, Middle Initial) <b>C. Andy Patrick</b>			Date of Receipt M / D / Y 09 / 30 / 2004		
Mailing Address 7397 N 1200th Street			Transaction ID: 1004200424C8288		
City Paris	State IL	Zip Code 61544-	Amount of Each Receipt this Period 477.85		
FEC ID number of contributing federal political committee. <b>C</b>			In-Kind Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))		
Name of Employer Self-employed	Occupation Business Owner	Election Cycle-to-Date ▼ 477.85	September 3rd Event Meal		
Receipt For: 2004 Primary    X General Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional) .....	<b>1177.85</b>
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 17 / 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) <b>A. Chris Patrick</b>		Date of Receipt M / D / Y 08 / 24 / 2004
Mailing Address 5566 N 1175th St.		Transaction ID: 1004200424C6206
City Paris	State IL	Zip Code 61844-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Zimerty Ready Mix	Occupation Owner	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Leiland Phipps</b>		Date of Receipt M / D / Y 08 / 24 / 2004
Mailing Address 310 W Madison		Transaction ID: 1004200424C6203
City Paris	State IL	Zip Code 61844-
FEC ID number of contributing federal political committee. <b>C</b>		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: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Edwin Pool</b>		Date of Receipt M / D / Y 08 / 24 / 2004
Mailing Address 11703 IL Hwy. 1		Transaction ID: 1004200424C6205
City Paris	State IL	Zip Code 61844-6309
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation Retailer	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>2000.00</b>
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 18 / 47  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) A. Jim Riddell		Date of Receipt M / D / Y 09 / 01 / 2004
Mailing Address 108 N. Henson		Transaction ID: 1004200424C6220
City Villa Grove	State IL	Zip Code 61856-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 175.00
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: 2004 Primary    X General Other (specify) ▼	Election Cycle-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) B. George Rogers		Date of Receipt M / D / Y 09 / 13 / 2004
Mailing Address 14131 US Hwy. 38		Transaction ID: 1004200424C6231
City Chrisman	State IL	Zip Code 61824-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
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: 2004 Primary    X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. T. Alan Russel		Date of Receipt M / D / Y 09 / 13 / 2004
Mailing Address 8 Waters Edge Dr.		Transaction ID: 1004200424C6228
City Paris	State IL	Zip Code 61844-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer retired	Occupation Retired	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary    X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1175.00</b>
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 18 / 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) <b>A. Lynn Ryle</b>		Date of Receipt M / D / Y 08 / 24 / 2004
Mailing Address P O Box 6525		Transaction ID: 1004200424C6207
City Champaign	State IL	Zip Code 61826-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Homemaker	Occupation Homemaker	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Gene Salmon</b>		Date of Receipt M / D / Y 09 / 18 / 2004
Mailing Address 241 D Brownfield Road		Transaction ID: 1004200424C6245
City Urbana	State IL	Zip Code 61802-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Cross Construction	Occupation Company president	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Ed Shiens</b>		Date of Receipt M / D / Y 08 / 23 / 2004
Mailing Address PD Box 2368 Station A		Transaction ID: 1004200424C6190
City Champaign	State IL	Zip Code 61825-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
Name of Employer Self-employed	Occupation Accountant	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>700.00</b>
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 / 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) <b>A. Agnes Simms</b>		Date of Receipt M / D / Y 08 / 24 / 2004
Mailing Address 208 N. White PO Box 558		Transaction ID: 1004200424C6204
City Sidney	State IL	Zip Code 61877-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Self-employed	Occupation Realtor	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Jon Steward</b>		Date of Receipt M / D / Y 09 / 01 / 2004
Mailing Address 4207 Brittany Trail Drive		Transaction ID: 1004200424C6216
City Champaign	State IL	Zip Code 61822-8506
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer TRI Star Marketing	Occupation President	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1750.00	

Full Name (Last, First, Middle Initial) <b>C. Nicole Storch</b>		Date of Receipt M / D / Y 08 / 24 / 2004
Mailing Address 2211 North Barker Road		Transaction ID: 1004200424C6201
City Champaign	State IL	Zip Code 61821-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Retired	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1350.00</b>
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 / 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Tim Jahnsan

Full Name (Last, First, Middle Initial) <b>A. Roger By</b>		Date of Receipt M / D / Y 08 / 24 / 2004
Mailing Address 200 E Green		Transaction ID: 1004200424C6197
City Newman	State IL	Zip Code 61842-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation Farmer	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Warren Wessels</b>		Date of Receipt M / D / Y 09 / 28 / 2004
Mailing Address 1018 W. Daniel		Transaction ID: 1004200424C6266
City Champaign	State IL	Zip Code 61821-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 175.00
Name of Employer retired	Occupation Retired	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. Ed Williams</b>		Date of Receipt M / D / Y 08 / 23 / 2004
Mailing Address 305 West Grant		Transaction ID: 1004200424C6189
City Monticello	State IL	Zip Code 61858-
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 175.00
Name of Employer Leiper Furniture Store	Occupation Sales	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>600.00</b>
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 / 47  
 (check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full) Friends of Tim Jahnsan											
Full Name (Last, First, Middle Initial) <b>A.</b> Terry Wolf	Date of Receipt M / D / Y U / U / Y M / M / Y 08 / 24 / 2004										
Mailing Address 2781 CR 1100N	Transaction ID: 100420042406195										
<table style="width:100%; border: none;"> <tr> <td style="border: none;">City</td> <td style="border: none;">State</td> <td style="border: none;">Zip Code</td> </tr> <tr> <td style="border: none;">Homer</td> <td style="border: none;">IL</td> <td style="border: none;">61849-</td> </tr> </table>	City	State	Zip Code	Homer	IL	61849-	Amount of Each Receipt this Period <div style="text-align: right;">250.00</div>				
City	State	Zip Code									
Homer	IL	61849-									
FEC ID number of contributing federal political committee. <b>C</b>	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))										
<table style="width:100%; border: none;"> <tr> <td style="border: none;">Name of Employer</td> <td style="border: none;">Occupation</td> </tr> <tr> <td style="border: none;">Self</td> <td style="border: none;">Farmer</td> </tr> <tr> <td style="border: none;">Receipt For:      2004</td> <td style="border: none;">Election Cycle-to-Date ▼</td> </tr> <tr> <td style="border: none;">  Primary      X General</td> <td style="border: none;">375.00</td> </tr> <tr> <td style="border: none;">  Other (specify) ▼</td> <td style="border: none;"></td> </tr> </table>	Name of Employer	Occupation	Self	Farmer	Receipt For:      2004	Election Cycle-to-Date ▼	Primary      X General	375.00	Other (specify) ▼		
Name of Employer	Occupation										
Self	Farmer										
Receipt For:      2004	Election Cycle-to-Date ▼										
Primary      X General	375.00										
Other (specify) ▼											

SUBTOTAL of Receipts This Page (optional) ..... ▶	<b>250.00</b>
TOTAL This Period (last page this line number only) ..... ▶	<b>15527.85</b>

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

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

FOR LINE NUMBER: PAGE 23 / 47

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14
			<input type="checkbox"/> 15

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. Busey Bank		Date of Receipt M / D / Y 08 / 02 / 2004
Mailing Address 201 W. Main		Transaction ID: 0819200434C6177
City Urbana	State IL	Zip Code 61801-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 854.99
Name of Employer	Occupation	Offsets to Operating Expenditure Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 854.99	

SUBTOTAL of Receipts This Page (optional) .....	▶	854.99
TOTAL This Period (last page this line number only) .....	▶	854.99

**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 / 47

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

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. Abbots Florists

Mailing Address PO Box 1561

City Champaign State IL Zip Code 61824-

Purpose of Disbursement  
 Supplies

Candidate Name

Office Sought: House Senate President  
 State: District  
 Disbursement For: Primary General  
 Other (specify) ▼

001  
 Category/  
 Type

Transaction ID: D519200434E1872  
 Date of Disbursement

07 / 09 / 2004

Amount of Each Disbursement this Period

36.88

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

SUPPLIES

Full Name (Last, First, Middle Initial)

B. Abbots Florists

Mailing Address PO Box 1561

City Champaign State IL Zip Code 61824-

Purpose of Disbursement  
 Supplies

Candidate Name

Office Sought: House Senate President  
 State: District  
 Disbursement For: Primary General  
 Other (specify) ▼

001  
 Category/  
 Type

Transaction ID: D519200434E1893  
 Date of Disbursement

08 / 10 / 2004

Amount of Each Disbursement this Period

94.58

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

SUPPLIES

Full Name (Last, First, Middle Initial)

C. Abbots Florists

Mailing Address PO Box 1561

City Champaign State IL Zip Code 61824-

Purpose of Disbursement  
 Supplies

Candidate Name

Office Sought: House Senate President  
 State: District  
 Disbursement For: Primary General  
 Other (specify) ▼

001  
 Category/  
 Type

Transaction ID: 1004200424E1918  
 Date of Disbursement

09 / 16 / 2004

Amount of Each Disbursement this Period

57.70

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶

189.16

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 25 / 47

<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

**A.** Full Name (Last, First, Middle Initial)  
Ameren IP

Mailing Address P.O. Box 511

City Decatur State IL Zip Code 62525-

Purpose of Disbursement Utilities

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type 001

Transaction ID: D819200434E1875  
Date of Disbursement 07 / 15 / 2004

Amount of Each Disbursement this Period 45.45

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

UTILITIES

**B.** Full Name (Last, First, Middle Initial)  
Ameren IP

Mailing Address P.O. Box 511

City Decatur State IL Zip Code 62525-

Purpose of Disbursement Utilities

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type 001

Transaction ID: D819200434E1898  
Date of Disbursement 08 / 15 / 2004

Amount of Each Disbursement this Period 49.78

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

UTILITIES

**C.** Full Name (Last, First, Middle Initial)  
Ameren IP

Mailing Address P.O. Box 511

City Decatur State IL Zip Code 62525-

Purpose of Disbursement Utilities

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type 001

Transaction ID: 1004200424E1919  
Date of Disbursement 09 / 16 / 2004

Amount of Each Disbursement this Period 47.08

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

UTILITIES

**SUBTOTAL** of Disbursements This Page (optional) ▶ **142.32**

**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 26 / 47

<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.** Bank Illinois

Mailing Address 100 W. University Avenue

City Champaign State IL Zip Code 61820-

Purpose of Disbursement Taxes

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: D819200434E1888  
Date of Disbursement

07 / 28 / 2004

Amount of Each Disbursement this Period

22.54

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TAXES

Full Name (Last, First, Middle Initial)

**B.** Bank Illinois

Mailing Address 100 W. University Avenue

City Champaign State IL Zip Code 61820-

Purpose of Disbursement Taxes

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: D819200434E1888  
Date of Disbursement

07 / 28 / 2004

Amount of Each Disbursement this Period

1684.12

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TAXES

Full Name (Last, First, Middle Initial)

**C.** Busey Bank

Mailing Address 201 W. Main

City Urbana State IL Zip Code 61801-

Purpose of Disbursement Interest Payment

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General  
Other (specify) ▼

009  
Category/  
Type

Transaction ID: D819200434E1876  
Date of Disbursement

07 / 15 / 2004

Amount of Each Disbursement this Period

715.71

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

INTEREST PAYMENT

SUBTOTAL of Disbursements This Page (optional) ▶

2422.37

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 / 47

<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.** Busey Bank

Mailing Address 201 W. Main

City Urbana State IL Zip Code 61801-

Purpose of Disbursement  
 Interest Payment

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General  
 Other (specify) ▼

009  
 Category/  
 Type

Transaction ID: D8192D0434E1896  
 Date of Disbursement

08 / 10 / 2004

Amount of Each Disbursement this Period

749.58

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

INTEREST PAYMENT

Full Name (Last, First, Middle Initial)

**B.** Busey Bank

Mailing Address 201 W. Main

City Urbana State IL Zip Code 61801-

Purpose of Disbursement  
 Interest Payment

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General  
 Other (specify) ▼

009  
 Category/  
 Type

Transaction ID: 10042D0424E1921  
 Date of Disbursement

08 / 10 / 2004

Amount of Each Disbursement this Period

789.22

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

INTEREST PAYMENT

Full Name (Last, First, Middle Initial)

**C.** Devonshire Realty

Mailing Address PO Box 14D

City Champaign State IL Zip Code 61824-014D

Purpose of Disbursement  
 Rent

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General  
 Other (specify) ▼

0D1  
 Category/  
 Type

Transaction ID: 08192D0434E1873  
 Date of Disbursement

07 / 09 / 2004

Amount of Each Disbursement this Period

546.25

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

RENT

SUBTOTAL of Disbursements This Page (optional) ▶

2085.03

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 / 47

<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. Devonshire Realty

Mailing Address PO Box 140

City Champaign State IL Zip Code 61824-0140

Purpose of Disbursement  
Rent

Candidate Name

Office Sought: House Senate President  
Disbursement For: Primary General Other (specify) ▼

State: District

001  
Category/  
Type

Transaction ID: D519200434E1877  
Date of Disbursement

07 / 15 / 2004

Amount of Each Disbursement this Period

10.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

RENT

Full Name (Last, First, Middle Initial)

B. Devonshire Realty

Mailing Address PO Box 140

City Champaign State IL Zip Code 61824-0140

Purpose of Disbursement  
Rent

Candidate Name

Office Sought: House Senate President  
Disbursement For: Primary General Other (specify) ▼

State: District

001  
Category/  
Type

Transaction ID: D519200434E1892  
Date of Disbursement

08 / 09 / 2004

Amount of Each Disbursement this Period

556.25

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

RENT

Full Name (Last, First, Middle Initial)

C. Devonshire Realty

Mailing Address PO Box 140

City Champaign State IL Zip Code 61824-0140

Purpose of Disbursement  
Rent

Candidate Name

Office Sought: House Senate President  
Disbursement For: Primary General Other (specify) ▼

State: District

001  
Category/  
Type

Transaction ID: 1004200424E1922  
Date of Disbursement

09 / 16 / 2004

Amount of Each Disbursement this Period

556.25

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

RENT

SUBTOTAL of Disbursements This Page (optional) ▶

1122.50

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 / 47

<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. Director of Employment Security**

Mailing Address 850 East Madison Street

City Springfield State IL Zip Code 62702-

Purpose of Disbursement  
 Taxes

Candidate Name

Office Sought: House Senate President  
 State: District  
 Disbursement For: Primary General Other (specify) ▼

001  
 Category/  
 Type

Transaction ID: D819200434E1888  
 Date of Disbursement

07 / 28 / 2004

Amount of Each Disbursement this Period

224.68

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

TAXES

Full Name (Last, First, Middle Initial)  
**B. Director of Employment Security**

Mailing Address 850 East Madison Street

City Springfield State IL Zip Code 62702-

Purpose of Disbursement  
 Taxes

Candidate Name

Office Sought: House Senate President  
 State: District  
 Disbursement For: Primary General Other (specify) ▼

001  
 Category/  
 Type

Transaction ID: D819200434E1897  
 Date of Disbursement

08 / 10 / 2004

Amount of Each Disbursement this Period

53.68

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

TAXES

Full Name (Last, First, Middle Initial)  
**C. Federal Express**

Mailing Address 2001 Federal Way

City Urbana State IL Zip Code 61801-

Purpose of Disbursement  
 Postage

Candidate Name

Office Sought: House Senate President  
 State: District  
 Disbursement For: Primary General Other (specify) ▼

001  
 Category/  
 Type

Transaction ID: D819200434E1874  
 Date of Disbursement

07 / 14 / 2004

Amount of Each Disbursement this Period

17.15

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

POSTAGE

SUBTOTAL of Disbursements This Page (optional) ▶

295.51

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 / 47

<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. Illinois Department of Rev

Mailing Address Willard Ice Bldg.  
101 West Jefferson

City Springfield State IL Zip Code 62702-

Purpose of Disbursement  
Taxes

Candidate Name

Office Sought: House Senate President  
State: District  
Disbursement For: Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: D8192D0434E18B7  
Date of Disbursement

07 / 28 / 2004

Amount of Each Disbursement this Period

189.10

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TAXES

Full Name (Last, First, Middle Initial)  
B. Keelan Communications

Mailing Address PO Box 2776

City Arlington State VA Zip Code 22202-

Purpose of Disbursement  
Fundraising Expenses

Candidate Name

Office Sought: House Senate President  
State: District  
Disbursement For: Primary General  
Other (specify) ▼

003  
Category/  
Type

Transaction ID: 10042D0424E1912  
Date of Disbursement

08 / 30 / 2004

Amount of Each Disbursement this Period

7560.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING EXPENSES

Full Name (Last, First, Middle Initial)  
C. Keelan Communications

Mailing Address PO Box 2776

City Arlington State VA Zip Code 22202-

Purpose of Disbursement  
Fundraising Expenses

Candidate Name

Office Sought: House Senate President  
State: District  
Disbursement For: Primary General  
Other (specify) ▼

003  
Category/  
Type

Transaction ID: 10042D0424E1913  
Date of Disbursement

08 / 30 / 2004

Amount of Each Disbursement this Period

1542.37

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING EXPENSES

SUBTOTAL of Disbursements This Page (optional) ▶

9291.47

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 / 47

<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. Brian Kelly

Mailing Address 2404 Windward Blvd Apt 203  
#204

City Champaign State IL Zip Code 61821-

Purpose of Disbursement  
Salary

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: D8192D0434E1890  
Date of Disbursement

07 / 30 / 2004

Amount of Each Disbursement this Period

719.06

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

B. Brian Kelly

Mailing Address 2404 Windward Blvd Apt 203  
#204

City Champaign State IL Zip Code 61821-

Purpose of Disbursement  
Salary

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: 10042D0424E19D7  
Date of Disbursement

08 / 29 / 2004

Amount of Each Disbursement this Period

1369.62

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

C. Brian Kelly

Mailing Address 2404 Windward Blvd Apt 203  
#204

City Champaign State IL Zip Code 61821-

Purpose of Disbursement  
Travel Reimbursement

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General  
Other (specify) ▼

002  
Category/  
Type

Transaction ID: 10042D0424E1915  
Date of Disbursement

09 / 02 / 2004

Amount of Each Disbursement this Period

69.19

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TRAVEL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ▶

2145.87

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 / 47

<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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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. Brian Kelly

Mailing Address 2404 Windward Blvd Apt 203  
 #204

City Champaign State IL Zip Code 61821-

Purpose of Disbursement  
 Travel Reimbursement

Candidate Name

Office Sought: House Senate President  
 State: District  
 Disbursement For: Primary General  
 Other (specify) ▼

002  
 Category/  
 Type

Transaction ID: 1004200424E1931  
 Date of Disbursement

09 / 24 / 2004

Amount of Each Disbursement this Period

199.80

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

TRAVEL REIMBURSEMENT

Full Name (Last, First, Middle Initial)

B. Brian Kelly

Mailing Address 2404 Windward Blvd Apt 203  
 #204

City Champaign State IL Zip Code 61821-

Purpose of Disbursement  
 Salary

Candidate Name

Office Sought: House Senate President  
 State: District  
 Disbursement For: Primary General  
 Other (specify) ▼

001  
 Category/  
 Type

Transaction ID: 1004200424E1937  
 Date of Disbursement

09 / 30 / 2004

Amount of Each Disbursement this Period

1369.62

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

C. Kinkos

Mailing Address 505 S. Mattis

City Champaign State IL Zip Code 61821-

Purpose of Disbursement  
 Printing

Candidate Name

Office Sought: House Senate President  
 State: District  
 Disbursement For: Primary General  
 Other (specify) ▼

003  
 Category/  
 Type

Transaction ID: 0819200434E1895  
 Date of Disbursement

08 / 10 / 2004

Amount of Each Disbursement this Period

67.98

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

PRINTING

SUBTOTAL of Disbursements This Page (optional) ▶

1631.40

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 / 47

<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. Managed Tax Services**

Mailing Address 2501 Galen Dr

City Champaign State IL Zip Code 61820-

Purpose of Disbursement  
 Tax Services

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General  
 Other (specify) ▼

001  
 Category/  
 Type

Transaction ID: D519200434E18B3  
 Date of Disbursement

07 / 26 / 2004

Amount of Each Disbursement this Period

450.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

TAX SERVICES

Full Name (Last, First, Middle Initial)

**B. Mcleod USA**

Mailing Address 2302 Fox Dr

City Champaign State IL Zip Code 61820-

Purpose of Disbursement  
 Phone Service

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General  
 Other (specify) ▼

001  
 Category/  
 Type

Transaction ID: D519200434E18B4  
 Date of Disbursement

07 / 26 / 2004

Amount of Each Disbursement this Period

38.80

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)

**C. Mcleod USA**

Mailing Address 2302 Fox Dr

City Champaign State IL Zip Code 61820-

Purpose of Disbursement  
 Phone Services

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General  
 Other (specify) ▼

001  
 Category/  
 Type

Transaction ID: 1004200424E1911  
 Date of Disbursement

08 / 30 / 2004

Amount of Each Disbursement this Period

16.16

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

PHONE SERVICES

SUBTOTAL of Disbursements This Page (optional) ▶

505.05

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 / 47

<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. Mcleod USA

Mailing Address 2302 Fox Dr

City Champaign State IL Zip Code 61820-

Purpose of Disbursement  
Phone Service

Candidate Name

Office Sought: House Senate President  
State: District  
Disbursement For: Primary General Other (specify) ▼

001  
Category/  
Type

Transaction ID: 1004200424E1926  
Date of Disbursement

09 / 22 / 2004

Amount of Each Disbursement this Period

18.48

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)  
B. Maureen OSullivan

Mailing Address 803 W. Springfield #B

City Champaign State IL Zip Code 61820-

Purpose of Disbursement  
Salary

Candidate Name

Office Sought: House Senate President  
State: District  
Disbursement For: Primary General Other (specify) ▼

001  
Category/  
Type

Transaction ID: D519200434E1879  
Date of Disbursement

07 / 20 / 2004

Amount of Each Disbursement this Period

795.90

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)  
C. Omni

Mailing Address 2 South Old State Capitol Plaza

City Springfield State IL Zip Code 62701-

Purpose of Disbursement  
Advertising Expense

Candidate Name

Office Sought: House Senate President  
State: District  
Disbursement For: Primary General Other (specify) ▼

004  
Category/  
Type

Transaction ID: 1004200424E1924  
Date of Disbursement

09 / 22 / 2004

Amount of Each Disbursement this Period

1500.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

ADVERTISING EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

2314.38

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 35 / 47

<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. Andy Patrick

Mailing Address 7397 N 1200th Street

City Paris State IL Zip Code 61944-

Purpose of Disbursement  
SEPTEMBER 3RD EVENT MEAL

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

Category/  
Type

Transaction ID: 1004200424C6269IK  
Date of Disbursement

09 / 30 / 2004

Amount of Each Disbursement this Period

477.85

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

IN KIND: SEPTEMBER 3RD EV-  
ENT MEAL

Full Name (Last, First, Middle Initial)  
B. Personal Service

Mailing Address 101 North Broadway  
PO Box 48

City Goraville State IL Zip Code 62630-

Purpose of Disbursement  
Campaign Signs

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

OD6  
Category/  
Type

Transaction ID: 1004200424E19D5  
Date of Disbursement

08 / 30 / 2004

Amount of Each Disbursement this Period

4200.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CAMPAIGN SIGNS

Full Name (Last, First, Middle Initial)  
C. SBC

Mailing Address 225 W Randolph St  
Floor 27A

City Chicago State IL Zip Code 60606-

Purpose of Disbursement  
Phone Service

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

OD1  
Category/  
Type

Transaction ID: 0819200434E1885  
Date of Disbursement

07 / 26 / 2004

Amount of Each Disbursement this Period

158.25

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

SUBTOTAL of Disbursements This Page (optional) ▶

4836.19

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 36 / 47

<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. SBC

Mailing Address 225 W Randolph St  
 Floor 27A

City Chicago State IL Zip Code 60606-

Purpose of Disbursement  
 Phone Services

Candidate Name

Office Sought: House Senate President  
 Disbursement For: Primary General Other (specify) ▼

State: District

001  
 Category/  
 Type

Transaction ID: 1004200424E19D9  
 Date of Disbursement

08 / 30 / 2004

Amount of Each Disbursement this Period

132.27

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

PHONE SERVICES

Full Name (Last, First, Middle Initial)

B. SBC

Mailing Address 225 W Randolph St  
 Floor 27A

City Chicago State IL Zip Code 60606-

Purpose of Disbursement  
 Phone Service

Candidate Name

Office Sought: House Senate President  
 Disbursement For: Primary General Other (specify) ▼

State: District

001  
 Category/  
 Type

Transaction ID: 1004200424E19D7  
 Date of Disbursement

08 / 22 / 2004

Amount of Each Disbursement this Period

134.03

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)

C. Jason Shelby

Mailing Address 6402 Birchwood Lane

City Decatur State IL Zip Code 62521-

Purpose of Disbursement  
 Salary

Candidate Name

Office Sought: House Senate President  
 Disbursement For: Primary General Other (specify) ▼

State: District

001  
 Category/  
 Type

Transaction ID: 0819200434E1871  
 Date of Disbursement

07 / 07 / 2004

Amount of Each Disbursement this Period

601.33

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

SALARY

SUBTOTAL of Disbursements This Page (optional) ▶

867.63

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 37 / 47

<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. Jason Shelby

Mailing Address 6402 Birchwood Lane

City Decatur State IL Zip Code 62521-

Purpose of Disbursement  
Salary

Candidate Name

Office Sought: House Senate President  
State: District  
Disbursement For: Primary General Other (specify) ▼

001  
Category/  
Type

Transaction ID: D8192D0434E18B1  
Date of Disbursement

07 / 22 / 2004

Amount of Each Disbursement this Period

724.21

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

B. Jason Shelby

Mailing Address 6402 Birchwood Lane

City Decatur State IL Zip Code 62521-

Purpose of Disbursement  
Salary

Candidate Name

Office Sought: House Senate President  
State: District  
Disbursement For: Primary General Other (specify) ▼

001  
Category/  
Type

Transaction ID: 10042D0424E1930  
Date of Disbursement

08 / 12 / 2004

Amount of Each Disbursement this Period

474.37

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

C. Jason Shelby

Mailing Address 6402 Birchwood Lane

City Decatur State IL Zip Code 62521-

Purpose of Disbursement  
Salary

Candidate Name

Office Sought: House Senate President  
State: District  
Disbursement For: Primary General Other (specify) ▼

001  
Category/  
Type

Transaction ID: 10042D0424E1914  
Date of Disbursement

08 / 30 / 2004

Amount of Each Disbursement this Period

502.15

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SALARY

SUBTOTAL of Disbursements This Page (optional) ▶

1700.73

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 38 / 47

<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. Jason Shelby

Mailing Address 6402 Birchwood Lane

City Decatur State IL Zip Code 62521-

Purpose of Disbursement  
Salary

Candidate Name

Office Sought: House Senate President  
Disbursement For: Primary General Other (specify) ▼

State: District

001  
Category/  
Type

Transaction ID: 1004200424E1929  
Date of Disbursement

09 / 23 / 2004

Amount of Each Disbursement this Period

228.39

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

B. Jason Shelby

Mailing Address 6402 Birchwood Lane

City Decatur State IL Zip Code 62521-

Purpose of Disbursement  
Salary

Candidate Name

Office Sought: House Senate President  
Disbursement For: Primary General Other (specify) ▼

State: District

001  
Category/  
Type

Transaction ID: 1004200424E1936  
Date of Disbursement

09 / 30 / 2004

Amount of Each Disbursement this Period

204.58

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address 2005 N. Prospect

City Champaign State IL Zip Code 61821-

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought: House Senate President  
Disbursement For: Primary General Other (specify) ▼

State: District

001  
Category/  
Type

Transaction ID: 0819200422E1901  
Date of Disbursement

08 / 19 / 2004

Amount of Each Disbursement this Period

92.50

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶

525.47

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 39 / 47

<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. Andy Todd

Mailing Address 2738 N. Pine Grove Ave

City Chicago State IL Zip Code 60614-

Purpose of Disbursement  
Software

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

001  
Category/  
Type

Transaction ID: 1004200424E1933  
Date of Disbursement

09 / 27 / 2004

Amount of Each Disbursement this Period

5437.50

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SOFTWARE

Full Name (Last, First, Middle Initial)

B. U.S. Postmaster

Mailing Address 2001 N. Mattis

City Champaign State IL Zip Code 61821-

Purpose of Disbursement  
Postage

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

001  
Category/  
Type

Transaction ID: 0819200422E1902  
Date of Disbursement

08 / 05 / 2004

Amount of Each Disbursement this Period

370.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

C. U.S. Postmaster

Mailing Address 2001 N. Mattis

City Champaign State IL Zip Code 61821-

Purpose of Disbursement  
Postage

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

001  
Category/  
Type

Transaction ID: 0819200422E1903  
Date of Disbursement

08 / 19 / 2004

Amount of Each Disbursement this Period

370.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

SUBTOTAL of Disbursements This Page (optional) ▶

6177.50

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 40 / 47

<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

**A. Upclose Printing**

Full Name (Last, First, Middle Initial)  
 Mailing Address 714 S. 6th

City Champaign State IL Zip Code 61820-

Purpose of Disbursement  
 Printing

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type: 003

Transaction ID: 1004200424E1932  
 Date of Disbursement  
 09 / 27 / 2004

Amount of Each Disbursement this Period  
 489.64

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PRINTING

**B. Verizon Wireless**

Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 6170

City Carol Stream State IL Zip Code 60197-

Purpose of Disbursement  
 Phone Service

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type: 001

Transaction ID: 0819200434E1870  
 Date of Disbursement  
 07 / 09 / 2004

Amount of Each Disbursement this Period  
 58.83

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PHONE SERVICE

**C. Verizon Wireless**

Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 6170

City Carol Stream State IL Zip Code 60197-

Purpose of Disbursement  
 Phone Service

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type: 001

Transaction ID: 0819200434E1878  
 Date of Disbursement  
 07 / 19 / 2004

Amount of Each Disbursement this Period  
 177.92

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PHONE SERVICE

**SUBTOTAL** of Disbursements This Page (optional) ▶ **726.39**

**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 41 / 47

<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**

Mailing Address PO Box 6170

City Carol Stream State IL Zip Code 60197-

Purpose of Disbursement  
 Phone Service

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type: 001

Transaction ID: D519200434E1882  
 Date of Disbursement  
 07 / 26 / 2004

Amount of Each Disbursement this Period  
 137.84

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)  
**B. Verizon Wireless**

Mailing Address PO Box 6170

City Carol Stream State IL Zip Code 60197-

Purpose of Disbursement  
 Phone Service

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type: 001

Transaction ID: D519200434E1894  
 Date of Disbursement  
 08 / 10 / 2004

Amount of Each Disbursement this Period  
 58.86

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)  
**C. Verizon Wireless**

Mailing Address PO Box 6170

City Carol Stream State IL Zip Code 60197-

Purpose of Disbursement  
 Phone Service

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type: 001

Transaction ID: 1004200424E1906  
 Date of Disbursement  
 08 / 23 / 2004

Amount of Each Disbursement this Period  
 182.28

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PHONE SERVICE

**SUBTOTAL** of Disbursements This Page (optional) ▶ **378.98**

**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 42 / 47

<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. Verizon Wireless

Mailing Address PO Box 6170

City State Zip Code  
Carol Stream IL 60197-

Purpose of Disbursement  
Phone Service

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: 1004200424E1910  
Date of Disbursement

08 / 30 / 2004

Amount of Each Disbursement this Period

135.02

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)  
B. Verizon Wireless

Mailing Address PO Box 6170

City State Zip Code  
Carol Stream IL 60197-

Purpose of Disbursement  
Phone Service

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: 1004200424E1920  
Date of Disbursement

08 / 16 / 2004

Amount of Each Disbursement this Period

58.87

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)  
C. Verizon Wireless

Mailing Address PO Box 6170

City State Zip Code  
Carol Stream IL 60197-

Purpose of Disbursement  
Phone Service

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: 1004200424E1917  
Date of Disbursement

08 / 16 / 2004

Amount of Each Disbursement this Period

97.23

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

SUBTOTAL of Disbursements This Page (optional) ▶

291.12

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 43 / 47

<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. Verizon Wireless**

Mailing Address PO Box 6170

City Carol Stream State IL Zip Code 60197-

Purpose of Disbursement  
 Phone Service

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General Other (specify) ▼

001  
 Category/  
 Type

Transaction ID: 1004200424E1925  
 Date of Disbursement

09 / 22 / 2004

Amount of Each Disbursement this Period

182.28

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)  
**B. Verizon Wireless**

Mailing Address PO Box 6170

City Carol Stream State IL Zip Code 60197-

Purpose of Disbursement  
 Phone Services

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: Primary General Other (specify) ▼

001  
 Category/  
 Type

Transaction ID: 1004200424E1925  
 Date of Disbursement

09 / 22 / 2004

Amount of Each Disbursement this Period

143.55

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

PHONE SERVICES

SUBTOTAL of Disbursements This Page (optional) ▶

325.83

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

37974.90

**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 44 / 47
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

Transaction ID: LS51014.08347

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Busey Bank	<b>Election:</b> <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 100000.00	Cumulative Payment To Date 725.12	Balance Outstanding at Close of This Period 99274.88	

<b>TERMS</b>	Date Incurred 01 <sup>st</sup> 24 <sup>th</sup> 2000	Date Due 20050521	Interest Rate 6.750 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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<b>List All Endorsers or Guarantors (if any) to Loan Source</b>			
Full Name (Last, First, Middle Initial) Timothy V. Johnson	Name of Employer		
Mailing Address 413 Berringer Circle	Occupation		
City Urbana State IL ZIP Code 61802-	Amount Guaranteed Outstanding:	99274.88	
Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:		
Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:		
Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:		

<b>SUBTOTALS</b> This Period This Page (optional) .....	<b>99274.88</b>
<b>TOTALS</b> This Period (last page in this line only) .....	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 45 / 47
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

Transaction ID: LS51014.08348

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Busey Bank	<b>Election:</b> <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 40000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 40000.00	

<b>TERMS</b>	Date Incurred 03 <sup>rd</sup> 09 <sup>th</sup> 2000	Date Due 20050521	Interest Rate 6.750 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

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

**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 46 / 47
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

Transaction ID: LS102020002C2771

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) First State Bank of Monticello	<b>Election:</b> <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 61856-			
Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00	

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	10 <sup>th</sup> 05 <sup>th</sup> 2000	20041005	7.000 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>List All Endorsers or Guarantors (if any) to Loan Source</b>			
Full Name (Last, First, Middle Initial) Timothy V. Johnson	Name of Employer		
Mailing Address 413 Berringer Circle	Occupation		
City Urbana State IL ZIP Code 61802-	Amount Guaranteed Outstanding:	100000.00	
Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:		
Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:		
Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:		

<b>SUBTOTALS</b> This Period This Page (optional) .....	<b>100000.00</b>
<b>TOTALS</b> This Period (last page in this line only) .....	<b>239274.88</b>
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**

NAME OF COMMITTEE (In Full)  
Friends of Tim Johnson

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

FOR LINE NUMBER:  
(check only one)

9  
 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Busey Bank			Nature of Debt (Purpose): 009 Accrued Payment	
Mailing Address 201 W. Main				
City	State	ZIP Code		
Urbana	IL	61801-		
Outstanding Balance Beginning This Period			Transaction ID: LS0819200434E1876	
232.12				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
2300.00		2254.49	277.63	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor First State Bank of Monticello			Nature of Debt (Purpose): 009 Accrued Interest	
Mailing Address 201 West Main Street PO Box 260				
City	State	ZIP Code		
Monticello	IL	61856-		
Outstanding Balance Beginning This Period			Transaction ID: LS41D13.E1952	
3500.00				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
3500.00		0.00	7000.00	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	<b>7277.63</b>
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	<b>7277.63</b>
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	