FEC FORM 3		T OF REC SBURSEN Authorized Comm	IENTS		Offic	e Use Only
1. NAME OF COMMITTEE (in	full) USE FEC MAI		ample:If typing, type er the lines	9	• • • • • •	
Friends of Tim Jo	hnson					
ADDRESS (number a	IPO Box 17	 7097				
Check if diff than previou reported. (Ar	erent					
2. FEC IDENTIFICA	ATION NUMBER 🛛 🗑			STA		
C0035042	1	3. IS THIS REPORT	X NEW (N)	OR	AMENDED (A)	STATE ♥ DISTRICT
	- ((b) 12-Day PRE	E-Election Report fo Primary (12P) Convention (120		General (12G) Special (12S)	Runoff (12R)
	r 15 Quarterly Report (Q3)	Election on				in the State of
Januar	y 31 Year-End Report (YE)	(c) 30-Day POS	ST-Election Report	for the:		
Termin	ation Report (TER)	Election on	General (30G)		Runoff (30R)	Special (30S) in the State of
5. Covering Period	01 17	2008	through	03	3 1	2008
I certify that I have exa Type or Print Name of	amined this Report and to th Treasurer Brian		e and belief it is true	e, correct and	l complete.	
Signature of Treasure NOTE : Submission o	r Electronically Filed by	Brian Kelly plete information may s	subject the person s	Date		1 5 2 0 0 8 Ities of 2 U.S.C 437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

Image# 28931156777		SUMMARY PAGE	
	FEC Form 3 (Revised 02/2003)	of Receipts and Disbursements	Page 2
V	Vrite or Type Committee Name		
F	Friends of Tim Johnson		
F	Report Covering the Period: From:	M M D D Y Y Y Y 0 1 1 7 2 0 0 8	To: 03 D D 200
		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		
	(a) Total Contributions(other than loans) (from Line 11(e))	48345.00	179548.5
	(b) Total Contribution Refunds (from Line 20(d))	0.00	1000.0
	(c) Net Contributions (other than loans)(subtract Line 6(b) from Line 6(a))	48345.00	178548.5
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	9302.10	102069.2
	(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	642.7
	(c) Net Operating Expenditures(subtract Line 7(b) from Line 7(a))	9302.10	101426.5
8.	Cash on Hand at Close of Reporting Period (from Line 27)	106759.16	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	5206.74	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

FE5AN018

FEC Form 3 (Revised 12/2003) Write or Type Committee Name Friends of Tim Johnson		of Receipts		Page 3
Filer				
Repo	ort Covering the Period: From:	M M D D Y	To:	M M D D V Y Y Y 0 3 3 1 2 0
	I. RECEIPTS	COLUMN A Total This Period		COLUMN B Election Cycle-to-Date
1. CC	ONTRIBUTIONS (other than loans) FRO	И:		
(a)) Individuals/Persons Other Than Political Committees	9700.00	Γ	36279.0
	(i) Itemized (use Schedule A)	25570.00	Ē	36450.0
	 (ii) Unitemized (iii) TOTAL of contributions from individuals 	35270.00		72729.0
(b)		0.00	Γ	350.0
(b) (c)		13075.00	Ī	106469.4
(d) (e)	,,,,,,,	0.00		0.0
(0)	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	48345.00		179548.5
	RANSFERS FROM OTHER JTHORIZED COMMITTEES	0.00		0.0
3. LC	DANS	_		
(a)) Made or Guaranteed by the Candidate	0.00		0.0
(h)		0.00	Γ	0.0
(b) (c)	, 	0.00	Ē	0.0
	FFSETS TO OPERATING KPENDITURES	-	Г	a (a =
	lefunds, Rebates, etc.)	0.00		642.7
	THER RECEIPTS lividends, Interest, etc.)	0.00		0.0
	DTAL RECEIPTS (add Lines (e), 12, 13(c), 14, and 15)	- 48345.00		180191.2

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3 (Revised 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
17. OPERATING EXPENDITURES	9302.10	102069.25	
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00	
19. LOAN REPAYMENTS:(a) Of Loans Made or Guaranteed by the Candidate	9.92	64373.54	
 (b) Of all Other Loans (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)) 	0.00	0.00 64373.54	
20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees	0.00	0.00	
 (b) Political Party Committees (c) Other Political Committees (such as PACs) 	0.00	0.00	
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	1000.00	
21. OTHER DISBURSEMENTS	0.00	250.00	
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	9312.02	167692.79	

III. CASH SUMMARY

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD	67726.18
24.	TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)	48345.00
25.	SUBTOTAL (add Line 23 and Line 24)	116071.18
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	9312.02
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	106759.16

communication contributing con	Ad Statements may not be sold or used by any pers the name and address of any political committee to N.W. State Zip Code DC 20004 C C00106146 Occupation Election Cycle-to-Date ▼ 7500.00	Date of Receipt Date of Receipt 0 3 / 2 5 / 2 0 0 8 Transaction ID: 80413.C7744 Amount of Each Receipt this Period 1000.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
on nber of contributing ical committee. nployer 2008 try X General (specify) ▼	State Zip Code DC 20004 C C00106146 Occupation Election Cycle-to-Date	M M M / D D / Y Y Y Y Y 0 3 / 2 5 / 2 0 0 8 Transaction ID: 80413.C7744 Amount of Each Receipt this Period 1000.00 Receipt Limit Increased Due to Opponent's
on nber of contributing ical committee. nployer :: 2008 rry X General (specify) ▼	State Zip Code DC 20004 C C00106146 Occupation Election Cycle-to-Date	Transaction ID: 80413.C7744 Amount of Each Receipt this Period 1000.00 Receipt Limit Increased Due to Opponent's
nber of contributing ical committee. nployer :: 2008 ary X General (specify) ▼	DC 20004 C C00106146 Occupation Election Cycle-to-Date	Amount of Each Receipt this Period 1000.00 Receipt Limit Increased Due to Opponent's
nber of contributing ical committee. nployer :: 2008 ary X General (specify) ▼	C C00106146 Occupation Election Cycle-to-Date ▼	1000.00 Receipt Limit Increased Due to Opponent's
r: 2008 ary X General (specify) ▼	Election Cycle-to-Date	Limit Increased Due to Opponent's
rry X General (specify) ▼		
		-
Last, First, Middle Initial) erials Inc. PAC (AMPAC) Iress 1611 Duke St		Date of Receipt
	State Zip Code	Transaction ID: 80413.C7747
a	VA 22314	Amount of Each Receipt this Period
nber of contributing ical committee.	C C00406892	1000.00
nployer	Occupation	Receipt Limit Increased Due to Opponent's
:: 2008 rry X General (specify) ▼	Election Cycle-to-Date 3000.00	Spending (2 U.S.C. 441a(i)/441a-1)
Last, First, Middle Initial)		Date of Receipt
lress 1910 Sunderland P	M M / D D / Y Y Y Y 03 25 2008	
	State Zip Code	Transaction ID: 80413.C7746
on	DC 20036-1642	Amount of Each Receipt this Period
nber of contributing ical committee.	C C00114132	1000.00
nployer	Occupation	Receipt Limit Increased Due to Opponent's
	Election Cycle-to-Date 2000.00	Spending (2 U.S.C. 441a(i)/441a-1)
:: 2008 ury X General (specify) ▼		
r	cal committee.	cal committee.

ľ	CHEDULE A (FEC Form 3) FEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	
			ittee to solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Engineers Political Education Committee Mailing Address 1125 Seventeenth Stre		
	City Washington	State Zip Code DC 20036	0 2 2 9 2 0 0 8 Transaction ID: 80413.C7751 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00029504	2500.00
	Name of Employer Receipt For: 2008 Primary X General Other (specify)	Occupation Election Cycle-to-Date ▼ 24500.0	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
— В.	Full Name (Last, First, Middle Initial) Illinois Pork PAC Mailing Address 6411 South 6th Street Frontage Road, East	State Zip Code	Date of Receipt 0 2 2 9 2 0 0 8 Transaction ID: 80413.C7749
	Springfield FEC ID number of contributing federal political committee.	IL 62707 C C00175976	Amount of Each Receipt this Period 175.00 Receipt
	Name of Employer Receipt For: 2008 Primary X General Other (specify) ▼	Occupation Election Cycle-to-Date V 950.1	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 C.	Full Name (Last, First, Middle Initial) Nat. Assoc. of Retired Fed. Employees Mailing Address (NARFE) 606 N Washington St		Date of Receipt
	City Alexandria	State Zip Code VA 22314	Transaction ID: 80413.C8152 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00091561	1000.00
	Name of Employer Receipt For: 2008 Primary X General Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 5000.	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
		I	3675.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	ts and Statements may not be sold or used by any perso	FOR LINE NUMBER: PAGE 7/31 (check only one) 11a 11b X 11c 11d 12 13a 13b 14 15		
NAME OF COMMITTEE (In Full) Friends of Tim Johnson	ising the name and address of any political committee to	solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) National Air Traffic Controllers Assn. Mailing Address 1325 Massachu	isettes Avenue., NW	Date of Receipt		
City	State Zip Code	Transaction ID: 80413.C7745		
Washington	DC 20005	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C C00238725	1500.00		
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's		
Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date 10000.00	Spending (2 U.S.C. 441a(i)/441a-1)		
Full Name (Last, First, Middle Initial) B. NEA PAC		Date of Receipt		
	Mailing Address 1201 16th Street, N.W., Suite 421			
City	State Zip Code	Transaction ID: 80413.C7756		
Washington	DC 20036	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C C00003251	1000.00		
Name of Employer	Occupation	 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) 		
Receipt For: 2008	Election Cycle-to-Date			
Other (specify)	23000.00			
Full Name (Last, First, Middle Initial) Tuesday Group PAC		Date of Receipt		
Mailing Address P O Box 40385		03 / D D / Y Y Y Y 2008		
City Washington	State Zip Code DC 20016	Transaction ID: 80413.C7574		
FEC ID number of contributing federal political committee.	C C00433060	Amount of Each Receipt this Period		
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's		
Receipt For: 2008 Primary X Other (specify)	Election Cycle-to-Date ▼ 7500.00	Spending (2 U.S.C. 441a(i)/441a-1)		
SUBTOTAL of Receipts This Page (op)	tional)	5000.00		
	number only)			

	SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Friends of Tim Johnson	statements may name and add	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any pers dress of any political committee to	FOR LINE NUMBER: PAGE 8 / 31 (check only one) 11a 11a 11b 11c 11d 12 13a 13b 14 15 on for the purpose of soliciting contributions o solicit contributions from such committee. 11a 15
Α.	Full Name (Last, First, Middle Initial) United Political Action Committee Mailing Address 655 Deerfield Road Suite 100 City Deerfield FEC ID number of contributing	State IL	Zip Code 60015-3241	Date of Receipt 0 3 ' 3 1 ' 2 0 0 8 Transaction ID: 80413.C7573 Amount of Each Receipt this Period
	In the of contributing federal political committee. Name of Employer Receipt For: 2008 Primary X General Other (specify) ▼	Occupation	0152280 n Cycle-to-Date ▼ 400.00	400.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
в.	Full Name (Last, First, Middle Initial) Zeneca Inc. PAC (AZ PAC) Mailing Address 1800 Concord Pike PO Box 15438 City Wilmington FEC ID number of contributing federal political committee.	State DE C C00	Zip Code 19850-5438 0279455	Date of Receipt M M M / D 2 9 / Y Y Y Y Transaction ID: 80413.C7753 Amount of Each Receipt this Period 1000.00 Descript
	Name of Employer Receipt For: 2008 Primary X General Other (specify) ▼	Cccupation Election C	n Cycle-to-Date ▼ 1000.00	 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	►	1400.00
TOTAL This Period (last page this line number only)	►	13075.00

IT	CHEDULE A (FEC Form 3) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page Statements may not be sold or used by any pe	FOR LINE NUMBER: PAGE 9 / 31 (check only one) X 11a 11b 11c 11d 12 13a 13b 14
or	NAME OF COMMITTEE (In Full) Friends of Tim Johnson	he name and address of any political committee	to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Sharon Andrae Mailing Address 404 Beringer Circle		Date of Receipt
	City	State Zip Code	Transaction ID: 80413.C7880
	Urbana	IL 61802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Self	Occupation Motorcyle Dealer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date 500.00	
	Full Name (Last, First, Middle Initial) Robert Arrol Mailing Address 239 South Ridge		Date of Receipt
		State Zip Code	02 29 2008
	City Arcola	State Zip Code IL 61910	Transaction ID: 80413.C7755 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Self-employed	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date 250.00	
	Full Name (Last, First, Middle Initial) Robert Arrol		Date of Receipt
	Mailing Address 239 South Ridge	M M / D D / Y Y Y Y 03 25 2008	
	City	State Zip Code	Transaction ID: 80413.C8141
	Arcola	IL 61910	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00 Receipt
	Name of Employer Self-employed	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X Other (specify)	Election Cycle-to-Date 375.00	Spending (2 0.5.0. 44 ra(i)/44 ra-1)
			725.00

ľ	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso dress of any political committee to	FOR LINE NUMBER: PAGE 10 / 31 (check only one) (check only one) X 11a 11b 11c 11d 12 13a 13b 14 15 on for the purpose of soliciting contributions osolicit contributions from such committee. 10 10
	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
A.	Full Name (Last, First, Middle Initial) Clint Atkins Mailing Address 2805 Boulder Drive			Date of Receipt
	City	State	Zip Code	Transaction ID: 80413.C7580
	Urbana	IL	61802-6988	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer The Atkins Group	Occupatio Owner		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 5625.00	
в.	Full Name (Last, First, Middle Initial) John Blair			Date of Receipt
	Mailing Address 4 Waters Edge			03 / D D / Y Y Y Y 25 / 2008
	City	State IL	Zip Code	Transaction ID: 80413.C7878
	Paris FEC ID number of contributing federal political committee.	C	61944	Amount of Each Receipt this Period
	Name of Employer Fentz Contractors, Inc	Occupatio Civil Eng		Ecceipt Limit Increased Due to Opponent's Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼		Cycle-to-Date ▼ 3250.00	Spending (2 U.S.C. 441a(i)/441a-1)
с. –	Full Name (Last, First, Middle Initial) Byron & Shirley Boddy			Date of Receipt
	Mailing Address RR 2 Box 167			03 / D D / Y Y Y Y 25 / 2008
	City Lovington	State II	Zip Code 61937	Transaction ID: 80413.C8018 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self- Employed	Occupatio Homema		Ecceipt Limit Increased Due to Opponent's Limit Increased Due to Opponent's
	Receipt For: 2008 Primary General X Other (specify) ▼ Primary Primary	Election C	Cycle-to-Date ▼ 500.00	
Γ	SUBTOTAL of Receipts This Page (optional) .		·····	1250.00
	TOTAL This Period (last page this line numbe	er only)		

Π	CHEDULE A (FEC Form 3) EMIZED RECEIPTS	Statements may	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any pers	FOR LINE NUMBER: PAGE 11 / 31 (check only one) Image: Check only one) X 11a 11b 11c 11d 12 13a 13b 14 1 on for the purpose of soliciting contributions
	r for commercial purposes, other than using th NAME OF COMMITTEE (In Full) Friends of Tim Johnson	ne name and add	dress of any political committee to	o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Paul Bretz Mailing Address 1675 E County Rd 11	150 N		Date of Receipt
		150 N		03 25 2008
	City	State	Zip Code	Transaction ID: 80413.C7872
	Villa Grove	IL	61956	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer	Occupatio	n	Receipt
	retired	Retired		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X Other (specify) ▼	Election C	Cycle-to-Date ▼ 1550.00	
. —	Full Name (Last, First, Middle Initial) Les Busboom			Date of Receipt
	Mailing Address 506 East Main			M = M / D = D / Y = Y = Y Y 03 25 2008
	City	State	Zip Code	Transaction ID: 80413.C7873
	Royal		61871	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer United Feeds, Inc.	Occupatio Grain Ele	n evator Manager	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X Other (specify)	Election C	Cycle-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) David Eades			Date of Receipt
	Mailing Address 1701 Broadmoor Driv Suite 200	ve		M M / D D / Y Y Y Y 0 3 25 2008
	City	State	Zip Code	Transaction ID: 80413.C7879
	Champaign		61821	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self- Employed	Occupation Orthopte	rist	 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X Other (specify)	Election C	Cycle-to-Date ▼ 800.00	
	SUBTOTAL of Receipts This Page (optional)		_	1000.00

Π	CHEDULE A (FEC Form 3) TEMIZED RECEIPTS ny information copied from such Reports and	for each category of t Detailed Summary Pa	the age X 11a 11b 11c 11d 12 13a 13b 14 11 any person for the purpose of soliciting contributions
	r for commercial purposes, other than using th NAME OF COMMITTEE (In Full) Friends of Tim Johnson	e name and address of any political corr	nmittee to solicit contributions from such committee.
<u>لا</u> ۸.	Full Name (Last, First, Middle Initial) Duane & Bev Ehler Mailing Address PO Box 97		Date of Receipt
	City	State Zip Code	Transaction ID: 80413.C7877
	Thomasboro	IL 61878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Self	Occupation Farmer	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X Other (specify)	Election Cycle-to-Date 500	D.00
	Full Name (Last, First, Middle Initial) James Finnegan Mailing Address 201 Imperial Dr.		
	0.1	01-1-1 7's 0-s-1-	03 25 2008
	City Bloomington	State Zip Code	Transaction ID: 80413.C8137
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 75.00
	Name of Employer State Farm	Occupation Information Requested	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date	5.00
	Full Name (Last, First, Middle Initial) Bob Frederick		Date of Receipt
	Mailing Address 129 West Main Stree		M M M / D D / Y Y Y Y 03 31 / 2008
	City	State Zip Code	Transaction ID: 80413.C7577
	Urbana FEC ID number of contributing federal political committee.	L 61801	Amount of Each Receipt this Period
	Name of Employer Frederick & Hagle	Occupation Attorney	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X Other (specify)	Election Cycle-to-Date 6229	9.00
	SUBTOTAL of Receipts This Page (optional)	1	

ľ	CHEDULE A (FEC Form 3 TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 31 (check only one) (check only one) X 11a 11b 11c 11d 12 13a 13b 14 1
	r for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	the name and address of any political committee to	solicit contributions from such committee.
۷. ۲	Full Name (Last, First, Middle Initial) June Goodwine Mailing Address 1110 W. Clark		Date of Receipt
	City	State Zip Code	Transaction ID: 80413.C7869
	Champaign	IL 61821	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer	Occupation	Receipt
	Self	Farmer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008	Election Cycle-to-Date	Spending (2 0.3.0. 441a(1)/441a-1)
	Other (specify)	370.00	
. —	Full Name (Last, First, Middle Initial) Don Gordon		Date of Receipt
	Mailing Address 3 Sycamore		M M / D D / Y
	City	State Zip Code	Transaction ID: 80413.C7625
	Clinton	IL 61727	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	75.00
	Name of Employer Self- Employed	Occupation Optometrist	 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X Other (specify) ▼	Election Cycle-to-Date 800.00	
	Full Name (Last, First, Middle Initial) Julia Greene		Date of Receipt
	Mailing Address 420 S. Charter		M M / D D / Y Y Y Y 03 25 2008
	City	State Zip Code	Transaction ID: 80413.C7875
	Monticello	IL 61856	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Information Requested	Occupation Information Requested	 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X Other (specify)	Election Cycle-to-Date ▼ 525.00	Spending (2 0.3.0. 4418(1)/4418-1)
Γ	SUBTOTAL of Receipte This Page (optional)	575.00

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS ny information copied from such Reports and r for commercial purposes, other than using th	Statements may r	Use separate schedule(s) for each category of the Detailed Summary Page not be sold or used by any pers ess of any political committee to	FOR LINE NUMBER: PAGE 14/31 (check only one) (check only one) X 11a 11b 11c 11d 12 13a 13b 14 15 on for the purpose of soliciting contributions policit contributions from such committee. 11a 11a
	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
۷ ۹.	Full Name (Last, First, Middle Initial) Bill & Kathryn Hammer Mailing Address RR 2, Box 36			Date of Receipt
	<u>City</u>	Ctata	Zin Codo	03 31 2008
	City Farmer City	State IL	Zip Code 61842	Transaction ID: 80413.C7660 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation Farmer		 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cyc	cle-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Kenneth Harrison Mailing Address 10488 W. 131st St.			Date of Receipt
	City	State	Zip Code	0 2 2 9 2 0 0 8 Transaction ID: 80413.C7748
	Shawnee Mission	KS	66213	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Information Requested		n Requested	 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cyc	cle-to-Date V 250.00	
	Full Name (Last, First, Middle Initial) Craig Hays			Date of Receipt
	Mailing Address 28 Greencroft Drive			M M / D D / Y Y Y Y 03 25 2008
	City	State	Zip Code	Transaction ID: 80413.C7876
	Champaign	IL	61821	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00 Receipt
	Name of Employer C-U News Agency	Occupation Newspape	r Distributor	Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify)		cle-to-Date ▼ 2200.00	Spending (2 U.S.C. 441a(i)/441a-1)
Γ				1000.00

IT	CHEDULE A (FEC Form 3 EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:PAGE $15/31$ (check only one)(check only one)X11a1213a13b141411
or	NAME OF COMMITTEE (In Full) Friends of Tim Johnson	the name and addr	ress of any political committee to	o solicit contributions from such committee.
<u>۷</u> .	Full Name (Last, First, Middle Initial) John & Barbara Hecker Mailing Address 202 South McKinley	Avenue		Date of Receipt
	City Champaign	State IL	Zip Code	Transaction ID: 80413.C7581
	FEC ID number of contributing federal political committee.	C	61821	Amount of Each Receipt this Period
	Name of Employer Stipes Publishing Receipt For: 2008 Primary X General Other (specify) ▼	Occupation Owner Election Cy	rcle-to-Date ▼ 1625.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 3.	Full Name (Last, First, Middle Initial) Andy & Patsy Hocking Mailing Address PO Box 162			Date of Receipt
	City	State	Zip Code	Transaction ID: 80413.C7870
	Mount Carmel FEC ID number of contributing federal political committee.	C	62863	Amount of Each Receipt this Period
	Name of Employer Hocking Oil	Occupation Owner		Energy Control of the second sec
	Receipt For: 2008 Primary X Other (specify) ▼	Election Cy	zcle-to-Date ▼ 250.00	Spending (2 U.S.C. 441a(i)/441a-1)
	Full Name (Last, First, Middle Initial) Dave Kuhl Mailing Address 101 Greencroft Drive	e		Date of Receipt
	City Champaign	State IL	Zip Code 61821	Transaction ID: 80413.C7881
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer Busey Bank	Occupation Banker		 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X Other (specify)	Election Cy	rcle-to-Date ▼ 5425.00	
	UBTOTAL of Receipts This Page (optional)			1750.00

	CHEDULE A (FEC Form 3 EMIZED RECEIPTS	Statements may not be sold	parate schedule(s) a category of the I Summary Page d or used by any perso	FOR LINE NUMBER: PAGE 16/31 (check only one) (check only one) X 11a 11b 11c 11d 12 13a 13b 14 1 on for the purpose of soliciting contributions 11 11 11
	r for commercial purposes, other than using t NAME OF COMMITTEE (In Full) Friends of Tim Johnson	ne name and address of any	y political committee to	solicit contributions from such committee.
¥.	Full Name (Last, First, Middle Initial) James Leonard Mailing Address 1606 E. Golf Drive	State Zip Co		Date of Receipt 0 3 / 0 1 / 2 0 0 8 Transaction ID: 80413.C7578
	Mahomet FEC ID number of contributing federal political committee.	IL 61853	3	Amount of Each Receipt this Period
	Name of Employer Carle Clinic Receipt For: 2008 Primary X General Other (specify) ▼	Occupation Physician Election Cycle-to-Dat	e ▼ 2575.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Full Name (Last, First, Middle Initial) China Ibsen Oughton Mailing Address 404 Old Morris Road			Date of Receipt
	City	State Zip Co	ode	Transaction ID: 80413.C7587
	Dwight FEC ID number of contributing federal political committee.	IL 60420)-1084	Amount of Each Receipt this Period 500.00
	Name of Employer retired Receipt For: 2008 Primary X General Other (specify) ▼	Occupation Retired Election Cycle-to-Dat	e ▼ 1750.00	 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
_	Full Name (Last, First, Middle Initial) Anna Wall Scott			Date of Receipt
	Mailing Address 309 West Michigan			M M / D D / Y
	City Urbana	State Zip Co IL 61801		Transaction ID: 80413.C7803
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 75.00
	Name of Employer Parkland College	Occupation Professor		Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X Other (specify)	Election Cycle-to-Dat	e ▼ 3850.00	Spending (2 U.S.C. 441a(i)/441a-1)
				825.00

I	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17/31 (check only one)
	NAME OF COMMITTEE (In Full) Friends of Tim Johnson	e name and address of any political committee	to solicit contributions from such committee.
Z A.	Full Name (Last, First, Middle Initial) Lois Simms-Voorhees Mailing Address 1108 North Argus City	State Zip Code	Date of Receipt
	Robinson FEC ID number of contributing federal political committee.	IL 62454	Amount of Each Receipt this Period 250.00
	Name of Employer Information Requested Receipt For: 2008 Primary X General Other (specify) ▼	Occupation Information Requested Election Cycle-to-Date 250.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
- В.	Full Name (Last, First, Middle Initial) Michael & Mary Stalter Mailing Address 324 Chestnut		Date of Receipt
	City Pontiac	State Zip Code	Transaction ID: 80413.C7874 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		250.00
	Name of Employer Information Requested Receipt For: 2008 Primary X General Other (specify) ▼	Occupation Information Requested Election Cycle-to-Date ▼ 250.00	 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
– C.	Full Name (Last, First, Middle Initial) Murray Wise		Date of Receipt
	Mailing Address 4309 Crayton Road	State Zip Code	M M / D D / Y
	Naples FEC ID number of contributing federal political committee.	FL 34103	Amount of Each Receipt this Period
	Name of Employer Westchester Group Receipt For: 2008 Primary X General Other (specify) ▼	Occupation Company president Election Cycle-to-Date ▼ 4925.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Γ	SUBTOTAL of Receipts This Page (optional).		1500.00
F	TOTAL This Period (last page this line numbe		▶ 9700.00

CHEDULE B (FEC Form 3)	Use separate schedule(s)	FOR LINE (check on		PAGE 18/31	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 1	19b 21	
ny Information copied from such Reports and State r for commercial purposes, other than using the nar	ments may not be sold or used	by any person	for the purpose of soliciting contribu	tions	
NAME OF COMMITTEE (In Full)					
Friends of Tim Johnson					
Full Name (Last, First, Middle Initial) Results Plus Consulting, Inc.			Transaction ID: 80413.E2810 Date of Disbursement)	
Mailing Address PO Box 17452				0 0 8 1	
City Urbana	StateZip CodeIL61803-		Amount of Each Disbursement t		
Purpose of Disbursement			200	00.00	
Consulting Candidate Name		001 Category/ Type	Refund or Disposal of Exces Contributions Required Under 11 C.F.R. 400.53		
Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify) ▼		CONSULTING		
Full Name (Last, First, Middle Initial)			Transaction ID: 80413.E2815	5	
Results Plus Consulting, Inc.			Date of Disbursement	-	
Mailing Address PO Box 17452				0 0 8	
City Urbana	StateZip CodeIL61803-		Amount of Each Disbursement t		
Purpose of Disbursement				00.00	
Consulting Candidate Name		001 Category/ Type	Refund or Disposal of Exces Contributions Required Under 11 C.F.R. 400.53	er	
Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify) ▼		CONSULTING		
Full Name (Last, First, Middle Initial) Abbotts Florists			Transaction ID: 80413.E2819 Date of Disbursement	9	
Mailing Address PO Box 1561				008	
City Champaign	State Zip Code IL 61824-		Amount of Each Disbursement t		
Purpose of Disbursement		001		56.00	
Supplies Candidate Name		001 Category/ Type	Refund or Disposal of Exces Contributions Required Under 11 C.F.R. 400.53		
Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify) ▼		SUPPLIES		
SUBTOTAL of Disbursements This Page (optional))	405	6.00	
COTAL This Devied (lost same this line much					
TOTAL This Period (last page this line number only 5AN018	()	►	FEC Schedule B (Form 3)		

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	NE NUMBER: PAGE 19/31 Inly one) X 17 18 19a 19b
Any Information copied from such Reports and State		n for the purpose of soliciting contributions
or for commercial purposes, other than using the nam		
NAME OF COMMITTEE (In Full) Friends of Tim Johnson		
Full Name (Last, First, Middle Initial) Abbotts Florists		Transaction ID: 80413.E2831 Date of Disbursement
Mailing Address PO Box 1561		M 3 M / D 2 5 / Y 2 0 0 8 Y
City Champaign	State Zip Code IL 61824-	Amount of Each Disbursement this Perio
Purpose of Disbursement Supplies Candidate Name	001 Category/ Type	71.60 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼	SUPPLIES
Full Name (Last, First, Middle Initial) AmerenIP		Transaction ID: 80413.E2805 Date of Disbursement
Mailing Address P.O. Box 511		$\begin{bmatrix} M & M \\ 0 & 1 \end{bmatrix} \begin{pmatrix} D & D \\ 2 & 3 \end{bmatrix} \begin{pmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$
City Decatur	State Zip Code IL 62525-	Amount of Each Disbursement this Perio
Purpose of Disbursement Utilities	001	19.46 Refund or Disposal of Excess Contributions Required Linder
Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) V	UTILITIES
Full Name (Last, First, Middle Initial) AmerenIP		Transaction ID: 80413.E2820 Date of Disbursement
Mailing Address P.O. Box 511		
City Decatur	State Zip Code IL 62525-	Amount of Each Disbursement this Perio
Purpose of Disbursement Utilities	001	Refund or Disposal of Excess
Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Senate President	ement For: Primary General Other (specify) ▼	UTILITIES
State: District:		
SUBTOTAL of Disbursements This Page (optional)		212.01
TOTAL This Period (last page this line number only)	FEC Schedule B (Form 3) (Revised

SCHEDULE B (FEC Form 3)	Use separate schedule(s)	FOR LINE (check only			PAC	GE 20/31
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		x 17 20a	18 20b	19a 20c	19b 21
Any Information copied from such Reports and State						
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Friends of Tim Johnson	le and address of any political co				Such co	ariiriillee
Full Name (Last, First, Middle Initial) AmerenIP			Transact Date of D			2832
Mailing Address P.O. Box 511			0 ^M 3 ^M	² 2 5	/ Y	2008°
City Decatur	StateZip CodeIL62525-		Amount o	f Each Di	sbursen	nent this Peri
Purpose of Disbursement Utilities Candidate Name		001 Category/	Contri	d or Disp butions R F.R. 400.5	equired	
Senate President	ement For: Primary General Other (specify) ▼	Туре	UTILITIE		53	
State: District: Full Name (Last, First, Middle Initial) AT&T			Transact Date of D	isbursem	ent	
Mailing Address PO Box 105306			03	^D 06	/ Y	2008°
City Atlanta	State Zip Code GA 30348-5306		Amount o	f Each Di	sbursen	nent this Peri
Purpose of Disbursement Phone Service Candidate Name		001 Category/ Type	Contri	d or Dispo butions R F.R. 400.5	equired	
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼		PHONE	SERVIC	E	
Full Name (Last, First, Middle Initial) AT&T			Transact Date of D	isbursem	ent	2828
Mailing Address PO Box 105306			03	[/] ^D 1 ^D	/ Y	[°] 2008
City Atlanta	StateZip CodeGA30348-5306		Amount o	f Each Di	sbursen	nent this Peri
Purpose of Disbursement Phone Service Candidate Name		001 Category/	Contri	d or Disp butions R	equired	
	ement For: Primary General Other (specify) ▼	Туре	11 C.I	F.R. 400.5 SERVIC		
SUBTOTAL of Disbursements This Page (optional)		····· Þ			• •	793.36
TOTAL This Period (last page this line number only)					
E5AN018			FEC S	chedule E	3 (Form	13) (Revise

FEC Schedule B (Form 3) (Revised 02/2003)

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS		LINE NUMBER: PAGE 21 / 31
	Detailed Summary Page	X 17 18 19a 19b 20a 20b 20c 21
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam		
NAME OF COMMITTEE (In Full) Friends of Tim Johnson		
Full Name (Last, First, Middle Initial) Busey Bank		Transaction ID: 80413.E2804 Date of Disbursement
Mailing Address 201 W. Main		0 1 ^M / ^D 2 3 / ^Y 2 0 0 8 ^Y
City Urbana	State Zip Code IL 61801-	Amount of Each Disbursement this Peri
Purpose of Disbursement Interest Payment Candidate Name	009 Category, Type	38.77 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)	INTEREST PAYMENT
Full Name (Last, First, Middle Initial) Busey Bank		Transaction ID: 80413.E2821 Date of Disbursement
Mailing Address 201 W. Main		$\begin{array}{c} \begin{array}{c} M \\ 0 \\ 3 \\ \end{array} \end{array} \begin{array}{c} D \\ 0 \\ 0 \\ \end{array} \begin{array}{c} D \\ 0 \\ \end{array} \begin{array}{c} V \\ Y \\ \end{array} \begin{array}{c} Y \\ 2 \\ 0 \\ 0 \\ \end{array} \begin{array}{c} Y \\ Y \\ \end{array} \begin{array}{c} Y \\ 2 \\ 0 \\ \end{array} \begin{array}{c} Y \\ Y \\ Y \\ \end{array} \begin{array}{c} Y \\ Y $
City Urbana	State Zip Code IL 61801-	Amount of Each Disbursement this Peri
Purpose of Disbursement Interest Payment Candidate Name	009 Category	A 34.53 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburs Senate President State: District:	Type ement For: Primary General Other (specify) ▼	INTEREST PAYMENT
Full Name (Last, First, Middle Initial) Busey Bank		Transaction ID: 80413.E2835 Date of Disbursement
Mailing Address 201 W. Main		0 3 ^M / ^D 3 ^D / ^Y 2 0 0 8 ^Y
City Urbana	State Zip Code IL 61801-	Amount of Each Disbursement this Peri
Purpose of Disbursement Interest Payment Candidate Name	009 Category, Type	66.18 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼	INTEREST PAYMENT
SUBTOTAL of Disbursements This Page (optional)		▶ 139.48
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I Child Call Call and your and the solution of the construction of the construction of the construction of the construction of the constructions from such reports and Statements may not be sold or used by any person for the numerical purposes, other than using the name and address of any political committee to solicit contributions from such contrepond of Excess Contributions from such contr	SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS		NE NUMBER: PAGE 22/31 pnly one)
r 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 Name (Last, First, Middle Initial) Purpose of Disbursement Rent Candidate Name City Full Name (Last, First, Middle Initial) Devonshire Really Mailing Address PO Box 140 City Full Name (Last, First, Middle Initial) Devonshire Really Mailing Address PO Box 140 City City City City City City City City			
NAME OF COMMITTEE (in Full) Friends of Tim Johnson Full Name (Last, First, Middle Initial) Devonshire Realty Mailing Address PO Box 140 City State Zip Code Champaign It 61824-0140 Purpose of Disbursement Perpose of Disbursement this Per Candidate Name Disbursement For: President Disbursement For: President Other (specify) State: Poilsbursement City State Champaign It Galageory Transaction ID: 80413 E2827 Devonshire Realty Other (specify) Mailing Address PO Box 140 City State Candidate Name It Champaign It Purpose of Disbursement 61824-0140 Purpose of Disbursement 575.00 Rent Galageory Candidate Name Disbursement For: Primary General Other (specify) General Other (specify) Transaction ID: 80413 E2834 Devonshire R			
Devonshire Realty Mailing Address PO Box 140 Mailing Address PO Box 140 City State Zip Code Charmpaign IL 61824-0140 Purpose of Disbursement O01 Candidate Name O01 Office Sought: House Disbursement For: State President Other (specify) State: Disbursement For: President Other (specify) State: Disbursement For: Purpose of Disbursement Other (specify) Mailing Address PO Box 140 City State Distoursement State	NAME OF COMMITTEE (In Full)		
City State Zip Code Champaign IL 61824-0140 Purpose of Disbursement 001 Cardidate Name 001 Cardidate Name 001 Cardidate Name 001 Office Sought: House Senate Disbursement For: President Other (specify) Full Name (Last, First, Middle Initial) Devenshire Realty Mailing Address PO Box 140 City State Candidate Name 001 Category! Y Virpose of Disbursement 61824-0140 Purpose of Disbursement 61824-0140 Purpose of Disbursement Category! Candidate Name Disbursement For: Candidate Name Disbursement For: Candidate Name Disbursement For: Candidate Name Disbursement For: President Disbursement For: Senate President Office Sought: House District: Disbursement For: Full Name (Last, First, Middle Initial) Deconshire Reality			
Champaign IL 61824-0140 Purpose of Disbursement 001 State 001 Candidate Name 001 Category' Refund or Disposal of Excess Office Sought: House Disbursement For: Contributions Required Under State: District: Other (specify) ▼ Refund or Disposal of Excess Full Name (Last, First, Middle Initial) Devonshire Realty Transaction ID: 80413.E2827 Mailing Address PO Box 140 001 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Mailing Address PO Box 140		
Anount of Each Disbursement For: 001 Critication Name Oticategory/ Type Office Sought: House State: Disbursement For: Prevident Other (specify) ▼ Befund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Prevident Other (specify) ▼ Full Name (Last, First, Middle Initial) Prevident Devonshire Realty State Mailing Address PO Box 140 Chip Category/ Type Purpose of Disbursement 61824-0140 Purpose of Disbursement For: Gategory/ Type Category/ Type State Office Sought: House Disbursement For: General Office Sought: House Disbursement For: Senate President Other (specify) ▼ Full Name (Last, First, Middle Initial) Devonshire Realty Mailing Address PO Box 140 City State: Disbursement For: Full Name (Last, First, Middle Initial) Devonshire Realty Mailing Address PO Box 140 City State			
Office Sought: House Senate President Disbursement For: Other (specify) ▼ RENT State: District: Other (specify) ▼ RENT Full Name (Last, First, Middle Initial) Devonshire Realty Transaction ID: 80413.E2827 Date of Disbursement Disbursement Mailing Address PO Box 140 Ø 3 1 0 0 6 / 2 0 0 8 / 2 0 0 8 / 2 0 0 8 / 2 0 0 6 / 2 0 0 8 / Devonshire Realty Amount of Each Disbursement this Per Champaign City State Zip Code Champaign Amount of Each Disbursement this Per Cardidate Name Office Sought: House Senate Disbursement For: Primary General Amount of Each Disbursement thice Contributions Required Under 11 C.F.R. 400.53 Full Name (Last, First, Middle Initial) Devonshire Realty Disbursement For: Primary General RENT Mailing Address PO Box 140 Ø 3 1 / 2 0 0 8 / 2 0 0 8 / City Transaction ID: 80413.E2834 Date of Disbursement Mailing Address City State Zip Code Champaign Amount of Each Disbursement this Per Grandidate Name Office Sought: House President Disbursement For: Primary General Amount of Each Disbursement this Per Senate Office Sought: House President Disbursement For: General RENT Office Sought: House President Disbursement For: P	Rent	Category/	Refund or Disposal of Excess Contributions Required Under
Full Name (Last, First, Middle Initial) Transaction ID: 80413.E2827 Devonshire Realty Date of Disbursement Mailing Address PO Box 140 City State Zip Code Champaign IL 61824-0140 Purpose of Disbursement 001 Rent 001 Cardidate Name 001 Office Sought: House President Disbursement For: President Other (specify) Full Name (Last, First, Middle Initial) President Devonshire Realty Disbursement For: President Other (specify) Full Name (Last, First, Middle Initial) President Devonshire Realty State Mailing Address PO Box 140 City State City State Candidate Name IL Gils24-0140 Refund or Disposal of Excess Candidate Name 001 City State Zip Code Champaign IL 61824-0140 Purpose of Disbursement For: Senate State Contri	Senate President	ement For: Primary General	RENT
Devonshire Realty Devonshire Realty Date of Disbursement Mailing Address PO Box 140 03 M / 06 / 2008 City State Zip Code Champaign IL 61824-0140 Purpose of Disbursement 001 Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) Full Name (Last, First, Middle Initial) Devonshire Realty Mailing Address PO Box 140 City State Zip Code City Mailing Address PO Box 140 Full Name (Last, First, Middle Initial) Devonshire Realty Transaction ID: 80413, E2834 Date of Disbursement 03 M / 03 1 / 2008 X 008 City State Zip Code Champaign IL 61824-0140 Purpose of Disbursement 001 Category/ Type Office Sought: House Disbursement For: Gradidate Name Disbursement For: General Office Sought: House Disbursement For: Grandidate Name Disbursement For:			Transaction ID: 00440 E0007
City State Zip Code Champaign IL 61824-0140 Purpose of Disbursement 001 Rent 001 Cardidate Name 001 Office Sought: House Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Devonshire Realty Mailing Address PO Box 140 City State City State City State City State Candidate Name 001 City State Candidate Name 001 City State Candidate Name 001 Cardidate Name 001 Cardidate Name 001 Cardidate Name Disbursement For: General 001 Cardidate Name Disbursement For: General 001 Cardidate Name Disbursement For: Senate Primary General Other (Devonshire Realty		Date of Disbursement
Champaign IL 61824-0140 Purpose of Disbursement Rent 001 S75.00 Candidate Name 001 Category/ Type Contributions Required Under 11 C.F.R. 400.53 Office Sought: House President Disbursement For: Primary General Other (specify) RENT Full Name (Last, First, Middle Initial) Devonshire Realty Transaction ID: 80413.E2834 Date of Disbursement Transaction ID: 80413.E2834 Date of Disbursement Mailing Address PO Box 140 001 Category/ Type Y 2 0 0 8 City State Zip Code Champaign Amount of Each Disbursement this Per Champaign Quick Sought: House Disbursement For: Senate 001 Category/ Type Office Sought: House Disbursement For: Senate 001 Other (specify) Office Sought: House Disbursement For: Senate RENT Office Sought: House Disbursement For: Other (specify) RENT	Mailing Address PO Box 140		03 06 2008
Rent 001 Candidate Name 001 Candidate Name 001 Candidate Name 001 Office Sought: House Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Devonshire Realty Mailing Address PO Box 140 City State Zip Code Champaign IL 61824-0140 Purpose of Disbursement 575.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 State Zip Code Amount of Each Disbursement this Per Mailing Address PO Box 140 Purpose of Disbursement 001 Cardidate Name 001 Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) ▼ State: District:	Champaign		
Office Sought: House Disbursement For: RENT State: District: Other (specify) ▼ RENT Full Name (Last, First, Middle Initial) Devonshire Realty Transaction ID: 80413.E2834 Mailing Address PO Box 140 Mailing Address PO Box 140 City State Zip Code Amount of Each Disbursement this Per Champaign IL 61824-0140 Amount of Each Disbursement this Per Qardidate Name 001 State Zip Code Office Sought: House Disbursement For: Senate Office Sought: House Disbursement For: Refund or Disposal of Excess Office Sought: House Disbursement For: Rent Office Sought: House Disbursement For: Rent Other (specify) ▼ There is the image of the president Other (specify) ▼ The president State: District: Disbursement For: RENT	Rent		Refund or Disposal of Excess
Senate Primary General RENI State: District: Other (specify) ▼ RENI Full Name (Last, First, Middle Initial) Transaction ID: 80413.E2834 Date of Disbursement Devonshire Realty Mailing Address PO Box 140 Image: Construct of Disbursement Mailing Address PO Box 140 Image: Construct of Disbursement Image: Construct of Disbursement City State Zip Code Amount of Each Disbursement this Per Purpose of Disbursement Image: Construct of Disbursement 575.00 Purpose of Disbursement 001 Category/ Type State Senate Office Sought: House Disbursement For: Senate President Other (specify) ▼ RENT			
Full Name (Last, First, Middle Initial) Transaction ID: 80413.E2834 Devonshire Realty Date of Disbursement Mailing Address PO Box 140 City State Zip Code Champaign IL 61824-0140 Purpose of Disbursement 001 Rent 001 Candidate Name 001 Office Sought: House Disbursement For: Senate President Other (specify) State: District:	Senate President	Primary General	RENT
City State Zip Code Champaign IL 61824-0140 Purpose of Disbursement 001 Rent 001 Candidate Name 001 Office Sought: House Disbursement For: Primary President Other (specify) State: District:	Full Name (Last, First, Middle Initial)		
Champaign IL 61824-0140 575.00 Purpose of Disbursement 001 575.00 Refund or Disposal of Excess Candidate Name 001 Category/ Type Category/ 11 C.F.R. 400.53 11 C.F.R. 400.53 Office Sought: House Disbursement For: Senate Primary General RENT State: District: Other (specify) ▼ 12705.00 12705.00	Mailing Address PO Box 140		
Rent 001 Candidate Name 001 Category/ Type Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) State: District:			
Candidate Name Category/ Type Contributions Required Under 11 C.F.R. 400.53 Office Sought: House Disbursement For: Senate Primary General President Other (specify) RENT	•	001	
Senate Primary General President Other (specify) District: 1705.00	Candidate Name	Category/ Type	Contributions Required Under
1705.00	Senate President	Primary General	RENT
			1725.00
	JUIAL OF UISDURSEMENTS THIS Page (optional)	·	

SCHEDULE B (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 / 31 (check only one)
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 17 18 19a 19b 20a 20b 20c 21
		any person for the purpose of soliciting contributions
or for commercial purposes, other than using the nam	le and address of any political col	
Friends of Tim Johnson		
Full Name (Last, First, Middle Initial) Vicki Haugen		Transaction ID: 80413.E2824 Date of Disbursement
Mailing Address 28 West North Street, S	uite 101	
City Danville	State Zip Code IL 61832-	Amount of Each Disbursement this Peri
Purpose of Disbursement	Г	500.00
Membership Expense Candidate Name	C	004 Refund or Disposal of Excess Category/ Contributions Required Under Type 11 C.F.R. 400.53
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify) ▼	MEMBERSHIP EXPENSE
State: District:		
Full Name (Last, First, Middle Initial) Internal Revenue Service		Transaction ID: 80413.E2814 Date of Disbursement
Mailing Address IRS		
City Kansas City	StateZip CodeMO64999-0102	Amount of Each Disbursement this Peri
Purpose of Disbursement Taxes	001	
		Type Contributions Required Under
Senate President	ement For: Primary General Other (specify)	TAXES
State: District:		
Full Name (Last, First, Middle Initial) Jupiters Pizza & Billards		Transaction ID: 80413.E2811 Date of Disbursement
Mailing Address 39 Main Street		
City Champaign	StateZip CodeIL61820-	Amount of Each Disbursement this Peri
Purpose of Disbursement		322.05
Event Expense Candidate Name	C	007Refund or Disposal of ExcessCategory/ TypeContributions Required Under 11 C.F.R. 400.53
Senate	ement For: Primary General	EVENT EXPENSE
State: District:	Other (specify)	
SUBTOTAL of Disbursements This Page (optional)		► 823.09
TOTAL This Period (last page this line number only	()	
E5AN018		FEC Schedule B (Form 3) (Revise

Detailed Summary Page X 17 18 198 190 up information copied from such Reports and Statements may not be sold or used by any person for the purpose of orieling combibilities (combibilities from such committee to solicit contributions from solicit contributions from such commit from suc	SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	for each category of the	OR LINE NUMBER: PAGE 24/31 check only one)
r for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Full Name (Last, First, Middle Initial) Managed Tax Services Tax Services Candidate Name Cating Disbursement State: District: Disbursement For: Champaign La Category' Type Office Sought: House Candidate Name Category:			20a 20b 20c 21
NAME OF COMMITTEE (In Full) Friends of Tim Johnson Full Name (Last, First, Middle Initial) Maling Address 2501 Gaten Dr City State Zip Code Champaign IL 61826- Purpose of Disbursement Transaction ID: 80413.E2818 Tax Services 001 Candidate Name Other (specify) Office Sought: President Disbursement First, Middle Initial) Maling Address 2501 Gaten Dr City Disbursement For: Purpose of Disbursement President District: Disbursement For: Full Name (Last, First, Middle Initial) Transaction ID: 80413.E2829 Maling Address 2501 Gaten Dr City State Zip Code Purpose of Disbursement First, Middle Initial) Maling Address 2501 Gaten Dr City State Zip Code Champaign IL 61826- Purpose of Disbursement For: State City General O01 Categopry Tarssection ID: 80413.E2825			
Friends of Tim Johnson Full Name (Last, First, Middle Initial) Maraged Tax Services Maiing Address 2501 Galen Dr City State Zip Code Champaign IL 61826- Purpose of Disbursement O01 Category/ Type Candidate Name Disbursement For: O01 Candidate Name Disbursement For: Other (specify) ▼ State: District: Disbursement For: President Other (specify) ▼ Transaction ID: 80413.E2829 Maing Address 2501 Galen Dr Category/ Type TAX SERVICES Full Name (Last, First, Middle Initial) Managed Tax Services Transaction ID: 80413.E2829 Maing Address 2501 Galen Dr Category/ Type Y 2 0 0 8 City State: Other (specify) ▼ Transaction ID: 80413.E2829 Date of Disbursement Tax Services 001 Category/ Type Y 2 0 0 8 City State: Other (specify) ▼ Transaction ID: 80413.E2825 Office Sought: House Senate Disbursement For: 001 Category/ Type Disbursement For: 001		, F	
Managed Tax Services Date of Disbursement III Mailing Address 2501 Galen Dr City State Zip Code Champaign IL 61826- Purpose of Disbursement 275.00 Tax Services O01 Candidate Name Other (specify) Office Sought: House President Disbursement For: City Senate President Other (specify) Mailing Address 2501 Galen Dr City Senate President Other (specify) Mailing Address 2501 Galen Dr City State City State City Senate President Disbursement For: City Senate Purpose of Disbursement General Office Sought: House Office Sought: House Office Sought: Disbursement For: Office Sought: Senate President Disbursement For: Senate President District: Disburse			
Mailing Address 2501 Galen Dr City State Zip Code Champaign IL 61826- Purpose of Disbursement 275.00 Tax Services 001 Candidate Name 01 Office Sought: House President Disbursement For: President Disbursement For: President Other (specify) ▼ Full Name (Last, First, Middle Initial) Transaction ID: 80413.E2829 Mailing Address 2501 Galen Dr City State Champaign IL 61826- President Purpose of Disbursement 50.00 Tax Services 001 Catagory/ State Chy Senate President Disbursement For: Cadiage Name Control Catagory/ Chine Sought: House Senate Disbursement For: President Disbursement For: President Other (specify) ▼ Full Name (Last, First, Middle Initial) Melean County Repub. Central Committee <t< td=""><td></td><td></td><td>Date of Disbursement</td></t<>			Date of Disbursement
Champaign IL 61826- 275.00 Purpose of Disbursement Tax Services 001 Category/ Type Category/ Type Category/ Type Office Sought: House Disbursement For: Orfice Sought: House Disbursement For: Full Name (Last, First, Middle Initial) Managed Tax Services Transaction ID: 80413.E2829 Date of Disbursement Mailing Address 2501 Galen Dr 001 Category/ Type X × SERVICES City State 210 Category/ Type Y × 0 × 8 X × SERVICES Office Sought: House Disbursement For: 001 Category/ Type X × SERVICES Office Sought: House Disbursement For: 001 Category/ Type X × SERVICES Office Sought: House Disbursement For: 011 Category/ Type Tax Services Candidate Name Disbursement For: 011 Category/ Type Tax Services Amount of Each Disbursement this Peric Candidate Name Disbursement For: Disbursement For: 012 X × SERVICES Office Sought: House Disbursement For: 012 X × SERVICES	Mailing Address 2501 Galen Dr		
Project Disbursement 001 Category/ Type Office Sought: House Office Sought: House Disbursement For: President Other (specify) ▼ Tax Services Transaction ID: 80413.E2829 Mailing Address 2501 Galen Dr City State Zip Code Chick Sought: House President Disbursement For: Ching Address 2501 Galen Dr City State Zip Code Ching Address Disbursement For: Purpose of Disbursement Tax Services Cardidate Name Disbursement For: Office Sought: House Disbursement For: Other (specify) ▼ Other (specify) ▼ Tax Services Candidate Name Disbursement For: Purpose of Disbursement Senate President Disbursement For: President Other (specify) ▼ Anount of Each Disbursement this Peric Senate President Other (specify) ▼ Anount of Each Disbursement this Peric Grin @ 0 isbursement Other (specify) ▼ </td <td></td> <td></td> <td></td>			
Candidate Name Category/ Type Contributions Required Under 11 C.F.R. 400.53 Office Sought: House President Disbursement For: Primary General Other (specify) ▼ TAX SERVICES State: District: Disbursement For: Primary General Other (specify) ▼ Transaction ID: 80413.E2829 Date of Disbursement Mailing Address 2501 Galen Dr Image: Category/ City Tax Services Mailing Address 2501 Galen Dr Image: Category/ Type Tax Services Category/ Champaign Image: Category/ Image: Category/ Type Tax Services Amount of Each Disbursement this Peric Contributions Required Under 11 C.F.R. 400.53 Feld Name Disbursement For: Disbursement For: President Other (specify) ▼ Full Name (Last, First, Middle Initial) Mclean County Repub. Central Committee Disbursement For: Disbursement Tax Services Mailing Address PO Box 5056 Other (specify) ▼ Amount of Each Disbursement this Peric City State Zip Code Amount of Each Disbursement Tax Services Category/ Type Other (specify) ▼ Amount of Each Disbursement this Peric Sol 00 Mailing Address PO Box 5056 Other (specify) ▼ Amount of Each Disbursement this Peric </td <td></td> <td></td> <td></td>			
Office Sought: House Senate President Disbursement For: Other (specify) ▼ TAX SERVICES State: District: Other (specify) ▼ Tax Services Mailing Address 2501 Galen Dr Ø 3 4 2 5 2 9 2 0 8 3 City State Zip Code Purpose of Disbursement 001 Category/ Type Amount of Each Disbursement this Peric Office Sought: House President Disbursement For: Disbursement For: President 001 Category/ Type Office Sought: House President Disbursement For: Disbursement For: Primary General Other (specify) ▼ Tax SerVICES Office Sought: House President Disbursement For: Disbursement For: Primary General Other (specify) ▼ Tax SERVICES Full Name (Last, First, Middle Initial) Mclean County Repub. Central Committee Tax SERVICES Tax SERVICES Mailing Address PO Box 5056 012 Category/ Type Amount of Each Disbursement this Peric Other (specify) ▼ Office Sought: House Boomington Disbursement For: Dotation 012 Category/ Type Amount of Each Disbursement this Peric Disbursement For: Dotation Office Sought: House President Disbursement For: Disbursement For: Dotation 012 Category/ Type Amount of Each Disbursement this Peric		Cate	gory/ Contributions Required Under
Full Name (Last, First, Middle Initial) Transaction ID: 80413.E2829 Mailing Address 2501 Galen Dr City State Zip Code Champaign IL 61826- Purpose of Disbursement 001 Category/ Tax Services 001 Category/ Cardidate Name Disbursement For: 001 Category/ Transaction ID: 80413.E2829 Diffice Sought: House Disbursement For: Prepose of Disbursement President State: Disbursement For: Contributions Required Under President Other (specify) ▼ Transaction ID: 80413.E2825 Date of Disbursement Transaction ID: 80413.E2825 Date of Disbursement Transaction ID: 80413.E2825 Date of Disbursement Of § 1 2 0 0 8 Mailing Address PO Box 5056 City State Zip Code Bloomington IL 61702-5056 Purpose of Disbursement For: Other (specify) ▼ Category/ Office Sought: House Disbursement For: Other (specify) ▼ Office Sought: Disbursement For:	Senate President	rsement For: Primary General	·
Managed Tax Services Date of Disbursement Mailing Address 2501 Galen Dr City State Zip Code Champaign IL 61826- Purpose of Disbursement 001 Tax Services 001 Categoryi Type Office Sought: House Disbursement For: Other (specify) ▼ Full Name (Last, First, Middle Initial) Mclean County Repub. Central Committee Mailing Address PO Box 5056 City State Zip Code Bloomington IL 61702-5056 Purpose of Disbursement For: 250.00 Candidate Name 012 City State Zip Code Bloomington IL 61702-5056 Purpose of Disbursement For: 250.00 Candidate Name Disbursement For: 250.00 Candidate Name Disbursement For: 250.00 Office Sought: House Disbursement For: 250.00 Contributions Required Under Crategory/ Type Disbursement For: 20.00.3 Office Sought: House			
City State Zip Code Champaign IL 61826- Purpose of Disbursement 001 Tax Services 001 Candidate Name 001 Office Sought: House President Disbursement For: President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Mclean County Repub. Central Committee Mailing Address PO Box 5056 City State Zip Code Bloomington IL 61702-5056 Purpose of Disbursement For: 012 Category/ Zip Code Bloomington IL 61702-5056 Purpose of Disbursement Donation 012 Candidate Name Disbursement For: 012 Office Sought: House Disbursement For: 012 Category/ Type Disbursement For: 012 Category/ Type DonATION DonATION			Date of Disbursement
Champaign IL 61826- Purpose of Disbursement 001 State 001 Candidate Name Oisbursement For: Contributions Required Under 11 C.F.R. 400.53 Office Sought: House Disbursement For: Transaction ID: 80413.E2825 State: District: Other (specify) Transaction ID: 80413.E2825 Full Name (Last, First, Middle Initial) Mclean County Repub. Central Committee Disbursement Mailing Address PO Box 5056 012 Amount of Each Disbursement this Peric City State Zip Code Amount of Each Disbursement this Peric Bloomington IL 61702-5056 012 Office Sought: House Disbursement For: 250.00 Cardidate Name Other (specify) Other (specify) DONATION	Mailing Address 2501 Galen Dr		
Tax Services 001 Candidate Name 001 Candidate Name 001 Office Sought: House Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Mclean County Repub. Central Committee Mailing Address PO Box 5056 City State Bloomington IL Office Sought: House Origonation 012 Cardidate Name 012 Category/ Type Office Sought: House Disbursement 012 Category/ Type Office Sought: Disbursement For: Office Sought: Disbursement For: Office Sought: Disbursement For: Office Sought: Disbursement For: Other (specify) Other (specify)	Champaign		
Candidate Name Category/ Type Contributions Required Under 11 C.F.R. 400.53 Office Sought: House President Disbursement For: President TAX SERVICES State: District: Transaction ID: 80413.E2825 Date of Disbursement Transaction ID: 80413.E2825 Date of Disbursement Mailing Address PO Box 5056 Model Mailing Address PO Box 5056 City State Zip Code Bloomington Amount of Each Disbursement this Period Purpose of Disbursement 012 Category/ Type Amount of Each Disbursement this Period Office Sought: House Disbursement For: Disbursement For: President 012 Other (specify) ▼ Office Sought: House Disbursement For: President Other (specify) ▼ State: District: Disbursement For: Other (specify) ▼ DONATION			
Office Sought: House Disbursement For: TAX SERVICES State: District: Other (specify) Transaction ID: 80413.E2825 Full Name (Last, First, Middle Initial) Mclean County Repub. Central Committee Transaction ID: 80413.E2825 Mailing Address PO Box 5056 06 06 Y 2008 City State Zip Code Amount of Each Disbursement this Peric Bloomington IL 61702-5056 250.00 Purpose of Disbursement 012 Category/ Type Refund or Disposal of Excess Office Sought: House Disbursement For: 012 Office Sought: House Disbursement For: DONATION State: District: Other (specify) ▼ Tother (specify) ▼		Cate	gory/ Contributions Required Under
Full Name (Last, First, Middle Initial) Mclean County Repub. Central Committee Mailing Address PO Box 5056 City State Zip Code Bloomington IL 61702-5056 Purpose of Disbursement 012 Candidate Name 012 Office Sought: House President Disbursement For: President Other (specify) State: District:	Senate President	rsement For: Primary General	
Mclean County Repub. Central Committee Date of Disbursement Mailing Address PO Box 5056 City State Zip Code Bloomington IL 61702-5056 Purpose of Disbursement 012 Candidate Name 012 Office Sought: House President Disbursement For: Office Sought: Disbursement For: President Other (specify) ▼			Transaction ID: 90/12 E2925
City State Zip Code Bloomington IL 61702-5056 Purpose of Disbursement 012 Donation 012 Candidate Name 012 Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Other (specify) Other (specify) Tother (specify)	Mclean County Repub. Central Commit	ee	Date of Disbursement
Bloomington IL 61702-5056 Purpose of Disbursement 012 Donation 012 Candidate Name 012 Office Sought: House Disbursement For: Disbursement For: President Other (specify) ▼	Mailing Address PO Box 5056		03 06 2008
Donation 012 Candidate Name 012 Candidate Name Category/ Type Office Sought: House Disbursement For: Disbursement For: President Other (specify) ▼ State: District:	Bloomington		
Candidate Name Category/ Type Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) Other (specify) State: District:			
Office Sought: House Disbursement For: DonATION Senate Primary General DonATION State: District: Other (specify) ▼		Cate	gory/ Contributions Required Under
E75.00	Senate President	rsement For: Primary General	
SUBTOTAL of Disbursements This Page (optional) 575.00	State: District:		
	SUBTOTAL of Disbursements This Page (option	al)	▶ 575.00
	E5AN018		FEC Schedule B (Form 3) (Revise

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 25 / 31 (check only one)
	Detailed Summary Page	X 17 18 19a 19b 20a 20b 20c 21
		ny person for the purpose of soliciting contributions mittee to solicit contributions from such committee
NAME OF COMMITTEE (In Full)	name and address of any political com	
Friends of Tim Johnson		
Full Name (Last, First, Middle Initial) Mcleod USA		Transaction ID: 80413.E2806 Date of Disbursement
Mailing Address 2302 Fox Dr		M 1 M / D 2 3 / Y 2 0 0 8 Y
City Champaign	State Zip Code IL 61820-	Amount of Each Disbursement this Perio
Purpose of Disbursement		13.41
Phone Service Candidate Name	Ca	001 Refund or Disposal of Excess tegory/ Type 11 C.F.R. 400.53
Senate President	oursement For: Primary General Other (specify) ▼	PHONE SERVICE
State: District:		
Full Name (Last, First, Middle Initial) Mcleod USA		Transaction ID: 80413.E2823 Date of Disbursement
Mailing Address 2302 Fox Dr		$\begin{array}{c c} & & & \\ \hline \\ \hline$
City Champaign	State Zip Code IL 61820-	Amount of Each Disbursement this Perio
Purpose of Disbursement		13.41
Phone Service Candidate Name	Са	001 tegory/ Type Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disk Senate President State: District:	oursement For: Primary General Other (specify) ▼	PHONE SERVICE
Full Name (Last, First, Middle Initial) U.S. Postmaster		Transaction ID: 80413.E2833 Date of Disbursement
Mailing Address 2001 N. Mattis		M M / D 2 5 / Y 2 0 0 8
City Champaign	State Zip Code IL 61821-	Amount of Each Disbursement this Perio
Purpose of Disbursement Postage		001 Refund or Disposal of Excess
Candidate Name	Ca	ttegory/ Type 11 C.F.R. 400.53
Office Sought: House Disk Senate President	oursement For: Primary General Other (specify) ▼	POSTAGE
State: District:		
SUBTOTAL of Disbursements This Page (optic	nal)	► 130.82
TOTAL This Period (last page this line number	only)	
E5AN018		FEC Schedule B (Form 3) (Revised

SCHEDULE B (FEC Form 3)	for each category of the (check	LINE NUMBER: PAGE 26/31 k only one)
	Detailed Summary Page	X 17 18 19a 19b 20a 20b 20c 21
Any Information copied from such Reports and State or for commercial purposes, other than using the nar		
NAME OF COMMITTEE (In Full) Friends of Tim Johnson		
/		
Full Name (Last, First, Middle Initial) Verizon Wireless		Transaction ID: 80413.E2809 Date of Disbursement
Mailing Address PO Box 6170		$\begin{array}{c c} M & M \\ \hline 0 & 1 \\ \end{array} \begin{array}{c} \prime \\ \end{array} \begin{array}{c} D & D \\ 2 & 8 \\ \end{array} \begin{array}{c} \prime \\ \end{array} \begin{array}{c} Y \\ 2 & 0 \\ 0 & 8 \\ \end{array} \begin{array}{c} Y \\ 2 \\ 0 \\ 0 & 8 \\ \end{array} \begin{array}{c} Y \\ Y \\ 2 \\ 0 \\ 0 \\ \end{array} \begin{array}{c} Y \\ Y $
City Carol Stream	State Zip Code IL 60197-	Amount of Each Disbursement this Perio
Purpose of Disbursement Phone Service		31.94
Candidate Name	001 Category Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Senate President	sement For: Primary General Other (specify) ▼	PHONE SERVICE
State: District:		
Full Name (Last, First, Middle Initial) Verizon Wireless		Transaction ID: 80413.E2812 Date of Disbursement
Mailing Address PO Box 6170		$\begin{array}{c c} & & & \\ \hline \\ \hline$
City Carol Stream	State Zip Code IL 60197-	Amount of Each Disbursement this Perio
Purpose of Disbursement Phone Service	001	150.00
Candidate Name	001 Category Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify) ▼	PHONE SERVICE
Full Name (Last, First, Middle Initial) Verizon Wireless		Transaction ID: 80413.E2813 Date of Disbursement
Mailing Address PO Box 6170		M 2 M / D 1 9 / Y Y Y Y Y Y
City Carol Stream	State Zip Code IL 60197-	Amount of Each Disbursement this Perio
Purpose of Disbursement		150.00
Phone Service Candidate Name	001 Category Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Senate President	sement For: Primary General Other (specify) ▼	PHONE SERVICE
State: District:		221.04
SUBTOTAL of Disbursements This Page (optional		► <u>331.94</u>
TOTAL This Period (last page this line number only	/)	•

Verizon Wireless Date of Mailing Address PO Box 6170 City State Zip Code Carol Stream IL 60197- Purpose of Disbursement 001 Ref Phone Service 001 Category/ Candidate Name Disbursement For: 001 Office Sought: House Disbursement For: President Other (specify) PHONI State: District: Ptil Name (Last, First, Middle Initial) Verizon Wireless District Transa Mailing Address PO Box 6170 03 M City State Zip Code Amoun City State Zip Code Amoun Carol Stream IL 60197- Amoun	utions from such committee ction ID: 80413.E2817 Disbursement
or for commercial purposes, other than using the name and address of any political committee to solicit contrib NAME OF COMMITTEE (In Full) Friends of Tim Johnson Full Name (Last, First, Middle Initial) Transa Verizon Wireless Date of Mailing Address PO Box 6170 City State Zip Code Carol Stream IL 60197- Purpose of Disbursement 001 Category/ Phone Service 001 Category/ Candidate Name Disbursement For: Primary Office Sought: House Disbursement For: President Other (specify) ▼ Full Name (Last, First, Middle Initial) Verizon Wireless Transa Mailing Address PO Box 6170 City State Distream IL Mailing Address PO Box 6170 City State Zip Code Amoun City State Zip Code Amoun City State Zip Code Amoun Carol Stream IL 601	utions from such committee ction ID: 80413.E2817 Disbursement / 0 6 / 2 0 0 8 of Each Disbursement this Perior 47.70 und or Disposal of Excess tributions Required Under C.F.R. 400.53 E SERVICE
NAME OF COMMITTEE (In Full) Friends of Tim Johnson Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 6170 City State Zip Code Carol Stream IL 60197- Purpose of Disbursement 001 Category/ Phone Service 001 Category/ Candidate Name Disbursement For: Primary Office Sought: House Disbursement For: President Disbursement For: PHONI State: District: Primary General Full Name (Last, First, Middle Initial) Verizon Wireless Transa Mailing Address PO Box 6170 Mailing Address City State Zip Code Carol Stream IL 60197-	ction ID: 80413.E2817 Disbursement / 0 6 / 2 0 0 8 of Each Disbursement this Perior 47.70 und or Disposal of Excess tributions Required Under C.F.R. 400.53 E SERVICE
Friends of Tim Johnson Friends of Tim Johnson Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 6170 City State Zip Code Carol Stream IL 60197- Purpose of Disbursement 001 Ref Phone Service 001 Category/ Candidate Name Disbursement For: 001 Office Sought: House Disbursement For: President Other (specify) PHONI State: District: Primary General Full Name (Last, First, Middle Initial) Verizon Wireless Date of Mailing Address PO Box 6170 Mailing Address City State Zip Code Amoun Carol Stream IL 60197- Main	Disbursement / D 0 6 / Y 2 0 0 8 of Each Disbursement this Period 47.70 und or Disposal of Excess tributions Required Under C.F.R. 400.53 E SERVICE
Verizon Wireless Date of Date of Date of Oast and the construction of the const	Disbursement / D 0 6 / Y 2 0 0 8 of Each Disbursement this Period 47.70 und or Disposal of Excess tributions Required Under C.F.R. 400.53 E SERVICE
Mailing Address PO Box 6170 0 3 City State Zip Code Carol Stream IL 60197- Purpose of Disbursement 001 Ref Phone Service 001 Category/ Candidate Name Disbursement For: 001 Office Sought: House Disbursement For: PHONI Senate Primary General PHONI State: District: Transa Turnsa Date of Mailing Address PO Box 6170 City State Zip Code Amoun Carol Stream IL 60197- Amoun	of Each Disbursement this Period 47.70 und or Disposal of Excess tributions Required Under C.F.R. 400.53 E SERVICE
Carol Stream IL 60197- Purpose of Disbursement 001 Ref Phone Service 001 Category/ Candidate Name Disbursement For: President Office Sought: House Disbursement For: PHONI Senate President Other (specify) ▼ PHONI State: District: Other (specify) ▼ PHONI Full Name (Last, First, Middle Initial) Verizon Wireless Date of 03 M Mailing Address PO Box 6170 0 3 M Mailing Address Amoun City State Zip Code Amoun Carol Stream IL 60197- 0	47.70 und or Disposal of Excess tributions Required Under C.F.R. 400.53 E SERVICE
Phone Service 001 Ref Candidate Name Disbursement For: Category/ Type Primary General Office Sought: House Disbursement For: Primary General PHONI State: District: Other (specify) ▼ Transa Full Name (Last, First, Middle Initial) Verizon Wireless Transa Date of Mailing Address PO Box 6170 Mailing Carol Stream Amount	und or Disposal of Excess tributions Required Under C.F.R. 400.53 E SERVICE
Candidate Name Category/ Type Office Sought: House Senate President Disbursement For: Primary General Other (specify) PHONI State: District: Other (specify) Transa Date of Full Name (Last, First, Middle Initial) Verizon Wireless Transa Date of Mailing Address PO Box 6170 Mailing Code IL Amount	tributions Required Under C.F.R. 400.53
Senate Primary General PHONI State: District: Other (specify) ▼ Full Name (Last, First, Middle Initial) Verizon Wireless Transa Mailing Address PO Box 6170 0 3 ^M City State Zip Code Amoun Carol Stream IL 60197- 0	
Full Name (Last, First, Middle Initial) Transa Verizon Wireless Date of Mailing Address PO Box 6170 City State Zip Code Carol Stream IL 60197-	tion ID: 20/12 E2220
Verizon Wireless Date of Mailing Address PO Box 6170 City State Zip Code Carol Stream IL 60197-	ation ID: 20/112 E2220
Mailing Address PO Box 6170 0 3 City State Zip Code Carol Stream IL 60197-	Disbursement
Carol Stream IL 60197-	$\begin{array}{c} & \stackrel{D}{}} 25 \\ \end{array} \begin{array}{c} & \stackrel{D}{}} 2 \\ \end{array} \begin{array}{c} & \stackrel{D}{}} \\ \end{array} \begin{array}{c} & \stackrel{D}{}} 2 \\ \end{array} \end{array} \begin{array}{c} & \stackrel{D}{}} 2 \\ \end{array} \begin{array}{c} & \stackrel{D}{}} 2 \\ \end{array} \end{array} \end{array} \begin{array}{c} & \stackrel{D}{}} 2 \\ \end{array} \end{array} \end{array} \begin{array}{c} & \stackrel{D}{}} 2 \\ \end{array} \end{array} \end{array} $
Durnage of Disburgement	of Each Disbursement this Perio
Purpose of Disbursement	
Candidate Name	und or Disposal of Excess tributions Required Under C.F.R. 400.53
Office Sought: House Disbursement For: Primary General Senate Primary General Other (specify) ▼	ESERVICE
	ction ID: 80413.E2836 Disbursement
Mailing Address PO Box 6170	[/] ^D 2 7 [/] ^Y 2 0 0 8 ^Y
CityStateZip CodeAmounCarol StreamIL60197-	of Each Disbursement this Perio
Purpose of Disbursement	150.00
Candidate Name Category/ Cor	und or Disposal of Excess tributions Required Under C.F.R. 400.53
Office Sought: House Disbursement For	ESERVICE
SUBTOTAL of Disbursements This Page (optional)	070 40
TOTAL This Period (last page this line number only)	250.40

	CHEDULE B (FEC Form 3 EMIZED DISBURSEMENTS	S for each c	rate schedule(s) category of the Summary Page	FOR LINE (check only	NUMBER: y one) 17 18 20a 20b	PAGE 28 / 31 X 19a 19b 20c 21
	ny Information copied from such Reports an for commercial purposes, other than using NAME OF COMMITTEE (In Full) Friends of Tim Johnson					
Α.	Full Name (Last, First, Middle Initial) Busey Bank Mailing Address 201 W. Main				Transaction ID: Date of Disburse $\begin{bmatrix} M & M \\ 0 & 3 \end{bmatrix}^{T}$	
	City Urbana	State IL	Zip Code 61801-		Amount of Each	Disbursement this Period 9.92
	Purpose of Disbursement Repay Loan Made/Guar. by Cand 009 Loan R Candidate Name			Category/ Type		sposal of Excess Required Under
	Office Sought: House Senate President State: District:	Disbursement For: Primary Other (spec	2008 X General cify) ▼			

SUBTOTAL of Disbursements This Page (optional)	►	9.92
TOTAL This Period (last page this line number only)	►	9.92
FE5AN018		FEC Schedule B (Form 3) (Revised 02/2003)

SCHEDULE C (FEC Form 3)		Use separate schedule(s	PAGE 29/31
LOANS		for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) X 13a 13b
NAME OF COMMITTEE (In Full)			
Friends of Tim Johnson			
			action ID: LS60831.C7050
LOAN SOURCE Full Name (Last, First, Mide	dle Initial)		Election:
Busey Bank			Primary General
Mailing Address 201 W. Main			X Other (specify)
			Primary
City Urbana	State IL ZIP Code		-
Original Amount of Loan	Cumulative Payment To D	Date Balance	e Outstanding at Close of This Period
100000.00		97569.08	2430.92
TERMS			
Date Incurred	Date Due	Interest Ra	ate Secured:
	20080521		9.500 % (apr) X Yes No
List All Endorsers or Guarantors (if any) to Loa	n Source		
Full Name (Last, First, Middle Initial)		Name of Employer	
Timothy V. Johnson		Information Requested	
Mailing Address		Occupation	
413 Berringer Circle	-	Information Requested Amount	
City State	ZIP Code	Guaranteed	2430.92
Urbana	61802-	Outstanding:	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
	-	Amount	
City State	ZIP Code	Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
	-	A	
City State	ZIP Code	Amount Guaranteed Outstanding:	
Г [.] .			
SUBTOTALS This Period This Page (optional)		▶	2430.92
TOTALS This Period (last page in this line only)			.00
Carry outstanding balance only to LINE 3, Schedu	le D, for this line. If no Scheo	lule D, carry forward to appro	opriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS		Use separate schedule(s) for each category of the	PAGE 30 / 31 FOR LINE NUMBER:
		Detailed Summary Page	(check only one) X 13a 13b
NAME OF COMMITTEE (In Full) Friends of Tim Johnson		Transac	tion ID: LS60831.C7052
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		ection:
Busey Bank			Primary General
Mailing Address 201 W. Main			 ✓ Other (specify) ▼ Primary
City Urbana	State IL ZIP Cod	e 61801-	
Original Amount of Loan	Cumulative Payment To	Date Balance	Outstanding at Close of This Period
40000.00		37529.58	2470.42
TERMS	Data Data	lateral Dat	
Date Incurred	Date Due 20080521	Interest Rate	e Secured: 500 _{% (apr)} X Yes No
List All Endorsers or Guarantors (if any) to Loa	an Source		
Full Name (Last, First, Middle Initial) Timothy Johnson		Name of Employer Information Requested	
Mailing Address		Occupation	
413 Berringer Circle		Attorney	
City State Urbana	ZIP Code 61802-	Amount Guaranteed Outstanding:	2470.42
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional)			2470.42
TOTALS This Period (last page in this line only)			4901.34
Carry outstanding balance only to LINE 3, Sched			riate line of Summary.

	C Eorm 2			PAGE 31 / 31
DEBTS AND OBLIGATIONS			(Use separate schedule(s) for each numbered line)	FOR LINE NUMBER: (check only one) 9 X 10
NAME OF COMMITTE Friends of Tim Johr				
A. Full Name (Last Busey Bank	t, First, Middle Initial) of Deb	tor or Creditor		ebt (Purpose): ued Interest
Mailing Address 2	01 W. Main			
City Urbana	State IL	ZIP Code 61801-		
Outstanding Bala	ance Beginning This Period		Tra	nsaction ID: LS80414.E2840
	165.92			
Amount Ir	ncurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
	139.48	0.0	0	305.40
1) SUBTOTALS This	s Period This Page (optional	1)		305.40
2) TOTALS This Peri	od (last page this line numbe	er only)		305.40
3) TOTAL OUTSTAN	DING LOANS from Sche	edule C (last page only)		4901.34
4) ADD 2) and 3) an	d carry forward to appropriat	te line of Summary Page (last page on	ly)	5206.74

FE5AN018