FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

						Of	fice Use Only
1.	NAME OF COMMITTEE (in full)	USE FEC MAIL OR TYPE OR P		Example:If typing, over the lines	type		
F	riends of Tim Johnson						
AD	DRESS (number and street)	PO Box 170	97				
	Check if different than previously reported. (ACC)	Urbana				<u> </u>	61803
2.	FEC IDENTIFICATION NU	MBER ₩	CITY 🛦	l	S	TATE	ZIP CODE A
	C00350421		3. IS THIS REPORT	X NEV	V OR	AMENDED (A)	STATE V DISTRICT
4.	TYPE OF REPORT (4) (a) Quarterly Reports: April 15 Quarterly	Choose One) Report (Q1)	(b) 12-Day P	RE-Election Repo	P)	General (12G Special (12S)	
	July 15 Quarterly X October 15 Quart		Election o				in the State of
	January 31 Year-I	End Report (YE)	(c) 30-Day P	OST-Election Rep General (300		Runoff (30R)	Special (30S)
	Termination Repo	rt (TER)	Election o	n			in the State of
5.	Covering Period 0	7 01	2006	through	09	3 0	2006
	ertify that I have examined this oe or Print Name of Treasurer		best of my knowled P. Bray	dge and belief it is	true, correct ar	nd complete.	
			James P. Bray		Da		13 2006
NO —	OTE : Submission of false, erro	oneous, or incompl	ete information ma	y subject the pers	on signing this	Report to the per	nalties of 2 U.S.C 437g.
	Office Use Only						FEC FORM 3 (Revised 02/2003)

Image# 26950558843

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name Friends of Tim Johnson ° D 0.7 0 1 0 9 2006 2006 Report Covering the Period: From: To: 3 0 **COLUMN B COLUMN A This Period Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 80050.00 296355.74 (other than loans) (from Line 11(e))...... (b) Total Contribution Refunds 0.00 100.00 (from Line 20(d))..... (c) Net Contributions (other than loans) 80050.00 296255.74 (subtract Line 6(b) from Line 6(a))....... 7. Net Operating Expenditures (a) Total Operating Expenditures 66323.83 233381.66 (from Line 17)..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 233381.66 66323.83 (subtract Line 7(b) from Line 7(a))....... Cash on Hand at Close of 132632.15 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 69471.75 Schedule C and/or Schedule D)..... For further information contact: Federal Election Commission

999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100 FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Receipts

Page 3

Write or Type Committee Name Friends of Tim Johnson м м 0 7 ° D 2006 09 2006 0 1 3 0 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 19900.00 61412.30 (i) Itemized (use Schedule A)..... 2050.00 43366.99 (ii) Unitemized..... (iii) TOTAL of contributions 104779.29 21950.00 from individuals..... 600.00 896.00 (b) Political Party Committees..... (c) Other Political Committees 57500.00 190680.45 (such as PACS)..... 0.00 0.00 (d) The Candidate..... (e) TOTAL CONTRIBUTIONS (other than loans) 80050.00 296355.74 (add Lines 11(a)(iii), (b), (c), and (d)) 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES..... 13. LOANS (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... (c) TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.).... 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...... 80050.00 296355.74

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	66323.83	233381.66
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	0.00	170000.00
(b) Of all Other Loans(c) TOTAL LOAN REPAYMENTS	0.00	0.00
(add Lines 19(a) and (b))	0.00	170000.00
20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees	0.00	100.00
(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))	0.00	100.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	66323.83	403481.66
III. CASH SUM	MARY	
23. CASH ON HAND AT BEGINNING OF REPORTIN	NG PERIOD	118905.98
24. TOTAL RECEIPTS THIS PERIOD (from Line 16,	page3)	80050.00
25. SUBTOTAL (add Line 23 and Line 24)		198955.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from I	Line 22)	66323.83
27. CASH ON HAND AT CLOSE OF REPORTING P	ERIOD	132632.15

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 / 58 (check only one) 11a 11b X 11c 11d 12 13a 13b 14 15
Any information copied from such Reports and S or for commercial purposes, other than using the	statements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
Full Name (Last, First, Middle Initial) Action Committee for Rural Elect. PAC Mailing Address 4301 Wilson Blvd City Arlington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	Occupation	Zip Code 22203-1860 0002972 n Cycle-to-Date ▼	Date of Receipt M M M
Full Name (Last, First, Middle Initial) ALTRIA PAC Mailing Address 120 Park Avenue City New York FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	Occupation	Zip Code 10017 0089136 n Cycle-to-Date ▼	Date of Receipt M M
Full Name (Last, First, Middle Initial) American Medical Association PAC Mailing Address 1101 Vermont Avenue City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	State DC C70	Zip Code 20005 0001847 n	Date of Receipt M M
SUBTOTAL of Receipts This Page (optional)			4000.00
TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3 EMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 58 (check only one) 11a
An or	y information copied from such Reports and for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any perse dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) American Optometric PAC Mailing Address 1505 Prince St. City Alexandria FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	State VA C Occupation Election C	Zip Code 22314 Dycle-to-Date ▼ 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3.	Full Name (Last, First, Middle Initial) AMPAC Mailing Address 1611 Duke St City Alexandria FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	State VA C Occupation Election C	Zip Code 22314 Discrete Sycle-to-Date ▼ 500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
D.	Full Name (Last, First, Middle Initial) AOPA PAC Mailing Address 421 Aviation Way City Frederick FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	State MD C Occupation Election C	Zip Code 21701 n Sycle-to-Date ▼	Date of Receipt M M M
SI	JBTOTAL of Receipts This Page (optional)		2000.00
T	OTAL This Period (last page this line numb	per 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 / 58 (check only one) 11a 11b X 11c 11d 12 13a 13b 14 15
Any information copied from such Reports or for commercial purposes, other than usin	and Statements mag g the name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
Full Name (Last, First, Middle Initial) At&t PAC Mailing Address 175 E Houston, R City San Antonio FEC ID number of contributing federal political committee. Name of Employer	m 7-A-50 State TX C Occupatio	Zip Code 78205	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: 2006 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 4500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) ATLA PAC Mailing Address 1050 31st Street. City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify) ▼	State DC C C0 Occupatio	Zip Code 20007 0024521 n Cycle-to-Date ▼	Date of Receipt M M
Full Name (Last, First, Middle Initial) Boilermakers-Blacksmiths PAC Mailing Address 753 State Ave, Su City Kansas City FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	State KS C	Zip Code 66101-2511 n Cycle-to-Date ▼	Date of Receipt M M
SUBTOTAL of Receipts This Page (option	nal)	<u>]</u>	8000.00
TOTAL This Period (last page this line nu	mber only))	

	CHEDULE A (FEC Form 3)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 8 / 58 (check only one)
	EMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 11d 12 13a 13b 14 15
An or	y information copied from such Reports and for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) Bowling Proprietors Ass of America PAC Mailing Address 615 Six Flags Drive City Arlington FEC ID number of contributing federal political committee.	State TX	Zip Code 76011	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Receipt For: 2006 Primary X General Other (specify) ▼	Occupatio Election C	cycle-to-Date ▼ 2000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Bricklayers & Allied Craftworkets PAC Mailing Address 1776 Eye St, NW City	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	Washington	DC	20006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00 Receipt
	Name of Employer Receipt For: 2006 Primary X General Other (specify) ▼	Occupatio Election C	opcycle-to-Date ▼ 3500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
•	Full Name (Last, First, Middle Initial) Bricklayers & Allied Craftworkets PAC	•		Date of Receipt
	Mailing Address 1776 Eye St, NW			0 9 2 7 2 0 0 6
	City Washington	State DC	Zip Code 20006	Transaction ID: 61012.C7198 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupatio	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 4500.00	Spending (2 U.S.C. 441a(i)/441a-1)
S	UBTOTAL of Receipts This Page (optional) .			5500.00
T	OTAL This Period (last page this line number	r only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 58 (check only one) 11a 11b X 11c 11d 12 13a 13b 14 15
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) Bridgestone/Firestone PAC Mailing Address 607 14th St NW Ste 5 Suite 220 City Washington FEC ID number of contributing federal political committee. Name of Employer	State DC	Zip Code 20005 0371948	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: 2006 Primary X General Other (specify) ▼		Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Build PAC Mailing Address Gerald Howard 1201 15th Street N.W. City Washington FEC ID number of contributing federal political committee. Name of Employer	State DC C	Zip Code 20005-2800	Date of Receipt M M
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 5000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
D .	Full Name (Last, First, Middle Initial) Engineers Political Education Committee Mailing Address 1125 Seventeenth Street	eet Northwes	st Zip Code	Date of Receipt M M
	Washington FEC ID number of contributing federal political committee.	DC	20036 0029504	Amount of Each Receipt this Period
	Name of Employer Receipt For: 2006 Primary X General Other (specify) ▼	Occupation C	Cycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)	•		6500.00
T	OTAL This Period (last page this line number	only)		

_				FOR LINE NUMBER: PAGE 10 / 58
5(CHEDULE A (FEC Form 3)		Use separate schedule(s)	(check only one)
ΙT	EMIZED RECEIPTS		or each category of the	
			Detailed Summary Page	11a 11b X 11c 11d 11d 12 13a 13b 14 15
Λ	. information and of form and December and O			
An or	y information copied from such Reports and S for commercial purposes, other than using the	name and add	/ not be sold or used by any personners of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
<u> </u>	NAME OF COMMITTEE (In Full)			
	Friends of Tim Johnson			
/	Friends of Tim Johnson			
	Full Name (Last, First, Middle Initial)			
Α.	Enterprise RentACar PAC			Date of Receipt
	Mailing Address 600 Corporate Park Dr			M M / D D / Y Y Y Y
	ooo oorporate rank br			09 29 2006
	City	State	Zip Code	Transaction ID: 61005.C7135
	Saint Louis	MO	63105	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		2500.00
				Receipt
	Name of Employer	Occupation	n	'
				Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 0.3.0. 441a(1)/441a-1)
	Primary X General	' '	2500.00	1
	Other (specify) ▼	0 0	2500.00	
ь	Full Name (Last, First, Middle Initial)			Data of Danaint
В.	Farm Credit PAC			Date of Receipt
	Mailing Address 50 F Street, NW Suite 900			09 14 2006
	City	State	Zip Code	Transaction ID: 61005.C7083
	Washington	DC	20001	Amount of Each Receipt this Period
		50	20001	Amount of Each Heceipt this Feriod
	FEC ID number of contributing federal political committee.	C C00	0193631	2000.00
				Receipt
	Name of Employer	Occupation	n	· ·
		.		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 0.3.0. 441a(1)/441a-1)
	Primary X General	' '	4000.00	1
	Other (specify) ▼		+000.00	
	Full Name (Lock Et al NOL V. 1919)			
C	Full Name (Last, First, Middle Initial) Friends of Ray LaHood			Date of Receipt
٠.	Mailing Address 4238 N. Knoxville Aver	2110		M M / D D / Y Y Y Y
	4250 N. KIIOXVIIIE AVEI	iue		09 29 2006
	City	State	Zip Code	Transaction ID: 61005.C7137
	Peoria	IL	61614	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C C00	0284901	1000.00
				Receipt
	Name of Employer	Occupation	n	· ·
	Paradal Fara	 	Colore Data	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	cycle-to-Date ▼	
	Primary X General		1000.00	
	Other (specify)	0 0	0 0 0 0 0 0 0	1
		<u> </u>		
S	UBTOTAL of Receipts This Page (optional)			5500.00
_				
T	OTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 11 / 58 (check only one)
			Detailed Summary Page	12 13a 13b 14 15
An or	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) IUPAT - Political Action Together			Date of Receipt
	Mailing Address 1750 New York Ave., N	W		09 29 2006
	City	State	Zip Code	Transaction ID: 61005.C7139
	Washington	DC	20006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0349035	2500.00
	Name of Employer	Occupation	n	Receipt
	Receipt For: 2006	Floation	Sycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	Election	·	1
	Other (specify) ▼	0 0	7000.00	
В.	Full Name (Last, First, Middle Initial) Machinists Non-Partisan Pol League			Date of Receipt
	Mailing Address 9000 Machinist Place			09 19 2006
	City	State	Zip Code	Transaction ID: 61005.C7091
	Upper Marlboro	MD	20772-2687	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General		1000.00	1
	Other (specify) 🔻	0 0	1000.00	
C.	Full Name (Last, First, Middle Initial) MINN-DAK Farmers Cooperative PAC			Date of Receipt
	Mailing Address 7525 Red River Road			08 08 2006
	City	State	Zip Code	Transaction ID: 60831.C7027
	Wahpeton	ND	58075	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0164939	1000.00
	Name of Employer	Occupation		Receipt
	Receipt For: 2006	Flection C	Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General			1
	Other (specify) ▼		1000.00	
s	UBTOTAL of Receipts This Page (optional))	4500.00
T	OTAL This Period (last page this line number of	only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 58 (check only one) 11a
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
\setminus	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) NADA Mailing Address 8400 Westpark Drive			Date of Receipt
	City	State	Zip Code	0 9 0 1 2 0 0 6 Transaction ID: 61005.C7058
	Mc Lean	VA	22102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0040998	2500.00
	Name of Employer	Occupation		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	cycle-to-Date ▼ 2500.00	Speriding (2 0.5.0. 441a(1)/441a-1)
В.	Full Name (Last, First, Middle Initial) Nat. Assoc. of Retired Fed. Employees			Date of Receipt
	Mailing Address (NARFE) 606 N Washington St City	Stata	Zip Code	0 9
	Alexandria	State VA	210 Code 22314	Transaction ID: 61005.C7099 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		0091561	1000.00 Receipt
	Name of Employer	Occupation		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	cycle-to-Date ▼ 1000.00	Opending (2 0.0.0. 441a(i)) 441a 1)
c.	Full Name (Last, First, Middle Initial) National Turkey Federation PAC			Date of Receipt
	Mailing Address 1225 New York Ave NW			08 03 7 2006
	City Washington	State DC	Zip Code 20005	Transaction ID: 60831.C7016 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			4000.00
T	OTAL This Period (last page this line number o	nly)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 58 (check only one) 11a 11b X 11c 11d 12 13a 13b 14 15
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) NEA PAC Mailing Address 1201 16th Street, N.W., City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006	State DC C00	Zip Code 20036 0003251	Date of Receipt M M
	Primary X General Other (specify) ▼	0 0	6000.00	
3.	Full Name (Last, First, Middle Initial) Nortfolk Southern Corp Good Government Mailing Address 3 Commercial Place City Norfolk FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	State VA C Occupation Election C	Zip Code 23510	Date of Receipt M M M
D.	Full Name (Last, First, Middle Initial) NRA Political Victory Fund Mailing Address 11250 Waples Mill Road City Fairfax FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	State VA C C00 Occupation	Zip Code 22030-7400 0053553 n	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SI	UBTOTAL of Receipts This Page (optional)			6000.00
T	OTAL This Period (last page this line number o	nly)		

SCHEDULE A (FEC Form 3)	Use separate schedule	(s) FOR LINE NUMBER: PAGE 14/58
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	Detailed Summary Pag	e 11a 11b X 11c 11d 12 13a 13b 14 15
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	tements may not be sold or used by an ame and address of any political comm	y person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
Friends of Tim Johnson		
Full Name (Last, First, Middle Initial) A. NRA Political Victory Fund		Date of Receipt
Mailing Address 11250 Waples Mill Road		09 29 2006
City Fairfax	State Zip Code VA 22030-7400	Transaction ID: 61005.C7100
FEC ID number of contributing federal political committee.	VA 22030-7400 C C00053553	Amount of Each Receipt this Period 1000.00
·	I O a sum estima	Receipt
Name of Employer	Occupation	Limit Increased Due to Opponent's
Receipt For: 2006	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General Other (specify) ▼	3000.	00
		0
Full Name (Last, First, Middle Initial) Political Ed Fund of the BCTD		Date of Receipt
Mailing Address 815 16th Street, NW, Su	09 26 2006	
City	State Zip Code	Transaction ID: 61005.C7096
Washington	DC 20006	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's
Receipt For: 2006	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General Other (specify) ▼	1000.	00
	0 0 0 0 0 0 0 0	
Full Name (Last, First, Middle Initial) Political Ed Fund of the BCTD		Date of Receipt
Mailing Address 815 16th Street, NW, Su		09 29 2006
City	State Zip Code	Transaction ID: 61012.C7196
Washington	DC 20006	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's
Receipt For: 2006	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General Other (specify) ▼	2000.	00
SUBTOTAL of Receipts This Page (optional)		3000.00
CODITION OF TRECEIPES THIS Faye (Uplibrial)		
TOTAL This Period (last page this line number or	ıly)	

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 58 (check only one) 11a
An or	ly information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
\setminus	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) Realtors PAC Mailing Address 430 N Michigan Avenue			Date of Receipt
			7'n Oada	08 15 2006
	Chicago	State IL	Zip Code 60611	Transaction ID: 60831.C7030 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0030718	2000.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	cycle-to-Date ▼ 4000.00	Spending (2 U.S.C. 441a(i)/441a-1)
В.	Full Name (Last, First, Middle Initial) Rich & Roena Hensler			Date of Receipt
	Mailing Address P O Box 3902			09 01 2006
	City Champaign	State	Zip Code 61826	Transaction ID: 61005.C7057
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 500.00 Receipt
	Name of Employer AFL-CIO Central Labor Council Receipt For: 2006	Occupation Vice Pres		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	Licotori	500.00]
С.	Full Name (Last, First, Middle Initial) Seafarers Political Activity Donation			Date of Receipt
	Mailing Address 5201 Auth Way			09 26 YYYYY 2006
	City Suitland	State MD	Zip Code 20746	Transaction ID: 61005.C7098 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20740	500.00
	Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	Sycle-to-Date ▼ 500.00	Spending (2 U.S.C. 441a(i)/441a-1)
S	UBTOTAL of Receipts This Page (optional)			3000.00
т	OTAL This Period (last page this line number of	only)		

S	CHEDULE A (FEC Form 3)	11	FOR LINE NUMBER: PAGE 16 / 58
	EMIZED RECEIPTS	'	Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 11d
				12 13a 13b 14 15
Ar or	ly information copied from such Reports and for commercial purposes, other than using t	d Statements may the name and add	not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Friends of Tim Johnson			
A.				Date of Receipt
	Mailing Address 1313 L Street, NW			09 29 2006
	City	State	Zip Code	Transaction ID: 61005.C7140
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0004036	2500.00
	Name of Employer	Occupation	١	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	-	0500.00	7
	Other (specify) ▼	0 0	2500.00	
В.	Full Name (Last, First, Middle Initial) Society of Independent Gasoline Marketer			Date of Receipt
	Mailing Address 11911 Freedom Driv Suite 590	/e		09 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 61005.C7056
	Reston	VA	20190	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0120030	1000.00
	Name of Employer	Occupation	1	Receipt
				Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	' '	1000.00	
	Other (specify) ▼	0 0		_
C.	Full Name (Last, First, Middle Initial) Transportation Trades, AFL-CIO PAC			Date of Receipt
	Mailing Address 888 16th Street, NW Suite 650	1		09 26 2006
	City	State	Zip Code	Transaction ID: 61005.C7093
	Washington	DC	20006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0280909	1000.00
	Name of Employer	Occupation	<u> </u>	Receipt
				Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General		2000.00	
	Other (specify) ▼			
s	UBTOTAL of Receipts This Page (optional))		4500.00
\vdash		<u> </u>	<u>'</u>	
T	OTAL This Period (last page this line numb	er only)		

FOR LINE NUMBER: PAGE 17/58 SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 12 13a 13b 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 Johnson Full Name (Last, First, Middle Initial) TREA Senior Citizens League Date of Receipt Mailing Address 909 N Washington St Suite 300 8 0 15 2006 City State Zip Code Transaction ID: 60831.C7034 Alexandria VA 22314-1555 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Receipt Name of Employer Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2006 Election Cycle-to-Date Primary X General 1000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	•	57500.00

S	CHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 58
	EMIZED RECEIPTS	′	or each category of the	(check only one)
•••	EIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Friends of Tim Johnson			
A.	Full Name (Last, First, Middle Initial) Clint Atkins			Date of Receipt
	Mailing Address 1007 Galen Drive			09 14 2006
	City	State	Zip Code	Transaction ID: 61005.C7085
	Champaign	IL	61821	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer The Atkins Group	Occupation	<u> </u>	Receipt
	The Atkins Group	Owner		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	tycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	1	500.00	7
	Other (specify) ▼	0 0	300.00	
	Full Name (Last, First, Middle Initial)			2. (2.)
В.				Date of Receipt
	Mailing Address 1475 Bel Air Road			07 11 7 2006
	City	State	Zip Code	Transaction ID: 60713.C7012
	Los Angeles	CA	90077	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	า	- Receipt
	retired	Attorney		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	1 1	1000.00	1
	Other (specify) ▼		1000.00	
C.	Full Name (Last, First, Middle Initial) Byron & Shirley Boddy			Date of Receipt
	Mailing Address RR 2 Box 167			09 14 2006
	City	State	Zip Code	Transaction ID: 61005.C7075
	Lovington	<u> </u>	61937	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name_of Employer	Occupation	1	Receipt
	Self- Employed	Homema	ker	Limit Increased Due to Opponent's
	Receipt For: 2006		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼		750.00	
Г	<u> </u>	4 4		
s	UBTOTAL of Receipts This Page (optional)		1750.00
_	OTAL This Period (last page this line numb	ner only)	•	

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 19/58
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the	atements may	not be sold or used by any pers	on for the purpose of soliciting contributions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
۹.	Full Name (Last, First, Middle Initial) Charles Brightman			Date of Receipt
	Mailing Address P O Box 464		7: 0.1	08 03 2006
	City Greenup	State IL	Zip Code 62428	Transaction ID: 60831.C7015 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Information Requested	Occupation Information	n on Requested	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	ycle-to-Date ▼ 250.00	Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Michael & Panagiota Comet Mailing Address 805 Dodds Dr			Date of Receipt
	City	State	Zip Code	09 05 2006
	Champaign	IL	61820	Transaction ID: 61005.C7070 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Information Requested	-	on Requested	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	ycle-to-Date ▼ 500.00	Sportuning (2 5.5.5. 4414(1)/4414 1)
) .	Full Name (Last, First, Middle Initial) Greg Cozad			Date of Receipt
	Mailing Address 2912 Robeson Park Dri	ve		09 05 2006
	City Champaign	State IL	Zip Code 61821	Transaction ID: 61005.C7069 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	OTOL!	500.00
	Name of Employer Cozad Asset Management	Occupation Asset Ma	n nagement	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	ycle-to-Date ▼ 500.00	Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			1250.00
т	OTAL This Period (last nage this line number of	inly)		

S	CHEDULE A (FEC Form 3)	Llaa aanarata aahadula(a)	FOR LINE NUMBER: PAGE 20 / 58
	EMIZED RECEIPTS	′	Use separate schedule(s) or each category of the	(check only one)
• • • • • • • • • • • • • • • • • • • •	EIVIIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	y information copied from such Reports and for commercial purposes, other than using t	d Statements may the name and add	not be sold or used by any pers lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ν	NAME OF COMMITTEE (In Full)			
	Friends of Tim Johnson			
A.				Date of Receipt
	Mailing Address 800 N. 27th Street			09 14 2006
	City	State	Zip Code	Transaction ID: 61005.C7077
	Mattoon	<u> L</u>	61938	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer	Occupation	1	Receipt
	retired	Retired		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	, ,	250.00	7
	Other (specify) ▼	0 0	230.00	
	Full Name (Last, First, Middle Initial)			
В.	William & Sandra Dunn			Date of Receipt
	Mailing Address 1711 Lincoln RD			09 19 2006
	City	State	Zip Code	Transaction ID: 61005.C7089
	Champaign	IL	61821	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Information Requested	Occupation	1	Receipt
			on Requested	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	ycle-to-Date ▼	Opending (2 0.0.0. 44 ra(1)/44 ra 1)
	Primary X General Other (specify) ▼		500.00	
— С.	Full Name (Last, First, Middle Initial) Peter Fox			Date of Receipt
	Mailing Address 1118 West Armory			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60831.C7036
	Champaign	IL	61821	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	Receipt
	Fox Development	Owner		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	0 0	1500.00	
s	UBTOTAL of Receipts This Page (optional)			1625.00
	OTAL This Period (last page this line numb			

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 58
IT	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 11d
			Detailed Summary Page	X 11a 11b 11c 11d 15 15 15 15 15 15 1
Aı	ny information copied from such Reports and Sta	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the r	ame and add	aress or any political committee to	Solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Priends of Tim Johnson			
/	Therias of Tilli Johnson			
`	Full Name (Last, First, Middle Initial)			
Α.	Rudy Frasca Mailing Address 906 Airport Road			Date of Receipt
	Walling Address 906 Airport Road			09 14 2006
	City	State	Zip Code	Transaction ID: 61005.C7084
	<u>Urbana</u>	IL	61801	Amount of Each Receipt this Period
	FEC ID number of contributing	С		200.00
	federal political committee.			
	Name of Employer	Occupation	n	Receipt
	Frasca International	Owner		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Speriding (2 0.3.0. 441a(1)/441a-1)
	Primary X General Other (specify) ▼	' '	500.00	
	Cutor (openity)	0 0	1 1 1 1 1 1 1	
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 129 West Main Street			08 15 2006
	City	State	Zip Code	Transaction ID: 60831.C7032
	<u>Urbana</u>	IL	61801	Amount of Each Receipt this Period
	FEC ID number of contributing			500.00
	federal political committee.	С		300.00
	Name of Employer	Occupation	 n	Receipt
	Name of Employer Frederick & Hagle	Attorney		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General		1412.30	1
	Other (specify)	1 1	1112.00	J
	Full Name (Last, First, Middle Initial)			
C.	Koeli Goel			Date of Receipt
	Mailing Address 6 Lakeshore Ct			08 03 Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60831.C7018
	<u>Danville</u>	IL	61832	Amount of Each Receipt this Period
	FEC ID number of contributing			150.00
	federal political committee.	C		150.00
	Name of Employer Danville Polyclinic	Occupation	 n	Receipt
	Danville Polyclinic	Doctor		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	1	325.00	1
	☐ Other (specify) ▼		020.00	1
	L			
s	SUBTOTAL of Receipts This Page (optional)			850.00
Г			·	
I T	OTAL This Period (last page this line number o	nlv))	

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 22 / 58
	EMIZED RECEIPTS		or each category of the	(check only one)
-			Detailed Summary Page	X 11a 11b 11c 11d 12 13a 13b 14 15
An	y information copied from such Reports and S for commercial purposes, other than using the	itatements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
<u> </u>	NAME OF COMMITTEE (In Full)	TIAITIE AITU AUG	diess of any political committee to	Solicit Contributions from Such Committee.
\rangle	Friends of Tim Johnson			
۹.	Full Name (Last, First, Middle Initial) Frederick & Carolyn Green			Date of Receipt
	Mailing Address 1806 Pleasant St			08 / 08 / 2006
	City	State II	Zip Code	Transaction ID: 60831.C7025
	<u>Urbana</u>		61801	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer retired	Occupation	n	Receipt
	Receipt For: 2006	Retired	Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	Liection		1
	Other (specify) ▼		675.00	
3.	Full Name (Last, First, Middle Initial) Steve Hartman	!		Date of Receipt
	Mailing Address 700 W Grand			09 / 05 / 4 2006
	City	State	Zip Code	Transaction ID: 61005.C7068
	Saint Joseph	IL	61873	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer JSM Apartments	Occupation		Receipt
		<u>, </u>	Management	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 Primary X General	Election	Cycle-to-Date ▼	1
	Other (specify) ▼		425.00	
) .	Full Name (Last, First, Middle Initial) Michael Henneman			Date of Receipt
	Mailing Address 4307 Brittany Trails			08 29 7 2006
	City	State	Zip Code	Transaction ID: 60831.C7049
	Champaign	<u>IL</u>	61822	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer Henneman Raufeisen	Occupation Engineer		Receipt Limit Increased Due to Opponent's
	Receipt For: 2006		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼		1000.00	
S	UBTOTAL of Receipts This Page (optional)	•		1750.00
	· · · · · · · · · · · · · · · · · · ·		<u> </u>	
T	OTAL This Period (last page this line number	only))	

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 / 58
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and for commercial purposes, other than using the	Statements may ne name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Friends of Tim Johnson			
A.				Date of Receipt
	Mailing Address 417 West Conron			09 01 2006
	City	State	Zip Code	Transaction ID: 61005.C7055
	<u>Danville</u>	<u> </u>	61832	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Danville Community College	Occupation	<u> </u>	Receipt
	Danville Community College	President	t	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	-	525.00	7
	Other (specify) ▼	0 0	323.00	
	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 801 N. Brookside Lar	ne 		08 17 2006
	City	State	Zip Code	Transaction ID: 60831.C7040
	Mahomet	IL	61853	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer	Occupation	า	Receipt
	University of Illinois	Professor		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	tycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	0 0	475.00]
<u> </u>	Full Name (Last, First, Middle Initial) Dave Kuhl			Date of Receipt
	Mailing Address 101 Greencroft Drive			0 8 1 7 2 0 0 6
	City	State	Zip Code	Transaction ID: 60831.C7039
	Champaign	IL	61821	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	<u> </u>	Receipt
	Busey Bank	Banker		Limit Increased Due to Opponent's
	Receipt For: 2006		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	0 0	2000.00	
s	UBTOTAL of Receipts This Page (optional)	1		1350.00
	OTAL This Period (last page this line numbe	er only)		

S	CHEDULE A (FEC Form 3)		Llas separata ashadula(a)	FOR LINE NUMBER: PAGE 24 / 58
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
•••	LIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may name and ado	r not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) Gene Lamb			Date of Receipt
	Mailing Address 1408 Waverly Drive			08 / 08 / 2006
	City	State	Zip Code	Transaction ID: 60831.C7019
	Champaign	<u> </u>	61821	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	Receipt
	retired	Retired		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼		1000.00	
	Other (specify)		0 0 0 0 0 0 0	1
В.	Full Name (Last, First, Middle Initial) Louis Mervis			Date of Receipt
	Mailing Address 2001 N. Logan			08 15 2006
	City	State	Zip Code	Transaction ID: 60831.C7035
	<u>Danville</u>	<u> </u>	61832	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	Receipt
	retired	Retired		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General		3250.00	1
	Other (specify) ▼	0 0	0.000	
C.	Full Name (Last, First, Middle Initial) August Meyer			Date of Receipt
	Mailing Address c/o August C. Meyer, L			M M / D D / Y Y Y Y
	100 W University Ave.		Zin Ondo	09 14 2006
	City Champaign	State IL	Zip Code 61820	Transaction ID: 61005.C7082
	• •	IL.	01020	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2100.00
	Name of Employer Mid-West Television, Inc.	Occupation Executive		Receipt Limit Increased Due to Opponent's
	Receipt For: 2006		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	1	4100.00	7
	Other (specify) ▼	L	4100.00	
s	UBTOTAL of Receipts This Page (optional)			4100.00
\vdash				
T	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 25/58
TEMIZED RECEIPTS		or each category of the	(check only one)
· · · · · · · · · · · · · · · · · · ·		Detailed Summary Page	X 11a 11b 11c 11d 12 13a 13b 14 15
Any information copied from such Reports and Stor for commercial purposes, other than using the	atements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
Friends of Tim Johnson			
Full Name (Last, First, Middle Initial) A. Carl Meyer			Date of Receipt
Mailing Address 2211 Eagle Ridge Road			08 / 29 / Y Y Y Y Y
City <u>Champaign</u>	State II	Zip Code 61822	Transaction ID: 60831.C7046
FEC ID number of contributing federal political committee.	C	01022	Amount of Each Receipt this Period 100.00
Name of Employer Parkland College	Occupation Foundation	n on Director	Receipt Limit Increased Due to Opponent's
Receipt For: 2006 Primary X General Other (specify) ▼	Election C	cycle-to-Date ▼ 525.00	Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) 3. Karen Miller			Date of Receipt
Mailing Address 1008 S Garfield			08 / 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
City Urbana	State IL	Zip Code	Transaction ID: 61005.C7054
	IL.	61801	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00 Receipt
Name of Employer Homemaker	Occupation Homema		Limit Increased Due to Opponent's
Receipt For: 2006		cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General Other (specify) ▼		425.00	
Full Name (Last, First, Middle Initial) 7. Tom Prickett			Date of Receipt
Mailing Address 513 East G. H. Baker D	rive		08 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 60831.C7041
Urbana	IL	61801	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00 Receipt
Name of Employer Self-employed	Occupation		Limit Increased Due to Opponent's
Receipt For: 2006	Consulta Election C	rit Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General Other (specify) ▼	0 0	1000.00	
SUBTOTAL of Receipts This Page (optional)			1350.00
TOTAL This Period (last page this line number of	only))	

SCHEDULE A (FEC Form 3)	Use separate s	chedule(s) FOR LINE NUMBER: PAGE 26 / 58
TEMIZED RECEIPTS	or each catego	ry of the
	Detailed Summ	Page X 11a 11b 11c 11d 15 15 15 15 15 15 1
Any information copied from such Reports and S	tatements may not be sold or use	ed by any person for the purpose of soliciting contributions
	name and address of any politic	al committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
Friends of Tim Johnson		
Full Name (Last, First, Middle Initial)		Date of Possiet
A. Robert Rice Mailing Address PO Box 448		Date of Receipt
		08 17 2006
City	State Zip Code	Transaction ID: 60831.C7037
Philo	IL 61864	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Self-employed	Occupation	Receipt
	Realtor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 Primary X General	Election Cycle-to-Date ▼	
Other (specify)		1300.00
<u> </u>		
Full Name (Last, First, Middle Initial) 3. William & Wanda Kay Robinson		Date of Receipt
Mailing Address 2236 University Dr		09 14 2006
City	State Zip Code	Transaction ID: 61005.C7073
<u>Charleston</u>	IL 61920	Amount of Each Receipt this Period
FEC ID number of contributing		125.00
federal political committee.	C	
Name of Employer	Occupation	Receipt
Eastern Illinois Universi- ty	Professor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 Primary X General	Election Cycle-to-Date ▼	Sportding (2 0.0.0. 441a(i)/441a-1)
Other (specify)		225.00
	0 0 0 0 0 0	
Full Name (Last, First, Middle Initial) Mike & Laura Royse		Date of Receipt
Mailing Address 3902 Bluestem Court		08 29 2006
City	State Zip Code	Transaction ID: 60831.C7047
Champaign	IL 61822	Amount of Each Receipt this Period
FEC ID number of contributing	C	500.00
federal political committee.	9	
Name of Employer Information Requested	Occupation	Receipt
	Information Requested	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 Primary X General	Election Cycle-to-Date ▼	
Other (specify)		500.00
· ·		
SUBTOTAL of Receipts This Page (optional)		1625.00
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC	Form 3)		FOR LINE NUMBER: PAGI	E 27 / 58			
		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS	S	or each category of the Detailed Summary Page	X 11a 11b 11c	11d			
		Detailed Guillinary Fage	12 13a 13b	14 🔲 15			
Any information copied from suc	h Reports and Statements may	not be sold or used by any perso	on for the purpose of soliciting cont	ributions			
or for commercial purposes, other	er than using the name and add	ress of any political committee to	solicit contributions from such cor	nmittee.			
NAME OF COMMITTEE (In	Full)						
> Friends of Tim Johnson							
/							
Full Name (Last, First, Middle	e Initial)						
Lynn Ryle			Date of Receipt				
Mailing Address P O Box	6525		0 8 2 2 Y	2006			
City	State	Zip Code					
<u>Champaign</u>		·	Transaction ID: 60831.C7				
•	·-	61826	Amount of Each Receipt this	Period			
FEC ID number of contributing	ng C			500.00			
federal political committee.							
Name of Employer Homemaker	Occupation	1	Receipt				
Homemaker	Homema	ker	Limit Increased Due to O				
Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a	(i)/441a-1)			
Primary X Gene	ral	500,00	1				
Other (specify)		500.00					
Full Name (Last, First, Middle	nitial)						
George Savvas			Date of Receipt				
Mailing Address 212 Wes	st Springfield Avenue	M M / D D / Y	YYYY				
0"		08 17	2006				
City	State	Zip Code	Transaction ID: 60831.C7				
Champaign	<u> L</u>	61820	Amount of Each Receipt this Period				
FEC ID number of contributing	ng C			500.00			
federal political committee.	0						
Name of Employer	Occupation]	Receipt				
Self-employed	Physician		Limit Increased Due to Opponent's				
Receipt For: 2006		ycle-to-Date ▼	Spending (2 U.S.C. 441a	(i)/441a-1)			
Primary X Gene			7				
Other (specify) ▼		500.00					
			-				
Full Name (Last, First, Middle	e Initial)						
Anna Wall Scott			Date of Receipt				
Mailing Address 309 Wes	st Michigan		M M / D D / Y	2 0 0 6			
C:t.	01-1-	Zin Cod-	08 22	2006			
City	State	Zip Code	Transaction ID: 60831.C7				
<u>Urbana</u>	<u> L</u>	61801	Amount of Each Receipt this	Period			
FEC ID number of contributing	ng C			500.00			
federal political committee.							
Name of Employer Parkland College	Occupation	1	Receipt				
Parkland College	Professor	•	Limit Increased Due to O				
Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a	(ı)/441a-1)			
Primary X Gene	ral	05000	1				
Other (specify)	0 0	650.00					
				1500.00			
SUBTOTAL of Receipts This P	age (optional)			1500.00			
		•	-				
TOTAL This Period (last page	this line number only)						

SCHEDULE A (FEC Form 3)	llea cons	arate schedule(s)	FOR LINE NUMBER: PAGE 28/58					
TEMIZED RECEIPTS	or each o	category of the `	(check only one) X 11a 11b 11c 11d					
- - - -	Detailed	Summary Page	12 13a 13b 14 15					
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	tements may not be sold ame and address of any	or used by any perso political committee to	n for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
Friends of Tim Johnson								
Full Name (Last, First, Middle Initial) A. Shonkwiler, Ayers & Rhoades			Date of Receipt					
Mailing Address 114 S Charter City	State Zip Coo	40	08 22 2006					
Monticello	IL 61856	ue	Transaction ID: 60831.C7045 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		500.00					
Name of Employer	Occupation		Receipt Limit Increased Due to Opponent's					
Receipt For: 2006 Primary X General Other (specify)	Election Cycle-to-Date	500.00	Spending (2 U.S.C. 441a(i)/441a-1)					
Full Name (Last, First, Middle Initial) 3. Paul & Ruth Smith			Date of Receipt					
Mailing Address 604 W Stoughton #12			08 22 7 2006					
City	State Zip Coo	de	Transaction ID: 60831.C7042					
<u>Urbana</u>	IL 61801	* * * *	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		500.00 Receipt					
Name of Employer self employed	Occupation		Limit Increased Due to Opponent's					
Receipt For: 2006	Rents Apartments Election Cycle-to-Date	· V	Spending (2 U.S.C. 441a(i)/441a-1)					
Primary X General Other (specify) ▼		700.00						
Full Name (Last, First, Middle Initial) Jon Stewart			Date of Receipt					
Mailing Address 4207 Brittany Trail Drive			08 / 15 / 2006					
City	State Zip Coo		Transaction ID: 60831.C7031					
Champaign	IL 61822-	-8506	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		500.00 Receipt					
Name of Employer TRI Star Marketing	Occupation President		Limit Increased Due to Opponent's					
Receipt For: 2006	Election Cycle-to-Date	. ▼	Spending (2 U.S.C. 441a(i)/441a-1)					
Primary X General Other (specify) ▼		1125.00						
SUBTOTAL of Receipts This Page (optional)								
TOTAL This Period (last page this line number or	ly))						

SCHEDULE A (FEC Form 3)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 29 / 58 (check only one)							
		Detailed Summary Page	X 11a 11b 11c 11d 15 12 13a 13b 14 15							
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) Friends of Tim Johnson										
Full Name (Last, First, Middle Initial) George Timmons Mailing Address PO Box 230 City De Land FEC ID number of contributing federal political committee. Name of Employer Self- Employed Receipt For: 2006 Primary X General Other (specify) Full Name (Last, First, Middle Initial) Michael & Nancy Wozniak Mailing Address 3108 Sandhill Lane	State IL C Occupation Farmer Election C	Zip Code 61839	Date of Receipt M M 21 2006 Transaction ID: 61012.C7184 Amount of Each Receipt this Period 500.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Date of Receipt Date of Receipt A A A A A A A Date of Receipt A A A A A Date of Receipt Date o							
City Champaign	State IL	Zip Code 61822	0 9 1 4 2 0 0 6 Transaction ID: 61005.C7081							
FEC ID number of contributing federal political committee. Name of Employer Livingston, Barger, Brandt & S	Occupation Attorney	n	Amount of Each Receipt this Period 250.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)							
Receipt For: 2006 Primary X General Other (specify)	Election C	cycle-to-Date ▼ 250.00								
Full Name (Last, First, Middle Initial) William Youngerman Mailing Address 2312 Briar Hill Drive			Date of Receipt 0 8 3 1 2 0 0 6							
City Champaign FEC ID number of contributing federal political committee.	State IL	Zip Code 61820	Transaction ID: 61005.C7053 Amount of Each Receipt this Period 500.00							
Name of Employer Carle Clinic Association Receipt For: 2006 Primary X General Other (specify) ▼	Occupation Doctor Election C	cycle-to-Date ▼ 500.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)							
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)									
TOTAL This Period (last page this line number	er only)		19900.00							

S	CHEDULE A (FEC Form 3)		l la a a su austa a ala adula (a)	FOR LINE NUMBER: PAGE 30 / 58				
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)				
П	EMIZED RECEIPTS		Detailed Summary Page	11a X 11b 11c 11d				
			Dotailed Calliniary Fage	12 13a 13b 14 15				
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.				
abla	NAME OF COMMITTEE (In Full)							
\geq	Friends of Tim Johnson							
Α.	Full Name (Last, First, Middle Initial) Clark Co Republican Central Committee			Date of Receipt				
	Mailing Address 18499 N Guinnip			09 14 2006				
	City	State	Zip Code	Transaction ID: 61005.C7079				
	Marshall	IL	62441	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		500.00				
	Name of Employer	Receipt						
	, ,	Limit Increased Due to Opponent's						
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)				
	Primary X General	1 1						
	Other (specify) ▼	0 0	500.00					
В.	Full Name (Last, First, Middle Initial) Crawford County Republican Women			Date of Receipt				
	Mailing Address 303 E 14th Street			09 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State	Zip Code	Transaction ID: 61005.C7101				
	Robinson	IL	62454	Amount of Each Receipt this Period				
	FEC ID number of contributing			100.00				
	federal political committee.	C		100.00				
	Name of Employer		Receipt					
	Name of Employer	Occupation	ı	Limit Increased Due to Opponent's				
	Receipt For: 2006	Flection C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)				
	Primary X General	LICCLION	yolo to Dato ¥					
	Other (specify) ▼	0 0	200.00					

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

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S	CHEDULE B (FEC Form 3)	lise sene	erate schedule(s)		LINE NUMBER: PAGE 31 / 58
ITEMIZED DISBURSEMENT		for each category of the			(chec	k only one)
			Detailed 9	Summary Page		X 17 18 19a 19b 20a 20b 20c 21
An	v Information copied from such Reports a	nd Statem	ents may no	nt he sold or used	d by any ner	rson for the purpose of solicating contributions
						to solicit contributions from such committee
\setminus	NAME OF COMMITTEE (In Full)					
17	Friends of Tim Johnson					
\mathbb{L}						
A.	Full Name (Last, First, Middle Initial)					Transaction ID: 60706.E2445
	Five D Newspapers					Date of Disbursement
	Mailing Address P O Box 317					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Bridgeport		State IL	Zip Code 62417-		Amount of Each Disbursement this Period
	Purpose of Disbursement	'	· -	02117		40.00
	Advertising				004	Refund or Disposal of Excess
	Candidate Name				Category	Contributions Required Under
					Туре	11 C.F.N. 400.55
	Office Sought: House Senate	Disburse	ment For: Primary	General		ADVERTISING
	President		Other (spe			
	State: District:		(-p	<i>y</i>), \		
	Full Name (Last, First, Middle Initial)					Transaction ID: 60706.E2444
В.	The Sumner Press					Date of Disbursement
	Mailing Address P O Box 126					07 M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address P O Box 126					0. 00 .200
	City		State	Zip Code		Amount of Each Disbursement this Period
	Sumner		IL	62466-		73.00
	Purpose of Disbursement Advertising				004	Refund or Disposal of Excess
	Candidate Name				Category	Contributions Required Under
					Type	11 C.F.R. 400.53
	Office Sought: House	Disburse	ment For:			ADVERTISING
	Senate		Primary	General		AB VEITHORIVA
	President State: District:		Other (spe	сіту) 🔻		
	Full Name (Last, First, Middle Initial)					Tuesday ID 00004 F0474
C.	The Sumner Press					Transaction ID: 60831.E2474 Date of Disbursement
						08 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address P O Box 126					08 03 2006
	City		State	Zip Code		Amount of Each Disbursement this Period
	Sumner		IL	62466-		40.00
	Purpose of Disbursement Advertising				004	48.00
	Candidate Name				004 Category	Refund or Disposal of Excess Contributions Required Under
					Type	11 C.F.R. 400.53
	Office Sought: House	Disburse	ment For:			ADVERTISING
	Senate		Primary	General		ADVEITIONA
	State: President District:		Other (spe	city)		
Г	State: District:					
s	UBTOTAL of Disbursements This Page (optional)				161.00

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SCHEDULE B (FEC Form 3)				Use seperate schedule(s)			FOR LINE I	E NUMBER: PAGE 32 / 58							
ITEMIZED DISBURSEMENTS			S	for each category of the Detailed Summary Page			×	- ′		18 20b] 19a		19b 21	
		ied from such Reports and irposes, other than using													
<u> </u>	·	MITTEE (In Full)													
$ \rangle$	Friends of Tim	, ,													
	Full Name (Last,	First, Middle Initial)						Trans	sact	ion ID): 6 ⁻	1005	F25	17	
A.	The Sumner F	Press						Date	of D	isburs	sem	ent			
	Mailing Address	P O Box 126						0 ^M 9	М	/	18		ž	006	
	City Sumner			State IL	Zip Code 62466-			Amo	unt c	f Eacl	h Di	isburs	emen	t this Period	t
	Purpose of Disbu	urcomont		IL .	02400-									99.00	
	Advertising Expe					0	04		efur	d or F)isn	osal o	f Exc		
	Candidate Name)				Cat	egory/ ype	C	ontri		ıs F	Require			
	Office Sought:	House Senate President	Disburser	ment For: Primary Other (spe	General			ADVI	≣RT	ISIN	G E	XPE	NSE		
	State:	District:													
В.	Full Name (Last, VictoryStore.c	First, Middle Initial)						Date	of D	isburs	sem			_	
	Mailing Address Victory Enterprise Center 5200 SW 30th St, Suite 7							8 ^M 0	IM	<u> </u>	0 8 8		Ż	0066	
	City Davenport			State IA	Zip Code 52802-			Amou	unt c	f Eacl	h Di	isburs		t this Period	t
	Purpose of Disbu												-	0910.00	
	Signs & Bumper Candidate Name					Cate	egory/ ype	_ C	ontri		ıs F	osal o Require 53			
	Office Sought:	Senate	Disburser	ment For: Primary	General			SIGN	IS 8	BUN	ИΡΙ	ER S	TICK	ŒRS	
	Otata	President		Other (spe	ecify) 🔻										
	State:	District:													
C.	Citi Cards	First, Middle Initial)						Date	of D	isburs	sem				
	Mailing Address P O Box 688908							0 ^M 9	М	/ D	2 4		ž	006	
	City			State	Zip Code			Amo	unt c	f Eacl	h Di	isburs	emen	t this Period	t
	Des Moines IA 50368-8908									-		-		010 50	
	Purpose of Disbursement Fundraising Expense 003						03	B	efun	d or F)isp	osal o	f Exc	313.58 ess	_
	Candidate Name Category/ Type								ontr		ıs F	Require			
	Office Sought:	Senate	Disburser	ment For: Primary	General			FUNI	OR/	ISIN	G I	EXPE	NSE	<u> </u>	
	State:	President District:		Other (spe	ouy) ♥										

11322.58

SUBTOTAL of Disbursements This Page (optional)

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	(check only	NUMBER: PAGE 33 / 58 / one) X 17 18 19a 19b
_	16			20a 20b 20c 21
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam			
\rangle	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) AFL-CIO of Champaign County			Transaction ID: 60831.E2484 Date of Disbursement M M M / D D / Y Y Y O O O O O O O O O O O O O O O O
	Mailing Address 404 W Church St			08 7 08 7 2006
	City Champaign	State Zip Code IL 61820-		Amount of Each Disbursement this Period
	Purpose of Disbursement		201	250.00
	Advertising Expense Candidate Name		004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		ADVERTISING EXPENSE
	State: District:			
В.	Full Name (Last, First, Middle Initial) Ameren IP			Transaction ID: 60713.E2449 Date of Disbursement
	Mailing Address P.O. Box 511			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 & Y \end{bmatrix}$
	City Decatur	State Zip Code IL 62525-		Amount of Each Disbursement this Period
	Purpose of Disbursement Utilities	001	45.73 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: Full Name (Last, First, Middle Initial)			
C.				Transaction ID: 60831.E2488 Date of Disbursement
	Mailing Address P.O. Box 511			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & G \end{smallmatrix} \end{bmatrix} $
	City Decatur	State Zip Code IL 62525-		Amount of Each Disbursement this Period
	Purpose of Disbursement Utilities		001	49.02 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate	ement For: Primary General		UTILITIES
	President State: District:	Other (specify)		
s	UBTOTAL of Disbursements This Page (optional)		>	344.75

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	(check only	X 17
	y Information copied from such Reports and Statem			
or	for commercial purposes, other than using the name	e and address of any politica	I committee to so	licit contributions from such committee
	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
A.	Full Name (Last, First, Middle Initial) Ameren IP			Transaction ID: 61005.E2513 Date of Disbursement
	Mailing Address P.O. Box 511			09
	,	State Zip Code IL 62525-		Amount of Each Disbursement this Period
	Purpose of Disbursement		*	47.68
	Utilities Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		UTILITIES
	State: District:	-		
В.	Full Name (Last, First, Middle Initial) AT&T Yahoo			Transaction ID: 60831.E2473 Date of Disbursement
	Mailing Address Bill Payment Center	$\begin{array}{c c} \begin{array}{c c} M & M \end{array} & \begin{array}{c c} D & D & D \\ \hline \end{array} & \begin{array}{c c} D & D & D \\ \hline \end{array} & \begin{array}{c c} Y & \begin{array}{c} Y & Y & Y & O & O \\ \hline \end{array} & \begin{array}{c} Y & O & O & O \\ \hline \end{array} & \begin{array}{c c} O & O & O \\ \hline \end{array} & \begin{array}$		
	,	State Zip Code MI 48663-0003		Amount of Each Disbursement this Period
	Purpose of Disbursement Phone Service	001	176.19 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)		PHONE SERVICE
	State: District:			
C.	Full Name (Last, First, Middle Initial) AT&T Yahoo			Transaction ID: 60831.E2494 Date of Disbursement
	Mailing Address Bill Payment Center		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & G \\ Y & Z & O & O & G \end{bmatrix}$	
		State Zip Code MI 48663-0003		Amount of Each Disbursement this Period
	Purpose of Disbursement		i i	178.88
	Phone Service Candidate Name	001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Senate	ement For: Primary General		PHONE SERVICE
	State: President District:	Other (specify)		
s	UBTOTAL of Disbursements This Page (optional) .		>	402.75

SCHEDULE B (FECFORM 3) Use seperate schedule(s) for each category of the builded Summary Regie FOR LINE SILMBER: (chock only one) 10	·						
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee		·	S for	each cat	egory of the	(check only	y one) X 17
Friends of Tim Johnson A Tall Name (Last, First, Middle Initial) A Tall Yahoo Maling Address Bill Payment Center City Saginaw Purpose of Disbursement Phone Service Candidate Name Office Sought: House Disbursement Primary General Purpose of Disbursement Purpose of Disbursement President District: Full Name (Last, First, Middle Initial) B Busey Bank Maling Address 201 W. Main Office Sought: House Disbursement Purpose of Disbursement Purpose of Disbursement District: Full Name (Last, First, Middle Initial) B Disbursement District: Full Name (Last, First, Middle Initial) B Disbursement District: Full Name (Last, First, Middle Initial) B Disbursement District: Full Name (Last, First, Middle Initial) B Disbursement District: Full Name (Last, First, Middle Initial) B Disbursement District: Full Name (Last, First, Middle Initial) B Disbursement District: Full Name (Last, First, Middle Initial) Candidate Name Disbursement Dis							or the purpose of solicating contributions
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B. Busey Bank Mailing Address 201 W. Main City State Zip Code Urbana IL 61801- Purpose of Disbursement Interest Payment Candidate Name Disbursement For: Full Name (Last, First, Middle Initial) City Urbana State Zip Code IL 61801- Primary General Other (specify) ▼ Transaction ID: 60831.E2487 Date of Disbursement this Period Amount of Each Disbursement this Period Topic Sought: House Senate Primary General Other (specify) ▼ Transaction ID: 60831.E2487 Date of Disbursement No 2 1 2 0 0 6 Amount of Each Disbursement this Period Transaction ID: 60831.E2487 Date of Disbursement No 2 1 2 0 0 6 Amount of Each Disbursement this Period Transaction ID: 60831.E2487 Date of Disbursement No 3 1 1 0 1 2 2 0 0 6 Amount of Each Disbursement this Period Amount of Each Disbursement this Period Transaction ID: 60831.E2487 Date of Disbursement No 3 1 0 1 0 1 2 2 0 0 6 Amount of Each Disbursement this Period Transaction ID: 60831.E2487 Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID: 60831.E2487 Date of Disbursement This Period Tr		Senate President	Prim	nary			PHONE SERVICE
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SUBTOTAL of Disbursements This Page (optional)

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule for each category of the Detailed Summary Pag	e ´	FOR LINE (check only	v one) X 17
	y Information copied from such Reports and Stater				
or	for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	le and address of any polit	icai con	nmittee to so	licit contributions from such committee
	Friends of Tim Johnson				
A.	Full Name (Last, First, Middle Initial) Busey Bank				Transaction ID: 61012.E2538 Date of Disbursement
	Mailing Address 201 W. Main				$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$ $\begin{bmatrix} 1 & 1 & 8 \\ 0 & 1 & 8 \end{bmatrix}$ $\begin{bmatrix} 1 & 2 & 0 & 0 & 6 \\ 0 & 2 & 0 & 0 & 6 \end{bmatrix}$
	City Urbana	State Zip Code IL 61801-			Amount of Each Disbursement this Period
	Purpose of Disbursement Interest Payment			000	611.44
	Candidate Name			009 ategory/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President	ement For: Primary Gener Other (specify)	al		INTEREST PAYMENT
	State: District:				
В.	Full Name (Last, First, Middle Initial) Commerce Champaign Chamber of				Transaction ID: 61005.E2516 Date of Disbursement
	Mailing Address 1817 S. Neil Street		$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 8 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$		
	City Champaign	State Zip Code IL 61820-			Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Expense			003	125.00 Refund or Disposal of Excess
	Candidate Name		C	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	ement For: Primary Gener Other (specify) ▼	al		FUNDRAISING EXPENSE
	State: District: Full Name (Last, First, Middle Initial)				
C.	Chrisman Leader				Transaction ID: 60706.E2446 Date of Disbursement
	Mailing Address PO Box 87				$\begin{bmatrix} 0 & 7 & M \\ 0 & 7 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 \\ 0 & 6 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 \\ 0 & 2 & 0 & 0 \end{bmatrix}$
	City Chrisman	State Zip Code IL 61924-			Amount of Each Disbursement this Period
	Purpose of Disbursement Advertising			004	27.00 Refund or Disposal of Excess
	Candidate Name			ategory/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate	ement For: Primary Gener	al		ADVERTISING
	State: President State:	Other (specify)			
s	UBTOTAL of Disbursements This Page (optional)			▶	763.44

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	CHEDULE B (FEC Form 3)		erate schedule(s)	FOR LINE (check onli	NUMBER: PAGE 37 / 58				
IT	EMIZED DISBURSEMENTS		category of the Summary Page	_ `	X 17				
	y Information copied from such Reports and S for commercial purposes, other than using the								
\setminus	NAME OF COMMITTEE (In Full)								
\backslash	Friends of Tim Johnson								
Α.	Full Name (Last, First, Middle Initial) Chrisman Leader				Transaction ID: 60831.E2472 Date of Disbursement				
	Mailing Address PO Box 87				$\begin{bmatrix} 0.8 & M \\ 0.8 & M \end{bmatrix} / \begin{bmatrix} 0.0 & 0 \\ 0.0 & 3 \end{bmatrix} / \begin{bmatrix} 0.0 & 0 \\ 0.0 & 0 & 0 \end{bmatrix}$				
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	Chrisman	<u>IL</u>	61924-		81.00				
	Purpose of Disbursement Advertising Expense			004	Refund or Disposal of Excess				
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Dis	bursement For: Primary	General		ADVERTISING EXPENSE				
	President	Other (sp	ecify)						
	State: District:								
В.	Full Name (Last, First, Middle Initial) Chrisman Leader				Transaction ID: 60831.E2480 Date of Disbursement				
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	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Dis	bursement For: Primary	General		ADVERTISING EXPENSE				
	President State: District:	Other (sp	ecify) 🔻						
C.	Full Name (Last, First, Middle Initial) Chrisman Leader				Transaction ID: 60831.E2493 Date of Disbursement				
	Mailing Address PO Box 87				08				
	City Chrisman	State IL	Zip Code 61924-		Amount of Each Disbursement this Period				
	Purpose of Disbursement			* *	27.00				
	Advertising Expense Candidate Name			004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Dis Senate President	bursement For: Primary Other (sp	General	21 -	ADVERTISING EXPENSE				
	State: District:	Other (sp	○ ○11 y) ▼						
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S	ITEMIZED DISBURSEMENTS for each car		erate schedule(s)		INE NUMBER:	PAGE 38 / 58			
IT			for each	category of the Summary Page	(check		19a 19b		
	y Information copied from such Reports ar for commercial purposes, other than using					on for the purpose of solicat			
V	NAME OF COMMITTEE (In Full)	ine name	and addres	ss of arry political	Committee to	5 SOIICIL CONTINDULIONS TROM S	uch committee		
\rangle	Friends of Tim Johnson								
_	Full Name (Last, First, Middle Initial)					Transaction ID: 610)05.E2511		
Α.	Chrisman Leader					Date of Disbursemer			
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	Senate		Primary	General		ADVERTISING EX	RPENSE		
	President		Other (spe	ecify)					
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В.	Full Name (Last, First, Middle Initial)					Transaction ID: 610			
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	Full Name (Last, First, Middle Initial)					T :: ID 000	204 50450		
C.	Dan Crane					Transaction ID: 608 Date of Disbursemer			
						M M / D D	2006		
	Mailing Address 3570 N Vermilion	1				07 14	2006		
	City Danville		State IL	Zip Code 61832-		Amount of Each Disk	oursement this Period		
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	Advertising Expense Candidate Name				004	Refund or Dispos Contributions Rec			
	Candidate Name				Category/ Type	11 C.F.R. 400.53			
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	Senate		Primary	General		ADVERTISING EX	MENSE		
	President		Other (spe	ecify)					
_	State: District:								
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S	CHEDULE B (FEC Form 3)	EOR LINE	FOR LINE NUMBER: PAGE 39 / 58					30 / 58		
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	y Information copied from such Reports and Sta for commercial purposes, other than using the r									
Λ	NAME OF COMMITTEE (In Full)									
\mathbb{Z}	Friends of Tim Johnson									
Α.	Full Name (Last, First, Middle Initial) Devonshire Realty				Transa Date o			60706	E24	47
	Mailing Address PO Box 140					M /		^D /	Y	2006
	City Champaign	State IL	Zip Code 61824-0140		Amount of Each Disbursement this Period					nt this Period
	Purpose of Disbursement Rent		Г	001	D.	f l .			· -	575.00
	Candidate Name		C	Category/ Type	L Co		tions	sposal o Require 0.53		
	Office Sought: House Senate President State: District:	Primary Other (spec	General		RENT					
_	Full Name (Last, First, Middle Initial)									
В.	Devonshire Realty				Date o	f Disb	ourse			
	Mailing Address PO Box 140				0 ^M 8	M /	^D 0	^D /	Ý	2006
	City Champaign	State IL	Zip Code 61824-0140		Amour	nt of E	ach	Disburs	emer	nt this Period
	Purpose of Disbursement Rent		Г	001	Re	fund o	or Dis	sposal c	f Exc	575.00
	Candidate Name			Category/ Type	L Co		tions	Require		
	Office Sought: House Senate President	Primary Other (spec	General		RENT					
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C.	Full Name (Last, First, Middle Initial) Devonshire Realty				Transa Date o			61005 ment	.E25	510
	Mailing Address PO Box 140				0 9	И /	^D 1	8 /	Y	2006
	City Champaign	State IL	Zip Code 61824-0140		Amour	nt of E	ach	Disburs	emer	nt this Period
	Purpose of Disbursement									575.00
	Rent 001 Candidate Name Category/ Type							sposal o Require 0.53		
	Office Sought: House Disbring Senate President	Primary Other (spec	General		RENT					
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S	CHEDULE B (FEC Form 3)	FORLINE	NUMBER. DAGE 40/50		
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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam				
abla	NAME OF COMMITTEE (In Full)				
V	Friends of Tim Johnson				
Α.	Full Name (Last, First, Middle Initial) Director of Employment Security				Transaction ID: 60831.E2465 Date of Disbursement
	Mailing Address 850 East Madison Stree	t			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 5 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 & Y \end{bmatrix}$
	City Springfield	State Zip Code IL 62702-			Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes		Г	001	58.09 Refund or Disposal of Excess
	Candidate Name			Category/	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President	ement For: Primary Genera Other (specify) ▼	l		TAXES
	State: District:	_			
В.	Full Name (Last, First, Middle Initial) East Central Communications				Transaction ID: 60713.E2453 Date of Disbursement
	Mailing Address 1332 Harmon Drive		07 13 2006		
	City Rantoul	State Zip Code IL 61866-			Amount of Each Disbursement this Period
	Purpose of Disbursement Advertising Expense	004	113.50 Refund or Disposal of Excess		
	Candidate Name		7	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President	ement For: Primary Genera Other (specify)	I		ADVERTISING EXPENSE
	State: District:	Ctrici (opeony)			
C.	Full Name (Last, First, Middle Initial) East Central Communications				Transaction ID: 61005.E2512 Date of Disbursement
	Mailing Address 1332 Harmon Drive	$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 8 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$			
	City Rantoul	State Zip Code IL 61866-			Amount of Each Disbursement this Period
	Purpose of Disbursement		Тг	-	250.00
	Advertising Expense Candidate Name			004 ategory/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President	ement For: Primary Genera Other (specify) ▼			ADVERTISING EXPENSE
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		poses, other than usir												
\setminus	NAME OF COMM	/ITTEE (In Full)												
	Friends of Tim	Johnson												
_	Full Name (Last,	First, Middle Initial)					Tran	saction	ID:	608	31.E2	497		
A. Electoral Design							Date	Date of Disbursement						
	Mailing Address	4362 Raleigh A	ve., #102				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$							
	City Alexandria			State VA	Zip Code 22304-		Amo	unt of Ea	ach	Disb	ursem	ent th	nis Peri	iod
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	Website Design					004		Refund o						
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	Office Sought:	House Senate President	Disburser	ment For: Primary Other (spe	General		WEE	SITE D	ES	SIGN	1			
	State:	District:		` .	•									
В.	Full Name (Last, FedEx Kinkos	First, Middle Initial)						saction of Disbu				2442		
	Mailing Address	505 S. Mattis					0 ^M 7	, M /	^D 0	3	/ Y	ž o	0 6 °	
	City		5	State	Zip Code		Amo	unt of Ea	ach	Dish	ursem	ent th	nis Peri	ind
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	Office Sought:	House	Disburser	ment For:			BOS	TAGE						
		Senate		Primary	General		103	IAGE						
	Otata	President		Other (spe	cify)									
	State:	District: First, Middle Initial)												
C.	FedEx Kinkos	First, Middle Itiliai)					Date	saction of Disbu	urse	emen	t			
	Mailing Address	505 S. Mattis					0 9	IVI /	0	1 1	/ Y	2 O	ŏ6°	
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	Candidate Name				Contributi	ions	Rec							
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		President		Other (spe										
	State:	District:												

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SUBTOTAL of Disbursements This Page (optional)

S	CHEDULE B (FEC Form 3)		FORLINE	NUMBER: PAGE 42/58	
	EMIZED DISBURSEMENTS		erate schedule(s) category of the	(check onl	
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	y Information copied from such Reports and S for commercial purposes, other than using the				
Λ	NAME OF COMMITTEE (In Full)				
V	Friends of Tim Johnson				
Α.	Full Name (Last, First, Middle Initial) Jim Gould				Transaction ID: 60831.E2481 Date of Disbursement
	Mailing Address One East Main Stree	et			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 8 \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ 0 & 8 \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix}$
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	City Champaign	State IL	Zip Code 61820-		Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Expense			003	250.00 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	sbursement For: Primary Other (spe	General cify) ▼		FUNDRAISING EXPENSE
_	State: District:				
В.	Full Name (Last, First, Middle Initial) Jim Gould				Transaction ID: 61005.E2499 Date of Disbursement
	Mailing Address One East Main Stree	et			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & O & O & G \\ Y & Z & O & O & G \end{bmatrix}$
	City Champaign	State IL	Zip Code 61820-		Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Expense		003	3500.00 Refund or Disposal of Excess	
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Dis Senate President	bursement For: Primary Other (spe	General		FUNDRAISING EXPENSE
	State: District:	Culci (spe	ony) \		
С.	Full Name (Last, First, Middle Initial) Illinois Department of Rev				Transaction ID: 60831.E2464 Date of Disbursement
	Mailing Address Willard Ice Bldg.				07
	101 West Jefferson		7' 0 1		
	City Springfield	State IL	Zip Code 62702-		Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes			004	178.77
	Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Senate	Sbursement For:	General	NE :	TAXES
	State: President District:	Other (spe	еспу) 🔻		
s	UBTOTAL of Disbursements This Page (opti	onal)		>	3928.77

31	CHEDULE B (FEC Form 3)	Use seperate schedule(s	1	E NUMBER: PAGE 43 / 58
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check onl	X 17
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
\rangle	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) Brian Kelly Mailing Address 2404 Windward Blvd Apt #204	203		Transaction ID: 60706.E2440 Date of Disbursement O 7 D D C O O O O O O O O O O O O O O O O O
	City Schampaign	State Zip Code IL 61821-		Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Reimbursement Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		TRAVEL REIMBURSEMENT
В.	Full Name (Last, First, Middle Initial) Brian Kelly			Transaction ID: 60831.E2467 Date of Disbursement
	Mailing Address 2404 Windward Blvd Apt #204	203		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	•	State Zip Code IL 61821-		Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Reimbursement Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)		TRAVEL REIMBURSEMENT
C.	Full Name (Last, First, Middle Initial) Brian Kelly			Transaction ID: 60831.E2466 Date of Disbursement
	Mailing Address 2404 Windward Blvd Apt #204	203		$\begin{bmatrix} 0 & 7 & M & 1 & D & D & 1 & Y & Y & Y & Y & Y & Y & Y & Y & Y$
		State Zip Code IL 61821-		Amount of Each Disbursement this Period
	Purpose of Disbursement Salary Candidate Name	001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)	75-	SALARY
	UBTOTAL of Disbursements This Page (optional) .			2132.39

	CHEDULE B (FEC Form 3)		rate schedule(s)	FOR LINE	E NUMBER: PAGE 44 / 58				
11	EMIZED DISBURSEMENTS		ategory of the Summary Page		X 17 18 19a 19b 20a 20b 20c 21				
	y Information copied from such Reports and Statem for commercial purposes, other than using the name								
\rangle	NAME OF COMMITTEE (In Full) Friends of Tim Johnson								
۹.	Full Name (Last, First, Middle Initial) Brian Kelly Mailing Address 2404 Windward Blvd Apt	203			Transaction ID: 60831.E2490 Date of Disbursement M M M / D D D / Y Y Y O O O				
	•	State	Zip Code		Amount of Each Disbursement this Period				
	Champaign Purpose of Disbursement Travel Reimbursement Candidate Name	IL	61821-	002 Category/	310.80 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spec	General	Туре	TRAVEL REIMBURSEMENT				
3.	Full Name (Last, First, Middle Initial) Brian Kelly				Transaction ID: 60831.E2491 Date of Disbursement				
	Mailing Address 2404 Windward Blvd Apt #204	203			08 7 26 7 2006				
	City Champaign	State IL	Zip Code 61821-		Amount of Each Disbursement this Period				
	Purpose of Disbursement Salary Candidate Name			001 Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spec	General	Туре	SALARY				
Э.	Full Name (Last, First, Middle Initial) Brian Kelly				Transaction ID: 61005.E2506 Date of Disbursement				
	Mailing Address 2404 Windward Blvd Apt #204	09							
	City Champaign	State IL	Zip Code 61821-		Amount of Each Disbursement this Period				
	Purpose of Disbursement Travel Reimbursement	575.30							
	Candidate Name	002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53						
	Senate President	ement For: Primary Other (spec	General cify) ▼		TRAVEL REIMBURSEMENT				
	State: District:								
s	UBTOTAL of Disbursements This Page (optional)			<u></u>	2396.89				

S	CHEDULE B (FEC Form 3)		EOD LINE	NUMBER: PAGE 45/58	
	EMIZED DISBURSEMENTS	Use seperate so for each categor		(check only	
		Detailed Summa	ary Page		X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam				
Λ	NAME OF COMMITTEE (In Full)				
\backslash	Friends of Tim Johnson				
Α.	Full Name (Last, First, Middle Initial)				Transaction ID: 61005.E2509
Α.	Brian Kelly				Date of Disbursement
	Mailing Address 2404 Windward Blvd Ap #204	t 203			09 M / D25 / Y 2006 Y
	City Champaign	State Zip C			Amount of Each Disbursement this Period
	Purpose of Disbursement			-	1510.79
	Salary		L	001	Refund or Disposal of Excess
	Candidate Name		C	Category/ Type	Contributions Required Under 11 C.F.R. 400.53
		ement For:	-		SALARY
	Senate President	Primary	General		3/12 tivi
	State: District:	Other (specify)	7		
	Full Name (Last, First, Middle Initial)				Transaction ID: 60831,E2462
B.	Main Street Bank & Trust				Date of Disbursement
	Mailing Address 100 W. University Avenu	ie			07
	City Champaign	State Zip C			Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	001	1596.26		
	Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate	ement For: Primary	General	Ni	TAXES
	President	Other (specify)	7		
	State: District:				
C.	Full Name (Last, First, Middle Initial) Main Street Bank & Trust				Transaction ID: 60831.E2463 Date of Disbursement
	Mailing Address 100 W. University Avenu	ie			07
	City Champaign	State Zip C			Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes			001	10.25
	Candidate Name		C	001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President	ement For: Primary Other (specify)	General		TAXES
	State: District:	Other (specify)	7		
s	UBTOTAL of Disbursements This Page (optional)			▶	3117.30

	CHEDULE B (FEC Form 3)	Use seperate sche		FOR LINE (check only		
IT	EMIZED DISBURSEMENTS	for each category of Detailed Summary		l `	K 17 18 19a 19b	
_				<u> </u>	20a 20b 20c 21	
	y Information copied from such Reports and S for commercial purposes, other than using the					
\setminus	NAME OF COMMITTEE (In Full)					
/	Friends of Tim Johnson					
_	Full Name (Last, First, Middle Initial)				Transaction ID: 60831.E2461	
A.	Managed Tax Services				Date of Disbursement	
	Mailing Address 2501 Galen Dr		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
	City Champaign	State Zip Cod IL 61826			Amount of Each Disbursement this Period	
	Purpose of Disbursement				75.00	
	Tax Services Candidate Name		-	001	Refund or Disposal of Excess Contributions Required Under	
	Candidate Name			Category/ Type	11 C.F.R. 400.53	
	9 🗎	oursement For:			TAX SERVICES	
	Senate President	Primary Ge Other (specify) ▼	eneral			
	State: District:	c.i.o. (epoolis)				
_	Full Name (Last, First, Middle Initial)				Transaction ID: 60831.E2459	
В.	MBNA America				Date of Disbursement	
	Mailing Address P O Box 15287				$\begin{bmatrix} 0 & 7 & M \\ 0 & 7 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 2 & 0 \\ 0 & 2 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 1 & 2 & 0 \\ 0 & 2 & 0 & 0 \end{bmatrix}$	
	City	State Zip Cod			Amount of Each Disbursement this Period	
	Wilmington Purpose of Disbursement	DE 19886	-5287		499.08	
	Fundraising Expense			003	Refund or Disposal of Excess	
	Candidate Name		C	Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Dis	oursement For: Primary Ge	eneral		FUNDRAISING EXPENSE	
	President	Other (specify)	en en an			
	State: District:					
C.	Full Name (Last, First, Middle Initial) MBNA America				Transaction ID: 60831.E2478 Date of Disbursement	
	Mailing Address P O Box 15287				$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 8 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix}$	
	City Wilmington	State Zip Cod DE 19886			Amount of Each Disbursement this Period	
	Purpose of Disbursement				130.00	
	Meal Expense Candidate Name			002 Category/	Refund or Disposal of Excess Contributions Required Under	
	Office Cought	aura amant Fair		Туре	11 C.F.R. 400.53	
	Office Sought: House Dis	oursement For: Primary Ge	eneral		MEAL EXPENSE	
	President	Other (specify)				
_	State: District:					
s	UBTOTAL of Disbursements This Page (option	nal)			704.08	

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	for each ca	ate schedule(s) ategory of the ummary Page	(check only	NUMBER: PAGE 47 / 58 y one) X 17
	y Information copied from such Reports and State for commercial purposes, other than using the na				for the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) Friends of Tim Johnson				
Α.	Full Name (Last, First, Middle Initial) McLaughlin & Associates Mailing Address 919 Prince St				Transaction ID: 61013.E2541 Date of Disbursement M 9 M / D 1 5 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Alexandria Purpose of Disbursement Polling Expense	State VA	Zip Code 22314-	005	Amount of Each Disbursement this Period 10575.00 Refund or Disposal of Excess
	Candidate Name	sement For:	General	Category/ Type	Contributions Required Under 11 C.F.R. 400.53 POLLING EXPENSE
	President State: District: Full Name (Last, First, Middle Initial)	Other (spec			Transaction ID: 60831.E2460
B.	Mcleod USA Mailing Address 2302 Fox Dr				Date of Disbursement M 7 M 2 0 7 2 0 0 6 9
	City Champaign	State IL	Zip Code 61820-		Amount of Each Disbursement this Period
	Purpose of Disbursement Phone Service Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: Senate President State: Disbur	sement For: Primary Other (spec	General ify) ▼		PHONE SERVICE
C.	Full Name (Last, First, Middle Initial) Mcleod USA				Transaction ID: 60831.E2495 Date of Disbursement
	Mailing Address 2302 Fox Dr				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Q \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & O & G \\ Q & O & G \end{smallmatrix} \end{bmatrix}$
	City Champaign	State IL	Zip Code 61820-		Amount of Each Disbursement this Period
	Purpose of Disbursement Phone Service Candidate Name			001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: Senate President State: Disbur	sement For: Primary Other (spec	General ify) ▼		PHONE SERVICE
s	UBTOTAL of Disbursements This Page (optiona	l)		>	10599.18

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	for each c	rate schedule(s) ategory of the Summary Page	(check onl	NUMBER: PAGE 48 / 58 y one) X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam				for the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) Friends of Tim Johnson				
Α.	Full Name (Last, First, Middle Initial) Mcleod USA				Transaction ID: 61005.E2525 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 2302 Fox Dr				09 26 2006
	City Champaign	State IL	Zip Code 61820-		Amount of Each Disbursement this Period
	Purpose of Disbursement Phone Service			001	13.12 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General		PHONE SERVICE
	State: District:				
В.	Full Name (Last, First, Middle Initial) David McSweeney for Congress				Transaction ID: 60831.E2456 Date of Disbursement
	Mailing Address 890 South Rand Road S	uite C			$\begin{bmatrix}\begin{smallmatrix}M&7&M\\0&7&\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&1&0\\1&4\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&0&0&6\\2&0&0&6\end{smallmatrix}$
	City Lake Zurich	State IL	Zip Code 60047-		Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contribution			001	1000.00 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	ement For: Primary Other (spec	General cify) ▼		POLITICAL CONTRIBUTION
	State: District: Full Name (Last, First, Middle Initial)				
C.	Roskam for Congress				Transaction ID: 60831.E2457 Date of Disbursement
	Mailing Address 423 W Wesley St				$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{bmatrix} $
	City Wheaton	State IL	Zip Code 60187-		Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contribution			011	1000.00 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General cify) ▼		POLITICAL CONTRIBUTION
_	State: District:				
s	UBTOTAL of Disbursements This Page (optional)			>	2013.12

·	20330330030			
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	(check onl	NUMBER: PAGE 49 / 58 y one) X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and Stat for commercial purposes, other than using the na			for the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) Jason Shelby Mailing Address 6402 Birchwood Lane			Transaction ID: 60831.E2468 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Decatur	State Zip Code IL 62521-		Amount of Each Disbursement this Period
	Purpose of Disbursement Salary Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbut Senate President State: District:	rsement For: Primary General Other (specify)	,	SALARY
В.	Full Name (Last, First, Middle Initial) Jason Shelby			Transaction ID: 60831.E2469 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 6402 Birchwood Lane	State 7:in Code		
	City Decatur Purpose of Disbursement	State Zip Code IL 62521-		Amount of Each Disbursement this Period 38.11
	Travel Reimbursement Candidate Name		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbut Senate President	rsement For: Primary General Other (specify)		TRAVEL REIMBURSEMENT
	State: District:			
C.	Full Name (Last, First, Middle Initial) Jason Shelby			Transaction ID: 61005.E2504 Date of Disbursement
	Mailing Address 6402 Birchwood Lane			09 / 05 / 2006
	City Decatur	State Zip Code IL 62521-		Amount of Each Disbursement this Period
	Purpose of Disbursement Salary Candidate Name		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbut Senate President	rsement For: Primary General Other (specify)	i ype	SALARY
_	State: District:	<u> </u>		
	IJRTOTAL of Dishursements This Page (ontions	ın.	_	315.09

SUBTOTAL of Disbursements This Page (optional)

S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)		NUMBER: PAGE 50 / 58
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and Statem or commercial purposes, other than using the name			
\rangle	NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
۹.	Full Name (Last, First, Middle Initial) Douglas Snyder			Transaction ID: 60831.E2483 Date of Disbursement
	Mailing Address 605 East Willow St			$ \begin{bmatrix} M & M \\ 0 & 8 \end{bmatrix} \begin{bmatrix} D & D & D \\ 0 & 8 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$
	•	State Zip Code IL 61761-		Amount of Each Disbursement this Period
	Purpose of Disbursement Donation Candidate Name		012 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President State: District:	ment For: Primary General Other (specify)	71-1	DONATION
В.	Full Name (Last, First, Middle Initial) Town and Country Advertising			Transaction ID: 60831.E2475 Date of Disbursement
	Mailing Address PO Box 5104	State 7:n Code		
	Scottsdale	State Zip Code AZ 85261-		Amount of Each Disbursement this Period 66.00
	Purpose of Disbursement Advertising Candidate Name		004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		ADVERTISING
Э.	Full Name (Last, First, Middle Initial) Tuscola Review			Transaction ID: 61005.E2514 Date of Disbursement
	Mailing Address 115 W Sale			$ \begin{bmatrix} M & M \\ 0 & 9 \end{bmatrix} \begin{bmatrix} D & 1 & 8 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$
		State Zip Code IL 61953-		Amount of Each Disbursement this Period
	Purpose of Disbursement Advertising Expenser Candidate Name		004 Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	Туре	ADVERTISING EXPENSER
	'			686.00

SCHEDULE B (FEC Form 3)						FOR LINE	NIIMDE	D.			MGE	51 / 58
ITEMIZED DISBURSEMENTS			Use seperate schedule(s) for each category of the			(check onl						
Detailed Summary Pa						X 17 20a	ш.	18 20b	19a 20d		19b 21	
	Any Information copied from such Reports and Statements may not be sold or used by any person for or for commercial purposes, other than using the name and address of any political committee to soli											
Λ	NAME OF COMMITTEE (In Full)											
\mathbb{Z}	Friends of Tim Johnson											
Α.	Full Name (Last, First, Middle Initial) U.S. Postmaster								n ID:	60831 ment	.E24	177
	Mailing Address 2001 N. Mattis						0 ^M 8	M /	0	8 /	YZ	2006
	City Champaign		State IL	Zip Code 61821-			Amou	nt of	Each	Disburs	emer	nt this Period
	Purpose of Disbursement Postage					001	Be	efund	or Di	sposal o	of Exc	90.40
	Candidate Name					ategory/ Type	L Co	ontrib		Requir		
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ecify) ▼			POST	AGI	Ξ			
	State: District:											
В.	Full Name (Last, First, Middle Initial) U.S. Postmaster						Date	of Dis	burse		.E24	l92
	Mailing Address 2001 N. Mattis						0 ^M 8	M /	^D 2	8 /	Y	Ý 0 0 6 °
	City Champaign		State IL	Zip Code 61821-			Amou	nt of	Each	Disburs	emer	nt this Period
	Purpose of Disbursement Postage		001			001	210.35 Refund or Disposal of Excess					
	Candidate Name					ategory/ Type			utions .R. 40	Requir 0.53	ed Uı	nder
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General			POST	AGI	≣			
	State: District:		Other (spe	SCIIY) ₩								
С.	Full Name (Last, First, Middle Initial) U.S. Postmaster								n ID:	61005	.E25	508
	Mailing Address 2001 N. Mattis						0 9	M /	^D 0	9 /	Y	2006
	City Champaign		State IL	Zip Code 61821-			Amou	nt of	Each	Disburs	emer	nt this Period
	Purpose of Disbursement		<u> </u>	01021-								585.00
	Postage Candidate Name					001 ategory/				sposal o		
						Туре	11	C.F.	.R. 40	0.53		
	Office Sought: House Senate	Disburse	ment For: Primary	General			POST	AGE	Ξ			
	State: President District:		Other (spe	ecify) 🔻								
s	SUBTOTAL of Disbursements This Page	e (optional) .				▶						885.75

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SCHEDULE B (FEC Form 3)			Use sepe	rate schedule(s)		NUMBER: PAGE 52 / 58 ly one)		
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page		(CITECK O				
			Detailed	Summary Fage			20c	
	y Information copied from such Reports for commercial purposes, other than usin							
Λ	NAME OF COMMITTEE (In Full)							
17	Friends of Tim Johnson							
<u></u>	Full Name (Last, First, Middle Initial)							
A.	Upclose Printing					Date of Disbursemen	t	
	Mailing Address 714 S. 6th					08 / 08	2006	
	City		State	Zip Code		Amount of Each Disb	ursement this Period	
	Champaign		IL	61820-			578.39	
	Purpose of Disbursement Printing				003	Refund or Dispos		
	Candidate Name				Category/ Type	Contributions Rec		
	Office Sought: House	Disburse	ment For:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	PRINTING		
	Senate		Primary	General		PRINTING		
	President		Other (spe	cify)				
	State: District:							
В.	Full Name (Last, First, Middle Initial) Upclose Printing					Transaction ID: 610		
	opciose Finting					Date of Disbursemen		
	Mailing Address 714 S. 6th					09 / 05	2006	
	City		State	Zip Code		Amount of Each Disb	ursement this Period	
	Champaign Purpose of Disbursement		IL	61820-		_	966.39	
	Printing Expense				003	Refund or Dispos		
	Candidate Name				Category/ Type	Contributions Rec 11 C.F.R. 400.53		
	Office Sought: House	Disburse	ment For:			PRINTING EXPEN	SE	
	Senate		Primary	General		THINKING EXILER	02	
	State: President District:	Ш	Other (spe	city)				
	Full Name (Last, First, Middle Initial)					T	04 50455	
C.	Verizon Wireless					Transaction ID: 608 Date of Disbursemen		
						M M / D D	2006	
	Mailing Address PO Box 6170							
	City Carol Stream		State IL	Zip Code 60197-		Amount of Each Disb		
	Purpose of Disbursement				· · · ·		150.00	
	Phone Service				001	Refund or Dispos Contributions Rec		
	Candidate Name				Category/ Type	11 C.F.R. 400.53	ulled Officer	
	Office Sought: House	Disburse	ment For:		. , , , ,	PHONE SERVICE		
	Senate		Primary	General		PHONE SERVICE		
	President		Other (spe	cify)				
_	State: District:							
s	UBTOTAL of Disbursements This Page	(optional)					1694.78	

nag	e# 26950558894										
	CHEDULE B (FEC Form 3)		Use seperate schedule(s) for each category of the			E NUMBER: PAGE 53 / 58 lly one)					
11	EMIZED DISBURSEMENTS		I Summary Page		X 17 20a		18 20b		19a 20c		19b 21
	y Information copied from such Reports and S for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full) Friends of Tim Johnson										
Α.	Full Name (Last, First, Middle Initial) Verizon Wireless				Date		isburs	emen	'13.E		
	Mailing Address PO Box 6170				0 7	IVI		1 3	Ĺ	2	0 0 6
	City Carol Stream	State IL	Zip Code 60197-		Amou	unt o	f Eacl	n Disb	ursen	-	this Period
	Purpose of Disbursement Phone Service			001	B	efun	d or F)ispos	al of E	_	176.02
	Candidate Name			Category/ Type	C	ontri	butior		quired		
	Senate President	bursement For: Primary Other (sp	General pecify) ▼		PHO	NE :	SER	/ICE			
	State: District:										
В.	Full Name (Last, First, Middle Initial) Verizon Wireless				Date	of D	isburs	emen	31.E it / [Y		
	Mailing Address PO Box 6170	0 8 M / D 1 D / Y Y Y O O 6 Y									
	City Carol Stream	State IL	Zip Code 60197-		Amou	unt o	f Eacl	n Disb	oursen		this Period
	Purpose of Disbursement Phone Service	001	Refund or Disposal of Excess								
	Candidate Name			Category/ Type		ontri	bution		quired		
	Senate	bursement For: Primary	General		PHO	NE :	SER	/ICE			
	State: President District:	Other (sp	ecity) $lacksquare$								
C.	Full Name (Last, First, Middle Initial) Verizon Wireless							: 608 emen	31.E	248	39
	Mailing Address PO Box 6170				0 ^M 8	М	/ D	1 5	/ Y	ž	0 0 6 °
	City Carol Stream	State IL	Zip Code 60197-		Amo	unt o	f Eacl	n Disb	oursen		this Period
	Purpose of Disbursement Phone Service 001						174.32				
	Candidate Name	001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53								
	Senate	bursement For:	General		PHO	NE :	SER	/ICE			
	State: President District:	Other (sp	ecity)								

500.34

SUBTOTAL of Disbursements This Page (optional)

SCHEDULE B (FEC Form 3)					FORLINE	E NUMBER: PAGE 54 / 58			
	TEMIZED DISBURSEMENTS		∣ Use sepe	rate schedule(s) category of the	(check only	aly one)			
•••		ITOLIVILITIO	Detailed S	Summary Page		X 17 18 19a 20a 20b 20c	19b 21		
						or the purpose of solicating co licit contributions from such co			
$\overline{\ }$	NAME OF COMMITTEE	E (In Full)							
\rangle	Friends of Tim Johns	son							
Α.	Full Name (Last, First, M Verizon Wireless	liddle Initial)				Transaction ID: 61005.E Date of Disbursement			
	Mailing Address PC	Box 6170				09 M / D B / Y	ž 0 0 6 °		
	City Carol Stream		State IL	Zip Code 60197-		Amount of Each Disbursen	• • • • • •		
	Purpose of Disbursemer Phone Service	nt			001	Refund or Disposal of E			
	Candidate Name				Category/ Type	Contributions Required 11 C.F.R. 400.53	Under		
	S	enate resident	isbursement For: Primary Other (spe	General cify) ▼		PHONE SERVICE			
	State: Distr	ct:							
В.	Full Name (Last, First, M Verizon Wireless	liddle Initial)				Transaction ID: 61005.E Date of Disbursement	2515		
	Mailing Address PC	Box 6170				0 9 M / D B / Y	2006		
	City Carol Stream		State IL	Zip Code 60197-		Amount of Each Disbursen			
	Purpose of Disbursemer Phone Service	nt			001	Refund or Disposal of E	174.32 Excess		
	Candidate Name				Category/ Type	Contributions Required 11 C.F.R. 400.53	Under		
	S	louse Di enate resident	isbursement For: Primary Other (spe	General		PHONE SERVICE			
	State: Distri		Other (spec	City) ♥					
	Full Name (Last, First, M	liddle Initial)				Transaction ID: 60831.E	2471		
C.	Winfrey and Compar	,				Date of Disbursement			
		3 South Washing te B-200	gton			$\begin{bmatrix} 0 & 8 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 3 \end{bmatrix} / \begin{bmatrix} Y & Y & Y \end{bmatrix}$	2006		
	City Alexandria		State VA	Zip Code 22314-		Amount of Each Disbursen			
	Purpose of Disbursement						2542.53		
	Fundraising Expense Candidate Name				003 Category/ Type	Refund or Disposal of E Contributions Required 11 C.F.R. 400.53			
	s	louse Di lenate resident	isbursement For: Primary Other (spe	General		FUNDRAISING EXPEN	SE		
	State: Distr	ct:							
SI	UBTOTAL of Disburseme	ents This Page (op	tional)		<u></u>		2866.85		

nag	e# 26950558896										
SCHEDULE B (FEC Form 3) Use seperate scheduler							NE NUMBER: PAGE 55 / 58				
IT	ITEMIZED DISBURSEMENTS		TS	for each category of the Detailed Summary Page		(check	only one) X 17				
							on for the purpose of solicating contributions solicit contributions from such committee				
<u> </u>	NAME OF COMM		9								
\rangle	Friends of Tim	, ,									
_	Full Name (Last, F						Transaction ID: 60831.E2496				
Α.	Winfrey and Co						Date of Disbursement 0 8 2 9 2 0 0 6				
	Mailing Address	228 South Was Suite B-200	hington				08 7 29 7 2006				
	City Alexandria			State VA	Zip Code 22314-		Amount of Each Disbursement this Period				
	Purpose of Disbur Fundraising Exper					003	2500.00				
	Candidate Name					Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought:	House Senate President	Disburser	nent For: Primary Other (spe	General ecify) ▼		FUNDRAISING EXPENSE				
		District:									
В.		ional Services					Transaction ID: 60831.E2486 Date of Disbursement 0 8 1 0 7 2 0 0 6				
	Mailing Address	220 E Adams S	Street				08 10 2006				
	City Springfield			State L	Zip Code 62701-		Amount of Each Disbursement this Period				
	Purpose of Disbur						6217.53				
	Printing and Mailin Candidate Name	g Cost				006 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought:	House Senate President District:	Disburser	ment For: Primary Other (spe	General ecify) ▼		PRINTING AND MAILING COST				
	Full Name (Last, F		<u> </u>				ID 04005 50500				
C.							Transaction ID: 61005.E2502 Date of Disbursement				
	Mailing Address 220 E Adams Street		Street				09 0 5 7 2 0 0 6				
	City Springfield			State L	Zip Code 62701-		Amount of Each Disbursement this Period				
	Purpose of Disbur	sement				000	3379.60				
	Printing Expense Candidate Name			006 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53						
	Office Sought:	House Senate President	Disburser	ment For: Primary Other (spe	General ecify) ▼		PRINTING EXPENSE				

12097.13

65791.04

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State:

District:

SUBTOTAL of Disbursements This Page (optional)

SCHEDULE C (FEC Form 3) LOANS

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

PAGE 56 / 58
FOR LINE NUMBER: (check only one)

	l
13a	
13b	

		Detailed Sui	mmary Page	(Oncore only)	
ME OF COMMITTEE (In Full)		-			<u> </u>
ends of Tim Johnson			_		
LOAN SOURCE Full Name (Last, First, Middle I	nitial)			ion ID: LS608 ction:	331.C/050
, , ,	ililiai)			Primary	
Busey Bank				General	
Mailing Address 201 W. Main			X		/) ▼
			Pı	rimary	
_ <i>'</i>	ate IL ZIP Co			-	
Original Amount of Loan	Cumulative Payment To	o Date	Balance C	outstanding at C	Close of This Pe
100000.00		70725.12			29274.88
TERMS					
Date Incurred	Date Due		Interest Rate	_	Secured:
	70521		10.:	²⁵ % (apr)	X Yes
List All Endorsers or Guarantors (if any) to Loan So	ource	T			
Full Name (Last, First, Middle Initial) Timothy V. Johnson		Name of Emplo	oyer		
Mailing Address		Occupation			
413 Berringer Circle					
		Amount	<u> </u>		1 1 1
City State Urbana IL	ZIP Code 61802-	Guaranteed Outstanding:		29	9274.88
Full Name (Last, First, Middle Initial)	01002	Name of Emplo	oyer		
Mailing Adalas a					
Mailing Address		Occupation			
		Amount		1 1 1 1	1 1 1
City State	ZIP Code	Guaranteed Outstanding:			
E. H. Nicocc (Local, Elizab Medially 1925)					
Full Name (Last, First, Middle Initial)		Name of Emplo	oyer		
Mailing Address		Occupation			
014.	7ID 0 - 4 -	Amount Guaranteed			
City State	ZIP Code	Outstanding:			
Full Name (Last, First, Middle Initial)		Name of Emplo	oyer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed			
Only State	ZII- Ouc	Outstanding:			
JBTOTALS This Period This Page (optional)			•		29274.8
DTALS This Period (last page in this line only)			•		
arry outstanding balance only to LINE 3, Schedule D	, for this line. If no Sch	nedule D, carry for	ward to appropra	aite line of Sum	mary.

SCHEDULE C (FEC Form 3) LOANS

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

PAGE 57 / 58
FOR LINE NUMBER: (check only one)

BER:		
	Χ	13a
		13b

	Detailed Suffilliary Page 13b 1
NAME OF COMMITTEE (In Full)	
Friends of Tim Johnson	
	Transaction ID: LS60831.C7052
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
Busey Bank	Primary
	General
Mailing Address 201 W. Main	X Other (specify)
	Primary
City Urbana State IL ZIP Coo	
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period
40000.00	0.00 40000.00
TERMS	
Date Incurred Date Due	Interest Rate Secured:
0 3 0 3 2 0 0 0 20070521	10.25 % (apr) X Yes No
	10.25 % (apr) X Yes No
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Timothy Johnson	
Mailing Address	Occupation
413 Berringer Circle	Attorney
	Amount
City State ZIP Code	Guaranteed 40000.00
Urbana IL 61802-	Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
	0
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed
State Zii Sode	Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	·
	Amount
City State ZIP Code	Guaranteed
	Outstanding:
	40000.00
SUBTOTALS This Period This Page (optional)	40000.00
TOTALS This Period (last page in this line only)	69274.88
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Sche	edule D, carry forward to appropraite line of Summary.

SCHEDULE D (FEC Form 3)

(Use separate

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DEBTS AND OBLIGATIONS Excluding Loans		schedule(s) for each numbered line)	FOR LINE NUMBER: (check only one) 9 X 10
NAME OF COMMITTEE (In Full) Friends of Tim Johnson			
A. Full Name (Last, First, Middle Initial) of Debtor of Busey Bank	r Creditor		ebt (Purpose): red Interest
Mailing Address 201 W. Main			
City State Urbana IL	ZIP Code 61801-		
Outstanding Balance Beginning This Period		Tra	nsaction ID: LS60713.E2450
193.38			
Amount Incurred This Period	Payment This Period		ng Balance at Close of This Period
1814.24	1810.75)	196.87
1) SUBTOTALS This Period This Page (optional)		. •	196.87
2) TOTALS This Period (last page this line number on	ly)		196.87
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	. •	
4) ADD 2) and 3) and carry forward to appropriate line	e of Summary Page (last page only)	>	