## 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, tover the lines	type		
F	riends of Tim Johnson						
ΑD	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 🛦		ST	TATE 🛋	ZIP CODE A
	C00350421		3. IS THIS REPORT	NEW (N)	OR	( AMENDEI (A)	STATE V DISTRICT
4.	TYPE OF REPORT ((a) Quarterly Reports:  April 15 Quarterly	Choose One) Report (Q1)	(b) 12-Day <b>P</b> I	RE-Election Repo Primary (12P Convention (	y) X	General (120 Special (128)	
	July 15 Quarterly October 15 Quart		Election or	1 1 1	0 8	2006	in the State of
	January 31 Year-I	End Report (YE)	(c) 30-Day <b>P</b> (	OST-Election Rep		Runoff (30R)	Special (30S)
	Termination Repo	ort (TER)	Election or	n			in the State of
5.	Covering Period 1	0 1	2006	through	10	18	2006
	ertify that I have examined this pe or Print Name of Treasurer		-	dge and belief it is	true, correct an	d complete.	
	gnature of Treasurer Electr		Brian Kelly	v suhject the nere	Dat		1 1 2 0 0 7
	Office Use Only	oneous, or incompl	oto imorriation ma	y subject the pelsi	on arguing trib	roport to the per	FEC FORM 3 (Revised 02/2003)

## Image# 27930137964

## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name Friends of Tim Johnson м N 1 0 ° D 1 0 0 1 2006 2006 Report Covering the Period: From: To: 18 **COLUMN B COLUMN A This Period Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 23870.00 320225.74 (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) 23870.00 320125.74 (subtract Line 6(b) from Line 6(a))....... 7. Net Operating Expenditures (a) Total Operating Expenditures 80594.36 313976.02 (from Line 17)..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 313976.02 80594.36 (subtract Line 7(b) from Line 7(a))....... Cash on Hand at Close of 75907.79 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 69821.92 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 ° D Report Covering the Period: 2006 2006 From: 10 0 1 10 18 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 5755.00 67667.30 (i) Itemized (use Schedule A)..... 3940.00 47306.99 (ii) Unitemized..... (iii) TOTAL of contributions 9695.00 114974.29 from individuals..... 0.00 896.00 (b) Political Party Committees..... (c) Other Political Committees 14175.00 204355.45 (such as PACS)..... 0.00 0.00 (d) The Candidate..... (e) TOTAL CONTRIBUTIONS (other than loans) 23870.00 320225.74 (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)...... 320225.74 23870.00

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
7. OPERATING EXPENDITURES	80594.36	313976.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21)	80594.36	484076.02
III. CASH SUMN	MARY	
23. CASH ON HAND AT BEGINNING OF REPORTIN	IG PERIOD	132632.15
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, p	page3)	23870.00
25. SUBTOTAL (add Line 23 and Line 24)		156502.15
26. TOTAL DISBURSEMENTS THIS PERIOD (from L	ine 22)	80594.36
27. CASH ON HAND AT CLOSE OF REPORTING PE	ERIOD	75907.79

SC	CHEDULE A (FEC Form 3 )		Use separate schedule(s)	FOR LINE NUMBER: PAGE 5/21	
	EMIZED RECEIPTS		or each category of the	(check only one)  X 11a  11b  11c  11d	
			Detailed Summary Page	X   11a   11b   11c   11d   12   12   13a   13b   14   15	
An	y information copied from such Reports and St for commercial purposes, other than using the	atements may	y not be sold or used by any perso	on for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full)	Tarrio aria ade	aroos or any pontion committee to	CONTRACTOR IN CONTRACTOR IN CONTRACTOR	
$\rangle$	Friends of Tim Johnson				
	Full Name (Last, First, Middle Initial) Ralph & Stephanie Alexander			Date of Receipt	
	Mailing Address 92 County Road 2000 N	North		10 05 7 2006	
	City	State	Zip Code	Transaction ID: 61005.C7144	
	Mahomet	IL	61853	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		300.00	
	Name of Employer retired	Occupation Retired	n	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) ▼	0 0	550.00		
	Full Name (Last, First, Middle Initial) Dr. Robert Brunner			Date of Receipt	
	Mailing Address 4001 East Washington			10 05 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.C7143	
	Urbana	IL	61802	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer	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	Ziodioii d		1	
	Other (specify) ▼	0 0	500.00		
Э.	Full Name (Last, First, Middle Initial) Mary Capel			Date of Receipt	
	Mailing Address 8 Greencroft Drive			10 10 2006	
	City	State	Zip Code	Transaction ID: 61012.C7179	
	Champaign	IL	61821	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		300.00	
	Name of Employer retired	Occupation	n	Receipt	
	Receipt For: 2006	Retired Flection C	Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
	Primary X General Other (specify) ▼		300.00		
SI	JBTOTAL of Receipts This Page (optional)			1100.00	
т/	This Period (last page this line number of	nnly)			

SCHEDULE A (FEC Form 3 )	Use separate schedule(s)	FOR LINE NUMBER: PAGE 6/21				
TEMIZED RECEIPTS	or each category of the	(check only one)				
	Detailed Summary Page	X 11a 11b 11c 11d 11d 12 13a 13b 14 15				
Any information copied from such Reports and Statements	may not be sold or used by any persor	n 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)						
Greg Crawford		Date of Receipt				
Mailing Address 14 Foothill Rd		M M / D D / Y Y Y Y				
City State	Zip Code	10 17 2006				
Monticello IL	61856	Transaction ID: 61023.C7225  Amount of Each Receipt this Period				
FFC ID number of contributing	01030					
federal political committee.		300.00				
Name of Employer Occupa	ation	Receipt				
Name of Employer C F & H Insurance Owne		Limit Increased Due to Opponent's				
	on Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)				
Primary X General	475.00					
Other (specify) ▼						
Full Name (Last, First, Middle Initial)  3. Harold Dorsett		Date of Receipt				
Mailing Address 1021 Forestview		M M / D D / Y Y Y Y				
Maining Address 1021 1 Diestview	10 03 2006					
City State	Zip Code	Transaction ID: 61005.C7104				
Mahomet IL	61853	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee		300.00				
federal political committee.						
Name of Employer Occuparetired	ation	Receipt				
Retire		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)				
Receipt For: 2006 Electic	on Cycle-to-Date ▼	Sponding (2 S.S.S. Tria(I) Tria T)				
Other (specify) ▼	300.00					
	0 0 0 0 0 0 0 0					
Full Name (Last, First, Middle Initial)  David Eades		Date of Receipt				
Mailing Address 5 Lyndhurst Place		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: 61005.C7152				
Champaign IL	61820	Amount of Each Receipt this Period				
FEC ID number of contributing		100.00				
federal political committee.		100.00				
Name of Employer Self- Employed Octhor	ation	Receipt				
Self- Employed Ortho	oterist	Limit Increased Due to Opponent's				
_ ` _	on Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)				
Primary X General	300.00					
Other (specify) ▼						
CUPTOTAL of Descript Title 20 of the 20		700.00				
SUBTOTAL of Receipts This Page (optional)	<u> </u>					
FOTAL This Period (last page this line number only)						

IT	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS  by information copied from such Reports and Si	tatements ma	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/21 (check only one)  X 11a 11b 11c 11d 12 13a 13b 14 15  on for the purpose of soliciting contributions
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Friends of Tim Johnson	name and add	dress of any political committee to	solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Allen Everette  Mailing Address 1811 Kensington Knoll  City Champaign  FEC ID number of contributing federal political committee.  Name of Employer Orange & Blue Distributing  Receipt For: 2006 Primary X General Other (specify)	State IL C Occupation Presiden		Date of Receipt  M M J D D J Z D O 6  Transaction ID: 61023.C7233  Amount of Each Receipt this Period  1000.00  Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) C.E. Facer  Mailing Address 2809 Slayback Road  City  Urbana  FEC ID number of contributing federal political committee.  Name of Employer Requested Info  Receipt For: 2006  Primary X General Other (specify)	State IL  C  Occupation  Election C	Zip Code 61802 n Cycle-to-Date ▼	Date of Receipt    M M
<b>D.</b>	Full Name (Last, First, Middle Initial) Clive Follmer Mailing Address 302 E Sherwin Circle  City Urbana  FEC ID number of contributing federal political committee.  Name of Employer Self-employed  Receipt For: 2006  Primary X General Other (specify) ▼	State IL  C  Occupation Attorney Election C	Zip Code 61802 n Cycle-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)		<b>)</b>	1400.00
T	OTAL This Period (last page this line number	only)		

S	CHEDULE A (FEC Form 3 )		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 21
ITEMIZED RECEIPTS			or each category of the	(check only one)  X 11a  11b  11c  11d
			Detailed Summary Page	X 11a 11b 11c 11d 11d 12 13a 13b 14 15
Ar	ny information copied from such Reports and Statemer for commercial purposes, other than using the name	ents may	not be sold or used by any perso	n for the purpose of soliciting contributions
<u>.                                    </u>	NAME OF COMMITTEE (In Full)		See of any pointed committee to	
$\rangle$	Friends of Tim Johnson			
۹.	Full Name (Last, First, Middle Initial) John Frauenhoffer			Date of Receipt
	Mailing Address 3806 Deerfield Drive			10 05 7 2006
	•	State	Zip Code	Transaction ID: 61005.C7142
	Champaign	_	61821	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			500.00
	Frauenhoffer & Accoriates	ccupation		Receipt
	E	ngineer	/cle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	10011011 0		
	Other (specify) ▼		600.00	
3.	Full Name (Last, First, Middle Initial) Bob Frederick			Date of Receipt
	Mailing Address 129 West Main Street			10 03 YYYYY 2006
	City	State	Zip Code	Transaction ID: 61005.C7115
	<u>Urbana</u> I	L	61801	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			175.00
	Fraderick & Hadle	ccupation		Receipt
	Al	torney	vcle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	iection O <sub>3</sub>		
	Other (specify) ▼	0 0	1587.30	
<del>.</del> Э.	Full Name (Last, First, Middle Initial) Ruth Gordon			Date of Receipt
	Mailing Address 1421 County Road 2900 No	orth		10 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State	Zip Code	Transaction ID: 61005.C7151
	Tarres.	L	61866	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			40.00
		ccupation		Receipt
		etired	vcle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	iection Cy		
	Other (specify) ▼	0 0	265.00	
s	UBTOTAL of Receipts This Page (optional)			715.00
_				
T	OTAL This Period (last page this line number only)		<b>•</b>	

SCH	EDULE A (FEC Form 3 )		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9/21
ITEN	IIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one)    X   11a
Any in	formation copied from such Reports and S commercial purposes, other than using the	tatements may	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.
NA	ME OF COMMITTEE (In Full) iends of Tim Johnson			
	l Name (Last, First, Middle Initial) beeb Habeeb			Date of Receipt
Ma	iling Address 1913 Oak Park Drive			M M / D D / Y Y Y Y Y 1 1 0 0 3 2 0 0 6
Cit	y nampaign	State IL	Zip Code 61822-5229	Transaction ID: 61005.C7103
FE	C ID number of contributing leral political committee.	C	01022-3229	Amount of Each Receipt this Period  300.00
	me of Employer ceipt For: 2006	Occupation Consulta Election C		Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	0 0	300.00	
B. Cra	I Name (Last, First, Middle Initial) aig Hays illing Address 28 Greencroft Drive			Date of Receipt  1 0 0 5 2 0 0 6
Cit	у	State	Zip Code	Transaction ID: 61005.C7145
<u>Cr</u>	nampaign	IL	61821	Amount of Each Receipt this Period
	C ID number of contributing leral political committee.	C		200.00 Receipt
Na C-	me of Employer U News Agency	Occupation Newspap	n oer Distributor	Limit Increased Due to Opponent's
Re	ceipt For: 2006 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 375.00	Spending (2 U.S.C. 441a(i)/441a-1)
	l Name (Last, First, Middle Initial) il Knox			Date of Receipt
Ma	iling Address 1408 Waterford Place			10 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cit	•	State	Zip Code	Transaction ID: 61012.C7176
	nampaign	<u>IL</u>	61821	Amount of Each Receipt this Period
	C ID number of contributing leral political committee.	C		300.00
Na Tu	me of Employer mmelson, Bryan & Knox	Occupation Attorney	n	Receipt  Limit Increased Due to Opponent's
Re	ceipt For: 2006 Primary X General Other (specify)	,	Sycle-to-Date ▼ 475.00	Spending (2 U.S.C. 441a(i)/441a-1)
SUB	FOTAL of Receipts This Page (optional)			800.00
	Al. This Period (last page this line number			

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 10 / 21 (check only one)  X 11a 11b 11c 11d
			Detailed Summary Page	12 13a 13b 14 15
An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements 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.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	Friends of Tim Johnson			
۹.	Full Name (Last, First, Middle Initial) William Kuhne			Date of Receipt
	Mailing Address 907 S. McKinley			10 10 2006
	City	State	Zip Code	Transaction ID: 61012.C7177
	Champaign	<u> </u>	61821	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Petry Kuhne Company	Occupatio	n	Receipt
		Owner		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 0.3.0. 441a(i)/441a-1)
	Primary X General Other (specify) ▼		300.00	
 3.	Full Name (Last, First, Middle Initial) Ira & Cecile Lebenson	!		Date of Receipt
	Mailing Address 307 West Indiana			10 05 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.C7146
	Urbana	IL	61801	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Christie Clinic	Occupatio	n	Receipt
		Surgeon		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 Primary X General	Election C	Cycle-to-Date ▼	Specially (2 creation and control of
	Other (specify)		725.00	
<u> </u>	Full Name (Last, First, Middle Initial) Robert & Marilyn Lee			Date of Receipt
	Mailing Address 999 Country Rd. 2500	Е		10 14 2006
	City	State	Zip Code	Transaction ID: 61023.C7202
	Homer	IL	61849-9731	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer	Occupatio	n	Receipt
		Retired		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 0.3.0. 441a(i)/441a-1)
	Primary X General Other (specify) ▼		375.00	
S	UBTOTAL of Receipts This Page (optional)			800.00
_	OTAL This Deviced (lead associated Page 1)		<u> </u>	
1 (	OTAL This Period (last page this line number	orlly)		

Primary

Other (specify)

X General

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

PAGE 11/21 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 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) Date of Receipt Ruth Shurts Mailing Address 507 West Green 10 03 2006 City State Zip Code Transaction ID: 61005.C7119 Urbana IL 61801 Amount of Each Receipt this Period FEC ID number of contributing 200.00 C federal political committee. Receipt Name of Employer Self-employed Occupation Homemaker 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 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Warren Wessels Date of Receipt Mailing Address 1016 W. Daniel 17 2006 City Transaction ID: 61023.C7219 State Zip Code Champaign IL 61821 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Receipt Name of Employer retired Occupation Retired Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2006 Election Cycle-to-Date

215.00

SUBTOTAL of Receipts This Page (optional)	•	240.00
TOTAL This Period (last page this line number only)	<u> </u>	5755.00

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 21 (check only one)
Ar or	ny information copied from such Reports and St	atements may	not be sold or used by any persodress of any political committee to	12   13a   13b   14   15  on for the purpose of soliciting contributions solicit contributions from such committee.
$\sum_{i=1}^{n}$	NAME OF COMMITTEE (In Full) Friends of Tim Johnson		, , , , , , , , , , , , , , , , , , , ,	
Α.	Full Name (Last, First, Middle Initial) American Council of Engineering Co. PAC Mailing Address 1015 15th Street, NW  City	State	Zip Code	Date of Receipt    M M
	Washington	DC	20005-2605	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.  Name of Employer		0010868	1000.00  Receipt
	Receipt For: 2006 Primary X General Other (specify)	·	Cycle-to-Date ▼ 3000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
В.	Full Name (Last, First, Middle Initial) Deloitte & Touche Mailing Address P.O. Box 365			Date of Receipt  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: 61012.C7183
	Washington	DC	20044-0365	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.  Name of Employer	C		2000.00 Receipt
	Receipt For: 2006 Primary X General Other (specify)		Cycle-to-Date ▼ 2000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<u> </u>	Full Name (Last, First, Middle Initial) Every Republican is Crucial			Date of Receipt
	Mailing Address 25 E Main Street Suite	200		10 17 2006
	City	State	Zip Code	Transaction ID: 61023.C7226
	Richmond	VA	23219	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5000.00
	Name of Employer	Occupation	Receipt  Limit Increased Due to Opponent's	
	Receipt For: 2006  Primary X General  Other (specify) ▼	Election C	Sycle-to-Date ▼ 5000.00	Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			8000.00
т	OTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3)			FOR LINE NUMBER: PAGE 13/21				
		Use separate schedule(s) or each category of the	(check only one)				
ITEMIZED RECEIPTS		Detailed Summary Page	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 e name and add	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)  Illinois Prairie St Chiropractic Assoc			Date of Receipt				
Mailing Address P O Box 4174			10 14 2006				
City  Dealt laland	State II	Zip Code	Transaction ID: 61023.C7204				
Rock Island	IL.	61204	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		175.00				
Name of Employer	Occupation	1	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	175.00	1				
Other (specify) ▼	0 0	175.00					
Full Name (Last, First, Middle Initial)  3. Lorillard Tobacco Co PAC			Date of Receipt				
Mailing Address 714 Green Valley Rd			10 17 2006				
City	State	Zip Code	Transaction ID: 61023.C7227				
Greensboro	NC	27408	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		1000.00				
Name of Employer	Occupation	1	Receipt  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			1				
Other (specify)		1000.00					
Full Name (Last, First, Middle Initial)  C. NBWA PAC	•		Date of Receipt				
Mailing Address 1100 King Street Suite 600			10 17 2006				
City	State	Zip Code	Transaction ID: 61023.C7232				
Alexandria	VA	22314-2944	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	<b>C</b> C00	0144766	5000.00				
Name of Employer	Occupation	1	Receipt				
Receipt For: 2006	Flection C	ycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)				
Primary X General			1				
Other (specify) ▼		7500.00	]				
SUBTOTAL of Receipts This Page (optional)	•		6175.00				
			14175.00				
OTAL This Period (last page this line number only)							

C4					
	CHEDULE B (FEC Form 3 )		te schedule(s)	FOR LINE (check only	NUMBER: PAGE 14 / 21 one)
П	EMIZED DISBURSEMENTS		tegory of the ımmary Page	l ` <u>-</u>	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) The Sumner Press				Transaction ID: 61005.E2528 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address P O Box 126				10 03 2006
	•		Zip Code 62466-		Amount of Each Disbursement this Period
	Purpose of Disbursement Advertising Expense			004	91.00  Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ment For: Primary Other (specif	General <b>▼</b>		ADVERTISING EXPENSE
	State: District:				
В.	Full Name (Last, First, Middle Initial) Ameren IP				Transaction ID: 61012.E2534 Date of Disbursement
	Mailing Address P.O. Box 511				$\begin{bmatrix} M & M & M \\ 1 & 0 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 1 & 0 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{bmatrix}$
	•		Zip Code 62525-		Amount of Each Disbursement this Period
	Purpose of Disbursement Utilities			001	47.48  Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ment For: Primary Other (specif	General <b>(v)</b> ▼		UTILITIES
	State: District:	(-p	· · · · · · · · · · · · · · · · · · ·		
C.	Full Name (Last, First, Middle Initial) Director of Employment Security				Transaction ID: 61023.E2548 Date of Disbursement
	Mailing Address 850 East Madison Street				$\begin{bmatrix}\begin{smallmatrix}M&O&M\\1&0&M\end{smallmatrix}\end{bmatrix} \ / \ \begin{bmatrix}\begin{smallmatrix}D&1&D\\1&7\end{smallmatrix}\end{bmatrix} \ / \ \begin{bmatrix}\begin{smallmatrix}Y&Y&Q&Q&G\\2&0&Q&G\end{smallmatrix}\end{bmatrix} $
			Zip Code 62702-		Amount of Each Disbursement this Period
	Purpose of Disbursement			* *	3.41
	Taxes 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	ment For: Primary Other (specif	General		TAXES
	State: District:	(-1	<i>-,</i> •		
s	UBTOTAL of Disbursements This Page (optional) .			<b>&gt;</b>	141.89

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

SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS		·	Use seperate schedule(s) for each category of the Detailed Summary Page		FOR LINE (check on	NUMBER: PAGE 15 / 21   PAGE 15 / 21
						20a 20b 20c 21
	y Information copied from such Reports an for commercial purposes, other than using					
	NAME OF COMMITTEE (In Full) Friends of Tim Johnson					
Α.	Full Name (Last, First, Middle Initial) Illinois Department of Rev					Transaction ID: 61023.E2547 Date of Disbursement  10
	Mailing Address Willard Ice Bldg. 101 West Jefferso	n				10 17 2006
	City Springfield		tate L	Zip Code 62702-		Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes				001	184.47  Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nent For: Primary Other (spe	General		TAXES
	State: District:					
В.	Full Name (Last, First, Middle Initial) Illinois Republican Party					Transaction ID: 61005.E2523 Date of Disbursement
	Mailing Address PO Box 78					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Springfield		tate L	Zip Code 62705-0078		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution				011	10000.00  Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President		nent For: Primary Other (spe	General cify) ▼		CONTRIBUTION
	State: District:					
C.	Full Name (Last, First, Middle Initial) Internal Revenue Service					Transaction ID: 61025.E2563 Date of Disbursement
	Mailing Address IRS					10 15 7 2006
	City Kansas City		state MO	Zip Code 64999-0102		Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes				001	1625.33  Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nent For: Primary Other (spe	General		TAXES
	State: District:		(-100	<i>→</i>		
s	<b>UBTOTAL</b> of Disbursements This Page (o	ptional)			<b>&gt;</b>	11809.80

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

SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS		Use seperate schedule(s) for each category of the Detailed Summary Page	(check onl	NUMBER: PAGE 16 / 21 y one)  X 17 18 19a 19b 20a 20b 20c 21	
	y Information copied from such Reports and State for commercial purposes, other than using the nan				
abla	NAME OF COMMITTEE (In Full)				
$ \rangle$	Friends of Tim Johnson				
Α.	Full Name (Last, First, Middle Initial) Brian Kelly  Mailing Address 2404 Windward Blvd Ap		Transaction ID: 61012.E2533  Date of Disbursement  M M M / D D D / Y Y Y O D D O D O D O D O D O D O D O D		
	#204 City	State Zip Code		Amount of Each Disbursement this Period	
	Champaign	IL 61821-		F06 10	
	Purpose of Disbursement Travel Reimbursement		002	506.10  Refund or Disposal of Excess	
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought:    House   Disburs	ement For: Primary General Other (specify)	,,	TRAVEL REIMBURSEMENT	
_					
В.	Full Name (Last, First, Middle Initial) Brian Kelly			Transaction ID: 61023.E2543 Date of Disbursement	
	Mailing Address 2404 Windward Blvd Ap	1 0 M / D 1 5 / Y 2 0 0 6 Y			
	City Champaign	State Zip Code IL 61821-		Amount of Each Disbursement this Period	
	Purpose of Disbursement Travel Reimbursement	002	147.00  Refund or Disposal of Excess		
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disburs Senate President	ement For:  Primary General  Other (specify) ▼		TRAVEL REIMBURSEMENT	
	State: District:				
C.	Full Name (Last, First, Middle Initial)  Town and Country Advertising			Transaction ID: 61005.E2531 Date of Disbursement	
	Mailing Address PO Box 5104			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 3 \end{smallmatrix} \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	
	City Scottsdale	State Zip Code AZ 85261-		Amount of Each Disbursement this Period	
	Purpose of Disbursement			66.00	
	Advertising Expense Candidate Name		004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Senate	ement For: Primary General		ADVERTISING EXPENSE	
_	State: President State:	Other (specify) ▼			
s	UBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	719.10	

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

	CHEDULE B (FEC Form 3 )	Use seperate schedule(s)	FOR LINE (check only	NUMBER: PAGE 17 / 21 y one)
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21
	Information copied from such Reports and Staten or commercial purposes, other than using the nam			
$\overline{}$	NAME OF COMMITTEE (In Full)			
$\backslash$	Friends of Tim Johnson			
Α.	Full Name (Last, First, Middle Initial) Tuscola Review			Transaction ID: 61012.E2535 Date of Disbursement
	Mailing Address 115 W Sale			10 M / D 1 D / Y 2 0 0 6 Y
	City Tuscola	State Zip Code IL 61953-		Amount of Each Disbursement this Period
	Purpose of Disbursement		004	105.00
	Advertising Expense  Candidate Name	004 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Senate President	ement For: Primary General Other (specify)		ADVERTISING EXPENSE
	State: District:			
В.	Full Name (Last, First, Middle Initial) Upclose Printing			Transaction ID: 61005.E2530 Date of Disbursement
	Mailing Address 714 S. 6th		1 0 M / D 0 3 / Y 2 0 0 6 Y	
	City Champaign	State Zip Code IL 61820-		Amount of Each Disbursement this Period
	Purpose of Disbursement Printing Expense		003	3038.47  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   General     Other (specify)   \(\bigvarpsi		PRINTING EXPENSE
	State: District:			
C.	Full Name (Last, First, Middle Initial) Urquhart Media LLC	Transaction ID: 61023.E2549 Date of Disbursement		
	Mailing Address 118 N Clinton Street, Su	10 M / D 1 B / Y Y Y O O 6 Y		
	City Chicago	State Zip Code IL 60661-		Amount of Each Disbursement this Period
	Purpose of Disbursement Media Expense	004	60000.00	
	Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Senate President	ement For: Primary General Other (specify)		MEDIA EXPENSE
	State: District:  JBTOTAL of Disbursements This Page (optional)			63143.47

_							
SCHEDULE B (FEC Form 3)			Use seperate schedule(s)		E NUMBER: PAGE 18 / 21		
IT	ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page		X   17		
	y Information copied from such Reports and Stater for commercial purposes, other than using the name						
$\setminus$	NAME OF COMMITTEE (In Full)						
$ \rangle$	Friends of Tim Johnson						
Α.	Full Name (Last, First, Middle Initial) Verizon Wireless				Transaction ID: 61205.E2582  Date of Disbursement		
	Mailing Address PO Box 6170				M M / D D / Y 2 0 0 6 Y		
	City Carol Stream	State IL	Zip Code 60197-		Amount of Each Disbursement this Period		
	Purpose of Disbursement Phone Service			001	150.00  Refund or Disposal of Excess		
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburs: Senate President	ement For: Primary Other (spe	General	,	PHONE SERVICE		
	State: District:	] (-	<b>3</b> , <b>∀</b>				
В.	Full Name (Last, First, Middle Initial) Winfrey and Company				Transaction ID: 61005.E2529 Date of Disbursement		
	Mailing Address 228 South Washington Suite B-200	M M / D B / Y Z O O 6 Y					
	City Alexandria	State VA	Zip Code 22314-		Amount of Each Disbursement this Period		
	Purpose of Disbursement Fundraising Expense	003	3424.30  Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General		FUNDRAISING EXPENSE		
	State: District:	oution (ope	yoy) <b>∀</b>				
C.	Full Name (Last, First, Middle Initial)  Xpress Professional Services	Full Name (Last, First, Middle Initial)			Transaction ID: 61005.E2532 Date of Disbursement		
	Mailing Address 220 E Adams Street	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$					
	City Springfield	State IL	Zip Code 62701-		Amount of Each Disbursement this Period		
	Purpose of Disbursement	1000.00					
	Phone Calls  Candidate Name			005 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		PHONE CALLS		
	President State: District:	Other (spe	ecify) 🔻				
s	UBTOTAL of Disbursements This Page (optional)			<b>&gt;</b>	4574.30		

80388.56

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

# SCHEDULE C (FEC Form 3 ) LOANS

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

PAGE 19 / 21
FOR LINE NUMBER: (check only one)

LOANS	Detailed Summary Page (check only one) X 13a	- 1
NAME OF COMMITTEE (In Full)		7
Friends of Tim Johnson	Transaction ID: LS60831.C7050	
LOAN SOURCE Full Name (Last, First, Middle Initial) Busey Bank	Election: Primary General	
Mailing Address 201 W. Main	X Other (specify) ▼ Primary	
City Urbana State IL ZIP Coo	de 61801-	_
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period	
100000.00	70725.12 29274.88	
TERMS  Date Incurred  Date Due	Interest Rate Secured:	
0 1 D D 2 4 D 2 0 0 0 20070521	10.25 % (apr) X Yes No	)
List All Endorsers or Guarantors (if any) to Loan Source		
Full Name (Last, First, Middle Initial) Timothy V. Johnson	Name of Employer	
Mailing Address	Occupation	
413 Berringer Circle	Amount	-
City State ZIP Code Urbana IL 61802-	Guaranteed 29274.88 Outstanding:	
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	
City State ZIP Code	Guaranteed Outstanding:	
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	_
City State ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional)	29274.88	
TOTALS This Period (last page in this line only)		
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Sche	edule D, carry forward to appropraite line of Summary.	$\dashv$

## SCHEDULE C (FEC Form 3 ) LOANS

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

PAGE 20 / 21
FOR LINE NUMBER: (check only one)

LOANS	Detailed Summary Page (check only one) X 13a 13b						
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , , ,						
Friends of Tim Johnson	Transpation ID:   \$60021 07052						
LOAN SOURCE Full Name (Last, First, Middle Initial) Busey Bank  Mailing Address 201 W. Main	Transaction ID: LS60831.C7052  Election: Primary General X Other (specify) ▼						
City Urbana State IL Z	Primary ZIP Code 61801-						
Original Amount of Loan Cumulative Paym							
40000.00	0.00 40000.00						
TERMS  Date Incurred  Date Di  0 3  0 3  2 0 0 0  Date Di  20070521	ue Interest Rate Secured:  10.25 % (apr) X Yes No						
2000	% (apr) X TesNO						
List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Timothy Johnson	Name of Employer						
Mailing Address	Occupation						
413 Berringer Circle	Attorney Amount						
City State ZIP Code Urbana IL 61802-	Guaranteed 40000.00 Outstanding:						
Full Name (Last, First, Middle Initial)	Name of Employer						
Mailing Address	Occupation						
City State ZIP Code	Amount Guaranteed Outstanding:						
Full Name (Last, First, Middle Initial)	Name of Employer						
Mailing Address	Occupation						
City State ZIP Code	Amount Guaranteed Outstanding:						
Full Name (Last, First, Middle Initial)	Name of Employer						
Mailing Address	Occupation						
City State ZIP Code	Amount Guaranteed Outstanding:						
SUBTOTALS This Period This Page (optional)	40000.00						
TOTALS This Period (last page in this line only)	60074.99						
Carry outstanding halance only to LINE 3. Schedule D. for this line. If r	no Schedule D. carry forward to appropriate line of Summary						

SCHEDULE D (FEC Form 3 )			/Llc	e separate	PAGE 21 / 21		
				hedule(s)	FOR LINE NUMBER:		
	DEBTS AND OBLIGATIONS			or each bered line)	(check only one)	9	
	Cluding Loans  AME OF COMMITTEE (In Full)		110111	100100 11110)		X 10	
	riends of Tim Johnson						
	A. Full Name (Last, First, Middle Initial) of Debtor or Busey Bank	Creditor			ebt (Purpose): ed Interest		
	Mailing Address 201 W. Main			_			
	City State Urbana IL	ZIP Code 61801-					
	Outstanding Balance Beginning This Period			Trai	nsaction ID: LS61025.	E2564	
	196.87						
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period				
	350.17	0.00	)		5	47.04	
	SUPTOTALS. This Paried This Page (entional)			•	547.0	4	
	SUBTOTALS This Period This Page (optional)		·		547.0		
	2) TOTALS This Period (last page this line number only)				J-1.0	-	
3)	) TOTALS OUTSTANDING LOANS from Schedule C (last page only)						

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)