REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2000 JUL 16 A 8:30

1. NAME OF COMMITTEE (in full)

Friends of Ray LaHood

ADDRESS (number and street) ☐ Check if different than previously reported.

3311 North Sterling, Suite 10

CITY, STATE and ZIP CODE — STATE/DISTRICT

Peoria, IL 61604

2. FEC IDENTIFICATION NUMBER

C00284901

3. IS THIS REPORT AN AMENDMENT?

☐ YES ☒ NO

4. TYPE OF REPORT

☐ April 15 Quarterly Report
☒ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid-Year Report (Non-election Year Only)
☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
☐ Thirtieth day report following the General Election on _____ in the State of _____
☐ Termination Report

This report contains activity for ☐ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-date
5.	Covering Period 04/01/2000 through 06/30/2000		
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	237,783.62	237,783.62
	(b) Total Contribution Refunds (From Line 20(d))	2,000.00	2,000.00
	(c) Net Contributions (other than loans)(subtract Line 6(b) from 6(a))	235,783.62	235,783.62
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	76,469.51	76,469.51
	(b) Total Offsets to Operating Expenditures (from Line 14)		
	(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	76,469.51	76,469.51
8.	Cash on Hand at Close of Reporting Period (from Line 27)	421,787.30	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	26,775.12	

For further information:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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

Type or Print Name of Treasurer
Ken K. Linder

Signature of Treasurer
Ken K. Linder

Date
7/10/00

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

FEC FORM 3
(Revised 4/97)

Detailed Summary Page
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full)	Report Covering the Period:	
Friends of Ray LaHood	From: 04/01/2000	To: 06/30/2000

I. RECEIPTS	Column A Total This Period	Column B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A)	155,875.00	
(ii) Unitemized	40,145.41	
(iii)Total of contributions from Individual	196,020.41	196,020.41
(b) Political Party Committees	263.21	263.21
(c) Other Political Committees (such as PACs)	41,500.00	41,500.00
(d) The Candidate		
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	237,783.62	237,783.62
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
(b) All Other Loans		
(c) TOTAL LOANS (add 13(a) and (b))		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
15. OTHER RECEIPTS (Dividends, Interest, etc.)	1,697.82	1,697.82
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	239,481.44	239,481.44
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	76,469.51	76,469.51
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
(b) Of All Other Loans	2,769.84	2,769.84
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	2,769.84	2,769.84
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	2,000.00	2,000.00
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	2,000.00	2,000.00
21. OTHER DISBURSEMENTS	8,660.63	8,660.63
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	89,899.98	89,899.98

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	272,205.84
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	239,481.44
25. SUBTOTAL (add Line 23 and Line 24)	511,687.28
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 16)	89,899.98
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	421,787.30

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Jeries Abou-Hanna 4625 California Avenue Peoria, IL 61614-	Bradley University Professor	05/31/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	
B. Bruce Alkire 234 W Windflower Way Dunlap, IL 61525-9424	NE Finch Company Contractor	05/04/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
C. Patricia Alkire 234 W Windflower Way Dunlap, IL 61525-9424	Coldwell Banker REALTOR	05/04/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
D. Charles Allen 616 Second Street 220 Fifth Street Lacon, IL 61540-	Allen Lumber Co PARTNER	05/17/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
E. Henry Altorfer 2510 Hidden Lake Court Peoria, IL 61614-	Retired Occupation	04/06/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	
F. Joseph Alwan 606 Greenway Place Peoria, IL 61614-	Alwan Bros Co Owner	05/17/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
G. Henry Ames 5904 W Teal Wood Court Peoria, IL 61615-2226	Caterpillar attorney	05/22/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	3,450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Helen Appleton 1629 Wiggins Springfield, IL 62704-	Springfield Psychological Cent	04/18/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Clinical psychologist	Aggregate Year-to-Date -> 250.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eldon Arnold 1207 Audubon Drive Pekin, IL 61554-	Cefcu	05/25/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: CEO	Aggregate Year-to-Date -> 500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rennie Atterbury 315 W Crestwood Drive Peoria, IL 61614-	Caterpillar Inc	04/04/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: attorney	Aggregate Year-to-Date -> 500.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
B F Backlund 10225 N Knoxville Avenue Peoria, IL 61615-1355	The Better Banks	04/11/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Board Chairman	Aggregate Year-to-Date -> 1,000.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Bagley PO Box 669 Pekin, IL 61555-	Bagley & Miller	05/03/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: attorney	Aggregate Year-to-Date -> 200.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ali Sahaj 12701 N Georgetowne Road Dunlap, IL 61525-	Caterpillar	05/12/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Manager	Aggregate Year-to-Date -> 500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven Baldi 212 N Davenport Metamora, IL 61548-	Self	05/01/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Dentist	Aggregate Year-to-Date -> 100.00	

SUBTOTAL of Receipts This Page (optional)	3,050.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven Baldi 212 N Davenport Metamora, IL 61548-	Self Occupation: Dentist	06/14/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	350.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Baldwin 5740 N University Street Peoria, IL 61614-	Retired Occupation:	04/04/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sidney Banwart 12918 N Georgetowne Road Dunlap, IL 61525-	Caterpillar Occupation: Vice President	05/22/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bradley Barkley 2815 W Windpointe Drive Peoria, IL 61614-	Party Time Ice Occupation: OWNER	06/16/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Brian Barkley 1016 W Scottwood Drive Peoria, IL 61615-	Party Time Ice Occupation: President	06/29/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Barr 9104 Picture Ridge Road Peoria, IL 61615-	River City Construction Co Occupation: PRESIDENT	05/12/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roberta Barth 824 W Fifth Street Minonk, IL 61760-	Homemaker Occupation:	06/16/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	3,750.00
TOTAL This Period (last page this line number only)	

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code Glon Barton 242 W Detweiller Drive Peoria, IL 61615-	**Name of Employer** Caterpillar Inc	**Date (month, day, year)** 05/03/2000	**Amount of Each Receipt this Period** 1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	**Occupation** Group President	**Aggregate Year-to-Date ->**	1,000.00
B. Full Name, Mailing Address and Zip Code Joseph Basso 10621 N Dana Drive Peoria, IL 61615-	**Name of Employer** Mid-State Terrazzo	**Date (month, day, year)** 06/16/2000	**Amount of Each Receipt this Period** 250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	**Occupation** Manager	**Aggregate Year-to-Date ->**	250.00
C. Full Name, Mailing Address and Zip Code Wayne Baum 4970 N Grandview Drive Peoria Heights, IL 61614-	**Name of Employer** Combined const Group	**Date (month, day, year)** 05/11/2000	**Amount of Each Receipt this Period** 500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	**Occupation** Contractor	**Aggregate Year-to-Date ->**	500.00
D. Full Name, Mailing Address and Zip Code Amy Bearce 227 W 6th Street Springfield, IL 62701-	**Name of Employer** Federal Defenders office	**Date (month, day, year)** 05/25/2000	**Amount of Each Receipt this Period** 1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	**Occupation** Administrative Assistant	**Aggregate Year-to-Date ->**	1,000.00
E. Full Name, Mailing Address and Zip Code Jodi Bearce 1225 N Northcrest Peoria, IL 61614-	**Name of Employer** Progressive Management	**Date (month, day, year)** 05/19/2000	**Amount of Each Receipt this Period** 1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	**Occupation** CONSULTANT	**Aggregate Year-to-Date ->**	1,000.00
F. Full Name, Mailing Address and Zip Code John Bearce 12 Chrisendale Lane Washington, IL 61571-	**Name of Employer**	**Date (month, day, year)** 05/19/2000	**Amount of Each Receipt this Period** 1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	**Occupation** Retired	**Aggregate Year-to-Date ->**	1,000.00
G. Full Name, Mailing Address and Zip Code Nancy Bearce 12 Chrisendale Lane Washington, IL 61571-	**Name of Employer**	**Date (month, day, year)** 05/25/2000	**Amount of Each Receipt this Period** 1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	**Occupation** homemaker	**Aggregate Year-to-Date ->**	1,000.00

SUBTOTAL of Receipts This Page (optional)	5,750.00
TOTAL This Period (last page this line number only)	

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
F Louis Behrends 3014 N Bigelow Street Peoria,IL 61604-1664	Behrends & Gentry Occupation attorney	04/09/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jane Benjamin 6805 N Vendor Schaaf Drive Peoria,IL 61614-2260	Retired Occupation	04/15/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Benson 1013 Hillcrest Drive Washington,IL 61571-	Caterpillar Inc Occupation Executive	05/22/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Besing 1919 W Riviera Drive Peoria,IL 61614-	 Occupation homemaker	04/15/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Bielfeldt 4407 Grandview Drive Peoria Heights,IL 61614-	Bielfeldt & Co Occupation Partner	05/25/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Blossom 125 SW Jefferson Avenue Peoria,IL 61602-	Small Parker and Blossom Occupation PRESIDENT	05/04/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Blume 111 Cliffwood Court East Peoria,IL 61611-2101	Blume Construction Co Occupation Building contractor	05/01/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

SUBTOTAL of Receipts This Page (optional)	2,600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joyce Bourazak 133 Lasalle Drive East Peoria, IL 61611-	Eagle Cleaners Occupation: OWNER	05/23/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel Brady PO Box 2400 104 W Front Street Bloomington, IL 61702-2400	McClean County Occupation: Coroner	05/22/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sue Brady 11900 Hickory Grove Road Dunlap, IL 61525-	Occupation: Housewife	04/28/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Bramlet 2216 Greenside Drive Springfield, IL 62704-	Marine Bank Occupation: Vice President	04/15/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Brauer 40 Apple Lane Petersburg, IL 62675-	Oasis Farms Occupation: Owner	06/11/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kevin Breheny 847 James Way Forsyth, IL 62535-	J L Hubbard Ins & Bonds Occupation: PRESIDENT	04/09/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Grant Brewen 705 W Versailles Drive Peoria, IL 61614-	Biotechnology Research & Dev Occupation: PRESIDENT	05/08/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	3,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code Robert Brown 702 Stratford Washington,IL 61571- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Black, Black & Brown **Occupation** attorney **Aggregate Year-to-Date ->** 500.00	**Date (month, day, year)** 05/22/2000	**Amount of Each Receipt this Period** 500.00
B. Full Name, Mailing Address and Zip Code Mary Bruns 778 Prairie Street Lincoln,IL 62656- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Logan County **Occupation** County Treasurer **Aggregate Year-to-Date ->** 250.00	**Date (month, day, year)** 04/15/2000	**Amount of Each Receipt this Period** 250.00
C. Full Name, Mailing Address and Zip Code Michael Bruns 12425 W Downing Place Brimfield,IL 61517- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Zinser & Bruns **Occupation** Chiropractor **Aggregate Year-to-Date ->** 250.00	**Date (month, day, year)** 05/22/2000	**Amount of Each Receipt this Period** 250.00
D. Full Name, Mailing Address and Zip Code James Bryant 5917 N Sherwood Avenue Peoria,IL 61604- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Bjb Enterprises **Occupation** OWNER **Aggregate Year-to-Date ->** 1,000.00	**Date (month, day, year)** 05/04/2000	**Amount of Each Receipt this Period** 1,000.00
E. Full Name, Mailing Address and Zip Code Michael Buescher 11116 N Brookhaven Court Peoria,IL 61615- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Self **Occupation** Chiropractor. **Aggregate Year-to-Date ->** 1,000.00	**Date (month, day, year)** 05/17/2000	**Amount of Each Receipt this Period** 1,000.00
F. Full Name, Mailing Address and Zip Code Craig Burkhardt 1635 Ruth Place Springfield,IL 62704-3361 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Sorling Northrup Hanna Cullen **Occupation** attorney **Aggregate Year-to-Date ->** 250.00	**Date (month, day, year)** 04/13/2000	**Amount of Each Receipt this Period** 250.00
G. Full Name, Mailing Address and Zip Code Dale Burklund 4601 N Grandview Drive Peoria Heights,IL 61614-5417 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Burklund Distributors Inc **Occupation** Executive **Aggregate Year-to-Date ->** 1,000.00	**Date (month, day, year)** 04/06/2000	**Amount of Each Receipt this Period** 1,000.00

SUBTOTAL of Receipts This Page (optional)	4,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Curt Burwell 328 N Logan Lincoln,IL 62656-	Burwell Oil Services Occupation: attorney	06/16/2000 Aggregate Year-to-Date -> 500.00	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)			

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eric Burwell PO Box 430 Lincoln,IL 62656-	Burwell Oil Services Occupation: Vice President	06/02/2000 Aggregate Year-to-Date -> 250.00	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)			

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank Bussone 53 Hyde Park Drive Morton,IL 61550-9534	Proctor Foundation Occupation: Administrator	04/09/2000 Aggregate Year-to-Date -> 100.00	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)			

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank Bussone 53 Hyde Park Drive Morton,IL 61550-9534	Proctor Foundation Occupation: Administrator	05/18/2000 Aggregate Year-to-Date -> 1,000.00	900.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)			

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nicholas Cagnoni 3130 Chatham Road Springfield,IL 62704-	Frank Mason Real Estate Occupation: Owner	05/03/2000 Aggregate Year-to-Date -> 250.00	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)			

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bernard Cahill 812 W Chalon Place Peoria,IL 61614-4248	Self Occupation: Physician	04/04/2000 Aggregate Year-to-Date -> 250.00	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)			

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Henry Cakora 203 Indian Creek Drive Pekin,IL 61554-	Retired Occupation:	05/03/2000 Aggregate Year-to-Date -> 300.00	300.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)			

SUBTOTAL of Receipts This Page (optional)	2,550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Allan Campbell 8307 Bramberry Lane Peoria, IL 61615-2108 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Peoria/Tazewell Pathology Physician Aggregate Year-to-Date -> 1,000.00	04/04/2000	1,000.00
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Frederick Campbell 401 W First North Street Wenona, IL 61377- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	State Of Illinois TA-3 Aggregate Year-to-Date -> 100.00	04/04/2000	100.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Frederick Campbell 401 W First North Street Wenona, IL 61377- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	State Of Illinois TA-3 Aggregate Year-to-Date -> 300.00	05/25/2000	200.00
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Gordon Campbell 6323 N Jamestown Road Peoria, IL 61615-2603 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	PRA Physician Aggregate Year-to-Date -> 1,000.00	04/04/2000	1,000.00
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Donald Casper 1818 Cherry Road Springfield, IL 62704- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Casper Insurance President Aggregate Year-to-Date -> 200.00	04/06/2000	200.00
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Roger Chandler 2304 Redlands Springfield, IL 62707- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Marine Bank PRESIDENT Aggregate Year-to-Date -> 250.00	04/18/2000	250.00
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Grady Chronister 2026 Republic Springfield, IL 62702- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Chemister Oil Company OWNER Aggregate Year-to-Date -> 100.00	04/05/2000	100.00

SUBTOTAL of Receipts This Page (optional)	2,850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Grady Chronister 2026 Republic Springfield,IL 62702-	Chemister Oil Company	04/20/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: OWNER	Aggregate Year-to-Date ->	350.00

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen Cicciarelli 11333 N Antler Place Peoria,IL 61615-	Pipco	06/16/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Executive VP	Aggregate Year-to-Date ->	250.00

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Clarke 1775 W Lawrence Springfield,IL 62704-2323	Memorial Health Systems	04/13/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: PRESIDENT	Aggregate Year-to-Date ->	250.00

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elizabeth Cleaver 3922 N Harvard Avenue Peoria,IL 61614-7943	Retired	04/06/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation:	Aggregate Year-to-Date ->	200.00

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jerome Climer 10717 Timberidge Road Fairfax Station,VA 22039-	Congressional Institute	04/14/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Executive	Aggregate Year-to-Date ->	200.00

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Warren Collins 4935 Grandview Drive Peoria,IL 61614-	Connor Co	04/04/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Executive	Aggregate Year-to-Date ->	500.00

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Connor 2820 W Willow Ridge Circle Peoria,IL 61614-	D E Connor & Associates	06/08/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: PRESIDENT	Aggregate Year-to-Date ->	250.00

SUBTOTAL of Receipts This Page (optional)	1,900.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Curt Conrad 1620 W Lawrence Springfield,IL 62704-	State of Illinois Dept. Natural Res.	04/18/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Marketing		
	Aggregate Year-to-Date ->	250.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ralph Converse 5038 N Prospect Peoria,IL 61614-	Cullinan Properties	05/17/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation PRESIDENT		
	Aggregate Year-to-Date ->	1,000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christopher Coulter 5106 N Sunnyside Court Peoria,IL 61614-	Peoria Disposal Co	06/16/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Marketing Director		
	Aggregate Year-to-Date ->	250.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peter Couri 1318 Queenscourt Road Peoria,IL 61614-1702	Self	06/16/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Dentist		
	Aggregate Year-to-Date ->	250.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Katherine Coyle 10511 N Sunrise Court Dunlap,IL 61525-	Self	06/14/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation The Perfect pen		
	Aggregate Year-to-Date ->	250.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douglas Crew 900 W Bridgetown Court Dunlap,IL 61525-	Caterpillar Inc	05/18/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Government Affairs		
	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Cullinan 324 Valley View Court Peoria,IL 61615-1371	R A Cullinan & Sons	05/18/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation PRESIDENT		
	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	3,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Stephen Cullinan 308 E Morningside Drive Peoria, IL 61614 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Oncology-hematology Associates / Physician Aggregate Year-to-Date -> 1,000.00	05/18/2000	1,000.00
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Theresa Cullinan 308 E Morningside Peoria, IL 61614- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self / Physician Aggregate Year-to-Date -> 1,000.00	05/18/2000	1,000.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
David Dace 93 Locust Ridge Court Morton, IL 61550-1117 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Caterpillar Inc / System Analyst Aggregate Year-to-Date -> 500.00	04/04/2000	500.00
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Dargutas 505 Hamilton Wood Homewood, IL 60430- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Enviro Power / Engineer Aggregate Year-to-Date -> 250.00	04/15/2000	250.00
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
William Davis 4625 N Thornhill Drive Peoria, IL 61615-8941 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired / Occupation Aggregate Year-to-Date -> 200.00	04/09/2000	200.00
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mary Ellen Debord 207 E Hanover Place Peoria, IL 61614- Receipt For: [ ] Primary [X] General [ ] Other (specify)	/ homemaker Aggregate Year-to-Date -> 500.00	05/22/2000	500.00
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Brian Dennison 109 Harrington Place Morton, IL 61550- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Dennison Chevrolet / Truck Manager Aggregate Year-to-Date -> 250.00	06/21/2000	250.00

SUBTOTAL of Receipts This Page (optional)	3,700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code Ray Dennison 18 Blackberry Lane Morton, IL 61550-9526 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Dennison Chevrolet Occupation OWNER Aggregate Year-to-Date -> 250.00	Date (month, day, year) 04/19/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code James Despain 11323 N Pawnee Road Peoria, IL 61615- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Caterpillar Inc Occupation Vice President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 04/05/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code James Despain 11323 N Pawnee Road Peoria, IL 61615- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Caterpillar Inc Occupation Vice President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 05/22/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Tom Dickes PO Box 828 Decatur, IL 62525-0828 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Christy-Foltz Occupation Executive Aggregate Year-to-Date -> 250.00	Date (month, day, year) 04/04/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Jean Dole 10205 N Forest Drive Peoria, IL 61615- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 06/15/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Peter Donis 7610 N Edgewild Drive Peoria, IL 61614-2118 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Aggregate Year-to-Date -> 250.00	Date (month, day, year) 04/09/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Stephen Doueihi 8070 Harbor View Terrace Brooklyn, NY 11209- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Catholic Church Occupation Bishop Aggregate Year-to-Date -> 300.00	Date (month, day, year) 04/09/2000	Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional)	2,300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Dunk 961 Fairway Circle LBS Lake Barrington, IL 60010-1520	Retired	04/06/2000	300.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation	Aggregate Year-to-Date -> 300.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Egizii 1645 E Laurel Street Springfield, IL 62704-	Egizii Electric	05/16/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation OWNER	Aggregate Year-to-Date -> 250.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Egley 5900 N Smith Road Edwards, IL 61528-9711	Methodist Medical Center	05/02/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Physician	Aggregate Year-to-Date -> 200.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Ehrich 1400 N 4th Street Pekin, IL 61554-2030	Self	04/06/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Dentist	Aggregate Year-to-Date -> 250.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Timothy Elder 918 W Bridgetowne Court Dunlap, IL 61525-	Caterpillar	05/22/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Corporate Labor Relations	Aggregate Year-to-Date -> 250.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MaryAlice Erickson 6707 N Greenmont Road Peoria, IL 61614-2411	Retired	05/19/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation	Aggregate Year-to-Date -> 1,000.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dean Essig 601 S Elm Street Washington, IL 61571-	Self	05/19/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation attorney	Aggregate Year-to-Date -> 500.00	

SUBTOTAL of Receipts This Page (optional)	2,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
James Ewing PO Box 551 311 S Randolph Street Macomb,IL 61455-0551 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired Aggregate Year-to-Date -> 250.00	04/13/2000	250.00
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Paul Fager 3913 N Saymore Lane Peoria,IL 61615- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Cefcu VP Aggregate Year-to-Date -> 200.00	04/09/2000	200.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Paul Fager 3913 N Saymore Lane Peoria,IL 61615- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Cefcu VP Aggregate Year-to-Date -> 225.00	06/16/2000	25.00
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Nijad Fares PO Box 130688 Houston,TX 77219- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Link Group CEO Aggregate Year-to-Date -> 1,000.00	04/17/2000	1,000.00
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Zeina Fares PO Box 130688 Houston,TX 77219- Receipt For: [ ] Primary [X] General [ ] Other (specify)	homemaker Aggregate Year-to-Date -> 1,000.00	04/17/2000	1,000.00
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Marguerite Farnum 3911 N Bigelow Peoria,IL 61614-7322 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Homemaker Aggregate Year-to-Date -> 250.00	06/16/2000	250.00
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Sally Fassino 1125 East Myrtle Street Canton,IL 61520- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Bradley University Professor Aggregate Year-to-Date -> 250.00	06/16/2000	250.00

SUBTOTAL of Receipts This Page (optional)	2,975.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Ellen Foster One N Brockway Drive Peoria Heights, IL 61614- Receipt For: [ ] Primary [X] General [ ] Other (specify)	homemaker Aggregate Year-to-Date -> 1,000.00	04/09/2000	1,000.00
B. William Frederick 519 E High Point Road Peoria, IL 61614-2238 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Frederick Leasing OWNER Aggregate Year-to-Date -> 500.00	05/18/2000	500.00
C. Zangwill Freed 3409 N Bigelow Street Peoria, IL 61604-1633 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired Aggregate Year-to-Date -> 500.00	05/08/2000	500.00
D. William Froelich Box 100 Gridley, IL 61744- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Funeral director Aggregate Year-to-Date -> 250.00	06/30/2000	250.00
E. Thomas Gales 100 NE Adams Street Peoria, IL 61629- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Caterpillar Vice President Aggregate Year-to-Date -> 500.00	05/19/2000	500.00
F. Anthony Gaudio RR 5 Box 11 Jacksonville, IL 62650- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Gaudio & Sons Manager Aggregate Year-to-Date -> 250.00	06/16/2000	250.00
G. Janice Gerstner 142 W Detweiller Drive Peoria, IL 61615- Receipt For: [ ] Primary [X] General [ ] Other (specify)	District 150 School District Teacher Aggregate Year-to-Date -> 1,000.00	05/15/2000	1,000.00

SUBTOTAL of Receipts This Page (optional)	4,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code Henry Getz 309 W Birchwood Morton,IL 61550- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Morton Bldgs Occupation PRESIDENT Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 05/22/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Eleanor Ghelandini 1606 N Fifth Street Pekin,IL 61554- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Retired Occupation Aggregate Year-to-Date -> 250.00	Date (month, day, year) 04/09/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code John Gilligan 634 Northern Oaks Drive Groveland,IL 61535- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Fayette Co Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 04/13/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Christopher Glynn 303 E Idlewood Morton,IL 61550- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Caterpillar Occupation Human Resources Aggregate Year-to-Date -> 500.00	Date (month, day, year) 05/22/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Harry Goldstein 4444 N Knoxville Avenue #504 Peoria,IL 61614-6080 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 04/26/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Lee Graves 211 W Northgate Peoria,IL 61614- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer ELM Occupation attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 05/22/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Donald Gronewold 1006 Kingsbury Road Washington,IL 61571-1209 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Don's Pharmacy Occupation Pharmacist Aggregate Year-to-Date -> 50.00	Date (month, day, year) 04/04/2000	Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)	4,050.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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 Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald Gronewold 1006 Kingsbury Road Washington,IL 61571-1209	Don's Pharmacy Occupation: Pharmacist	05/19/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	550.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Grube 3731 N Oak Park Drive Peoria,IL 61614-	Hawk Agency Inc Occupation: PRESIDENT	05/16/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harry Hall RR 3 Box 127 Bloomington,IL 61704-9583	Idot Occupation: Distric 6 Liaison	05/22/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vicki Harrington 4 Cherry Hills Drive Pekin,IL 61554-	Occupation: homemaker	05/15/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Craig Hart RR 2 Hudson,IL 61748-	Heritage Enterprises Occupation: Director	06/30/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Hausman 3000 West Iles Springfield,IL 62704-	The Gold Center Occupation: PRESIDENT	04/18/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Hausman 709 S Indiana Tuscola,IL 61953-	Retired Occupation:	04/18/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	4,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code Miriam Hawk 310 W Oakridge Avenue Peoria, IL 61604- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation homemaker Aggregate Year-to-Date -> 300.00	Date (month, day, year) 04/18/2000	Amount of Each Receipt this Period 300.00
B. Full Name, Mailing Address and Zip Code James Heinz Box 85 432 Pleasant View Circle Dahinda, IL 61428- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Aggregate Year-to-Date -> 300.00	Date (month, day, year) 05/01/2000	Amount of Each Receipt this Period 300.00
C. Full Name, Mailing Address and Zip Code Andrew Herrera 801 W Scottwood Drive Peoria, IL 61615- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Mid America Bank Occupation Banker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 06/16/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Rowland Hoffman 310 Sycamore Street Morton, IL 61550-1041 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 04/24/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Rowland Hoffman 310 Sycamore Street Morton, IL 61550-1041 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 05/22/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Henry Holling 701 East High Point Terrace Peoria, IL 61614-3136 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Caterpillar Occupation Public Affairs Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 04/26/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Jean Ann Honegger 930 E Polk Street Morton, IL 61550- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Morton Community Bank Occupation Senior VP Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 05/03/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	3,850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code Carol Horn 7420 N Edgewild Drive Peoria, IL 61614-2116 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** **Occupation** homemaker **Aggregate Year-to-Date ->** 500.00	**Date (month, day, year)** 05/24/2000	**Amount of Each Receipt this Period** 500.00
B. Full Name, Mailing Address and Zip Code Kirsten Howe 739 N Allegheny Road Grayslake, IL 60030 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Self **Occupation** attorney **Aggregate Year-to-Date ->** 250.00	**Date (month, day, year)** 04/18/2000	**Amount of Each Receipt this Period** 250.00
C. Full Name, Mailing Address and Zip Code Marvin Bult 6117 N Grandview Drive Peoria, IL 61614- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Retired **Occupation** **Aggregate Year-to-Date ->** 250.00	**Date (month, day, year)** 04/13/2000	**Amount of Each Receipt this Period** 250.00
D. Full Name, Mailing Address and Zip Code Kenneth Imming 1713 W Kingsway Drive Peoria, IL 61614- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Advanced Cad/Cam **Occupation** OWNER **Aggregate Year-to-Date ->** 250.00	**Date (month, day, year)** 06/16/2000	**Amount of Each Receipt this Period** 250.00
E. Full Name, Mailing Address and Zip Code Jeanine Jacob 10727 N Dana Drive Peoria, IL 61615- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** **Occupation** homemaker **Aggregate Year-to-Date ->** 500.00	**Date (month, day, year)** 05/19/2000	**Amount of Each Receipt this Period** 500.00
F. Full Name, Mailing Address and Zip Code Jeanine Jacob 10727 N Dana Drive Peoria, IL 61615- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** **Occupation** homemaker **Aggregate Year-to-Date ->** 1,000.00	**Date (month, day, year)** 06/16/2000	**Amount of Each Receipt this Period** 500.00
G. Full Name, Mailing Address and Zip Code Margaret Jacob 10917 N Trigger Road Dunlap, IL 61525- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Brewers Distributing Co **Occupation** Public Arrangements **Aggregate Year-to-Date ->** 1,000.00	**Date (month, day, year)** 05/19/2000	**Amount of Each Receipt this Period** 1,000.00

SUBTOTAL of Receipts This Page (optional)	3,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Jacob 2141 N Aspen Road Peoria, IL 61604-3705	Brewers Distributing Co Occupation Warehouse Manager	06/16/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Jakowsky 1420 Woods Farm Lane Springfield, IL 62704-6431	Anderson Electric Occupation Contractor	05/18/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Jeckel 600 N Sherman Delavan, IL 61734-	Jeckel Pork Farm Occupation OWNER	05/08/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tom Jefferson 8 Northcrest Court Bloomington, IL 61701-3405	Heritage Enterprises Occupation Director	06/30/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Annie Jobe 128 Whitehall Court Peoria, IL 61614-	St Francis Med Center Occupation Office Manager	05/15/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Johann 460 Rosewood Drive Canton, IL 61520-	Norwest Bank of Canton Occupation PRESIDENT	06/30/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Keith Johnson 2530 W Hidden Lake Court Peoria, IL 61614-	Retired Occupation	04/06/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

SUBTOTAL of Receipts This Page (optional)	2,450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Norman Johnson 7406 N Edgewild Drive Peoria, IL 61614-2116 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Pekin Internal Medicine Physician Aggregate Year-to-Date -> 1,000.00	05/22/2000	1,000.00
B. Paula Johnson 1104 W Scottwood Drive Peoria, IL 61615- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Best efforts Teacher Aggregate Year-to-Date -> 200.00	06/16/2000	200.00
C. Reginald Jokisch 422 E Illini Street Virginia, IL 62691-1244 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Retired Occupation Aggregate Year-to-Date -> 250.00	04/09/2000	250.00
D. Ron Jones 510 W Wolf Road Peoria, IL 61614- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Mutual Medical Plans PRESIDENT Aggregate Year-to-Date -> 500.00	05/01/2000	500.00
E. Adnan Kattom 5306 Casterberry Peoria, IL 61615-9316 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Short Stop Conv. Store OWNER Aggregate Year-to-Date -> 250.00	06/16/2000	250.00
F. Jeffrey Kaufman 525 S Main Street Morton, IL 61550- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Kaufman & Sons Contractor Aggregate Year-to-Date -> 500.00	05/17/2000	500.00
G. Jeffrey Kaufman 525 S Main Street Morton, IL 61550- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Kaufman & Sons Contractor Aggregate Year-to-Date -> 1,000.00	05/22/2000	500.00

SUBTOTAL of Receipts This Page (optional)	3,200.00
TOTAL This Period (last page this line number only)	

Congressman
Ray LaHood
Eighteenth District Illinois
3311 N Sterling Suite 10
Peoria IL 61604-1837

June 28, 2000

Ms Paula Johnson
1104 W Scottwood Drive
Peoria IL 61615

Dear Paula,

Thank you for your very generous contribution to Friends of Ray LaHood. Your support is important to Ray's campaign.

Federal Election Commission law requires us to obtain information on employment from our contributors and since you signed the check you are the contributor. We need to know the name of your employer - District 150 or whatever school district it may be. A return form and envelope are enclosed.

Once again thank you for your help.

Sincerely,

Lois Coppernoll
Finance Director

Enc.

EMPLOYER OCCUPATION FORM

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

EMPLOYER: _____

OCCUPATION: _____

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code Joseph Kelly 406 W Stratford Drive Peoria,IL 61614-7248 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Smith Barney Et Al Occupation Financial Consultant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 04/19/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Joseph Kelly 406 W Stratford Drive Peoria,IL 61614-7248 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Smith Barney Et Al Occupation Financial Consultant Aggregate Year-to-Date -> 750.00	Date (month, day, year) 05/19/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Gloria Kelso 13205 State Route 125 Pleasant Plains,IL 62677- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Recreational River Concepts Occupation Dinner Boat Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 04/11/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code William Kelso 13205 State Route 125 Pleasant Plains,IL 62677-3538 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Recreational River Concepts Occupation Dinner Boat Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 04/11/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code William Kies 939 W Madison #405 Chicago,IL 60607- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Kies Consulting,LLC Occupation CONSULTANT Aggregate Year-to-Date -> 250.00	Date (month, day, year) 04/12/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Scott Klaus 212 E Hanover Place Peoria,IL 61614- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Klaus Radio Occupation Vice President Aggregate Year-to-Date -> 250.00	Date (month, day, year) 06/12/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Charles Knell 4815 N Grandview Drive Peoria Heights,IL 61614- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Knell-&-Kelly Occupation attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 04/04/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	4,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Terry Knueppel 4990 E Calle Brillante Tucson,AZ 85718-	Dental Arts Laboratory Occupation OWNER	04/09/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alan Koener 2221 N Morton Avenue Morton,IL 61550-	Koener Electric Occupation OWNER	04/20/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alan Koener 2221 N Morton Avenue Morton,IL 61550-	Koener Electric Occupation OWNER	05/08/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Louis Kouri 1283 N Skyview Drive East Peoria,IL 61611-	Retired Occupation	05/12/2000	900.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	900.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tilmon Kreiling 7121 N Willow Bent Pointe Peoria,IL 61614-	Retired Occupation	04/09/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rita Kress P O Box 368 16600 W Brimfield Jubilee Road Brimfield,IL 61517-	Kress Corporation Occupation OWNER	05/04/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward LaHood 1933 W Teton Drive Peoria,IL 61614-	Food Service Equip Occupation OWNER	05/08/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	4,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code Stephen LaHood 50 Mariners Court Centerport,NY 11721-1117 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Henry Schein Inc **Occupation** **Aggregate Year-to-Date ->** 500.00	**Date (month, day, year)** 04/15/2000	**Amount of Each Receipt this Period** 500.00
B. Full Name, Mailing Address and Zip Code Norman Laconte 613 W Cedar Hills Drive Chillicothe,IL 61523- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Proctor Hospital **Occupation** CEO **Aggregate Year-to-Date ->** 250.00	**Date (month, day, year)** 04/04/2000	**Amount of Each Receipt this Period** 250.00
C. Full Name, Mailing Address and Zip Code Roger Lakin 12400 N Cove Court Dunlap,IL 61525- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Phillip Swager **Occupation** CFO **Aggregate Year-to-Date ->** 500.00	**Date (month, day, year)** 05/17/2000	**Amount of Each Receipt this Period** 500.00
D. Full Name, Mailing Address and Zip Code George Lane 122 Greystone Court Dunlap,IL 61525- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Self **Occupation** Physician **Aggregate Year-to-Date ->** 1,000.00	**Date (month, day, year)** 05/01/2000	**Amount of Each Receipt this Period** 1,000.00
E. Full Name, Mailing Address and Zip Code Dennis Larson 3 Forest Green Drive Springfield,IL 62707-8026 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Central Illinois Builders **Occupation** Assoc Executive **Aggregate Year-to-Date ->** 250.00	**Date (month, day, year)** 05/18/2000	**Amount of Each Receipt this Period** 250.00
F. Full Name, Mailing Address and Zip Code Michael Leali 7319 N Edgewild Drive Peoria,IL 61614-1324 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Merrill Lynch **Occupation** Financial Consultant **Aggregate Year-to-Date ->** 300.00	**Date (month, day, year)** 06/20/2000	**Amount of Each Receipt this Period** 300.00
G. Full Name, Mailing Address and Zip Code Kristine Leaton 22 W 350 Glen Valley Drive Glen Ellyn,IL 60137- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Allstate **Occupation** attorney **Aggregate Year-to-Date ->** 200.00	**Date (month, day, year)** 05/30/2000	**Amount of Each Receipt this Period** 200.00

SUBTOTAL of Receipts This Page (optional)	3,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rex Linder 424 W Ravinswood Road Peoria,IL 61615-4300	Heyl Royster Et Al Occupation: attorney	05/16/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Lister 408 W Ravinswood Road Peoria,IL 61615-	Self Occupation: Physician	05/16/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Duane Livingston 220 W Ravinswood Road Peoria,IL 61615-1382	Caterpiller Inc Occupation: VP	04/09/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Lott 106 Southgate Drive Elmwood,IL 61529-	Farmers State Bank Occupation: Board Chairman	05/03/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patricia Luley 906 W Loire Court #4A Peoria,IL 61614-1837	Retired Occupation:	04/11/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Maguire 63 Hillcrest Road Needham,MA 02492-	AAA Entertainmaent Occupation:	06/16/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ben Maibach 5525 Azure Way Sarasota,FL 34242-	Barton Malowki Occupation: Chairman of Board	04/09/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	3,450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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 Ray LaHood

A. Full Name, Mailing Address and Zip Code David Maloof 9925 W Countryside Lane Edwards, IL 61528- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Maloof Real Estate Occupation OWNER Aggregate Year-to-Date -> 300.00	Date (month, day, year) 04/19/2000	Amount of Each Receipt this Period 300.00
B. Full Name, Mailing Address and Zip Code Peter Mangieri 5215 N Royal Place Peoria, IL 61615- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Mangieri Companies Occupation PRESIDENT Aggregate Year-to-Date -> 250.00	Date (month, day, year) 06/20/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Mike Mangold 510 Ridge Lane Eureka, IL 61530- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Mangold Ford Occupation OWNER Aggregate Year-to-Date -> 500.00	Date (month, day, year) 05/23/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code William Marshall 524 E High Point Place Peoria, IL 61614- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer St Francis Hospital Occupation Physician Aggregate Year-to-Date -> 500.00	Date (month, day, year) 05/18/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Donald McElroy 1020 W Bennett Court Dunlap, IL 61525- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Il Heart Institute Occupation Physician Aggregate Year-to-Date -> 500.00	Date (month, day, year) 05/17/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Katharine McMillan 7219 N Charles Way Peoria, IL 61614-2105 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 04/09/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Brian Meginnes 3602 W Chartwell Road Peoria, IL 61614- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Keck Mahin & Cate Occupation attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 06/16/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)	2,800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kelly Nehl 933 W Grand Oak Drive Peoria,IL 61615-	Wee Tee Golf Occupation: Manager	06/08/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Michel 322 8th Street S E Washington,DC 20003-	Hogan & Harston Occupation: CONSULTANT	04/09/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Scott Michel 1000 W Washington #501 Chicago,IL 60607-	Development Specialists Occupation: attorney	04/09/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Miller 2007 W Pioneer Parkway Peoria,IL 61615-	Pioneer Park Mitsubishi Occupation: General Manager	06/16/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pamela Miller 43 Waldheim Road Norton,IL 61550-	Occupation: homemaker	05/31/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sheila Miller 1406 W Queens Court Road Peoria,IL 61614-	Occupation: homemaker	05/16/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Adah Mitchell 12 Melrose Court Jacksonville,IL 62650-2617	Retired Occupation	05/02/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

SUBTOTAL of Receipts This Page (optional)	3,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and Zip Code Deborah Mitchell 319 W Terrace Lane Peoria,IL 61614-7354 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	OSF Saint Francis Occupation Best efforts	04/18/2000	500.00
	Aggregate Year-to-Date ->	500.00	
B. Full Name, Mailing Address and Zip Code Loraine Moehle 1008 Kingsbury Road Washington,IL 61571-1209 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation homemaker	05/16/2000	500.00
	Aggregate Year-to-Date ->	500.00	
C. Full Name, Mailing Address and Zip Code Earl Moldovan 206 Harbor Pointe East Peoria,IL 61611- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Clark Engineers Occupation PRESIDENT	05/12/2000	500.00
	Aggregate Year-to-Date ->	500.00	
D. Full Name, Mailing Address and Zip Code Jim Montelongo 3511 W Saymore Lane Peoria,IL 61615- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Advanced Cad/Cam Occupation PRESIDENT	06/16/2000	250.00
	Aggregate Year-to-Date ->	250.00	
E. Full Name, Mailing Address and Zip Code Ray Montelongo 3511 W Saymore Lane Peoria,IL 61615- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Advanced Cad/Cam Occupation Information Sys. Specialist	06/16/2000	250.00
	Aggregate Year-to-Date ->	250.00	
F. Full Name, Mailing Address and Zip Code James Moore 4405 Longmeadow Court Peoria,IL 61615- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer St Francis Med Center Occupation CEO-Central Illinois	05/12/2000	1,000.00
	Aggregate Year-to-Date ->	1,000.00	
G. Full Name, Mailing Address and Zip Code William Morton 2660 N Morton Avenue Morton,IL 61550- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Morton Industrial Group Occupation Manager	05/10/2000	1,000.00
	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	4,000.00
TOTAL This Period (last page this line number only)	

Congressman
Ray LaHood
Eighteenth District Illinois
3311 N Sterling Suite 10
Peoria IL 61604-1837

June 28, 2000

Ms Deborah Mitchell
319 W Terrace Lane
Peoria IL 61614-7354

Dear Deborah,

Thank you for your very generous contribution to Friends of Ray LaHood. Your support is important to Ray's campaign.

Federal Election Commission law requires us to obtain information on employment from our contributors and since you signed the check you are the contributor. Our records show your employer as OSF St. Francis but we also need to know your occupation there. A return form and envelope are enclosed.

Once again thank you for your help.

Sincerely,

Lois Coppernoll
Finance Director

Enc.

EMPLOYER OCCUPATION FORM

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

EMPLOYER: _____

OCCUPATION: _____

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Muir 522 Wedgewood Terrace Metamora,IL 61548-9062	Husch & Eppenberger	04/06/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: attorney	Aggregate Year-to-Date -> 500.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sharlyn Munns 122 E Hanover Place Peoria,IL 61614-		04/13/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: homemaker	Aggregate Year-to-Date -> 250.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronnie Murphy 6729 N Mt Hawley Road Peoria,IL 61614-	Mid Illinois Insurance	06/20/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: PRESIDENT	Aggregate Year-to-Date -> 250.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Maureen Nelson PO Box 591304 Minneapolis,MN 55458-1304	Self	05/15/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: attorney	Aggregate Year-to-Date -> 1,000.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Garry Niemeyer 5 Sugar Creek Estates Glenarm,IL 62536-6524	Self	04/28/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Farmer	Aggregate Year-to-Date -> 250.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph O'Brien 1601 Ft Jesse Road Normal,IL 61761-	O'Brien Auto Team	04/12/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: PRESIDENT	Aggregate Year-to-Date -> 1,000.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph O'Brien 5416 N Prospect Road Peoria,IL 61614-	O'Brien Steel Service	04/04/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Owner	Aggregate Year-to-Date -> 1,000.00	

SUBTOTAL of Receipts This Page [optional]	4,250.00
TOTAL This Period [last page this line number only]	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William O'Neill 706 SW Commercial Street Peoria, IL 61602-1641	Retired Occupation	04/20/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Diane Oberhelman 5204 N Kickapoo/Edwards Road Edwards, IL 61528-	Cullinan Properties Occupation Real estate broker	04/09/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douglas Oberhelman 514 Red Oak Court Peoria, IL 61615-	Caterpillar Inc Occupation Vice President	05/22/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Olson 112 Tamarisk Drive Springfield, IL 62704-3156	Assoc Beer Dist of Il Occupation Executive Director	04/18/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Owens 11709 N Strathmoore Court Dunlap, IL 61525-	Caterpillar Inc Occupation Group President	04/12/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Parker 123 SW Jefferson Street Box 105 Peoria, IL 61602-	Five Star Vending Occupation PRESIDENT	04/11/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Merrill Parsons 1836 Susan Hope Drive Pekin, IL 61554-6607	Excel Foundry Occupation CEO	04/13/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

SUBTOTAL of Receipts This Page (optional)	3,900.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code Merrill Parsons 1835 Susan Hope Drive Pekin,IL 61554-5507 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Excel Foundry Occupation CEO Aggregate Year-to-Date -> 750.00	Date (month, day, year) 05/16/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code John Pearl 600 E High Point Road Peoria,IL 61614- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Pearl & Assoc Occupation Board Chairman Aggregate Year-to-Date -> 250.00	Date (month, day, year) 06/20/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Alfred Pellegrino 4505 N Knoxville Avenue Peoria,IL 61614- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Foster Gallegher Occupation Vice Chairman Aggregate Year-to-Date -> 500.00	Date (month, day, year) 04/19/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Donald Penn 5418 N Sheridan Road Peoria,IL 61614- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Asthma & Allergy Clinic Occupation Physician Aggregate Year-to-Date -> 500.00	Date (month, day, year) 05/12/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Raymond Perisin 606 W Northcrest Peoria,IL 61614- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Clark Engineers Occupation Division President Aggregate Year-to-Date -> 250.00	Date (month, day, year) 06/16/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Carol Pope 112 Apricot Point Petersburg,IL 62675-9776 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Occupation homemaker Aggregate Year-to-Date -> 100.00	Date (month, day, year) 05/01/2000	Amount of Each Receipt this Period 100.00
G. Full Name, Mailing Address and Zip Code Carol Pope 112 Apricot Point Petersburg,IL 62675-9776 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Occupation homemaker Aggregate Year-to-Date -> 200.00	Date (month, day, year) 06/11/2000	Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)	2,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Pschirrer 120 Hemlock Terrace Canton,IL 61520-1023	Self Occupation Road Contractor	06/15/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Putman 832 Coventry Point Springfield,IL 62702-	Springfield Clinic Occupation Physician	04/13/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Rainson 27 Maple Ridge Drive Morton,IL 61550-1153	Retired Occupation	05/19/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Rainwater 508 Silver Spring Road Springfield,IL 62702-	Ameren Cips Occupation PRESIDENT	05/10/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeffery Randolph 2909 N Bigelow Street Peoria,IL 61604	Randolph & Assoc Occupation Assoc VP	06/08/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Ransburg 509 E High Point Road Peoria,IL 61614-	L R Nelson Co Occupation CHAIRMAN	04/11/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Henry Rapp 200 E Adams Street Morton,IL 61550-	Retired Occupation	05/15/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	3,250.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Amael Rashid 4205 Golfcrest Lane Peoria, IL 61614-6612	Self Occupation: Physician	05/15/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alan Bassi 5956 N Elm Lane Peoria, IL 61614-3517	Caterpillar Inc Occupation: Vice President	05/12/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mike Rea 1025 W Orchard Lane Peoria, IL 61615-	AAA Radio Occupation: Marketing Manager	06/16/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Melvyn Regal 7418 N Edgewild Drive Peoria, IL 61614-2116	Foster Gallagher Occupation: PRESIDENT	05/23/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ron Remmel 726 Coxwood Court Edelstein, IL 61526-	Country Companies Occupation: INSURANCE	06/16/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Remsen 501 Park Avenue Pekin, IL 61554-	Herget Natl Bank Occupation: CEO	06/02/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michele Richey 293 E Hoffman Road Metamora, IL 61548-	Tri-City Machine Products Inc Occupation: Chief Financial Officer	06/16/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	2,950.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. James Rinkenberger 2300 N Morton Avenue Morton,IL 61550-	Morton Welding Officer	04/05/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	
B. Verden Rinkenberger 24109 Cooper Road Morton,IL 61550-9463	Morton Welding Board Chairman	05/11/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
C. Letitia Roberts 303 W Wolf Road Peoria,IL 61614-2157	Retired Occupation	04/05/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
D. Charles Rock 11701 Deerfield Trace Dunlap,IL 61525-	C Rock & Assoc REALTOR	04/06/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	
E. Alfred Rossi PO Box 267 107 Tremont Street Hopedale,IL 61747-	Self Physician	04/15/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
F. Matthew Rossi PO Box 267 Hopedale,IL 61747-	Self Physician	05/01/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
G. Donald Rumsfeld 400 N Michigan Avenue #405 Chicago,IL 60611-	Self Philanthropist	04/20/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	3,450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code Patricia Russo 214 W Lindy Lane Peoria, IL 61614-2102 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Russo Rehab Services **Occupation** LPN **Aggregate Year-to-Date ->** 200.00	**Date (month, day, year)** 04/12/2000	**Amount of Each Receipt this Period** 200.00
B. Full Name, Mailing Address and Zip Code Hazel Rutherford 6900 N Upper Skyline Drive Peoria, IL 61614-2220 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** **Occupation** homemaker **Aggregate Year-to-Date ->** 500.00	**Date (month, day, year)** 05/04/2000	**Amount of Each Receipt this Period** 500.00
C. Full Name, Mailing Address and Zip Code William Rutherford 6900 N Upper Skyline Drive Peoria, IL 61614-2220 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Self **Occupation** attorney **Aggregate Year-to-Date ->** 500.00	**Date (month, day, year)** 05/04/2000	**Amount of Each Receipt this Period** 500.00
D. Full Name, Mailing Address and Zip Code John Ryan 424 N 4th Street Springfield, IL 62702- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Self **Occupation** CONSULTANT **Aggregate Year-to-Date ->** 250.00	**Date (month, day, year)** 06/20/2000	**Amount of Each Receipt this Period** 250.00
E. Full Name, Mailing Address and Zip Code John Sahn 1608 W Parkside Drive Peoria, IL 61606- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Cilcorp **Occupation** attorney **Aggregate Year-to-Date ->** 500.00	**Date (month, day, year)** 05/12/2000	**Amount of Each Receipt this Period** 500.00
F. Full Name, Mailing Address and Zip Code Tim Sauer 1338 Audubon Drive Pekin, IL 61554 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Velde Ford **Occupation** Dealer **Aggregate Year-to-Date ->** 200.00	**Date (month, day, year)** 04/11/2000	**Amount of Each Receipt this Period** 200.00
G. Full Name, Mailing Address and Zip Code George Schaefer 8521 N Trigger Road Edwards, IL 61528-9742 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Retired **Occupation** **Aggregate Year-to-Date ->** 250.00	**Date (month, day, year)** 04/09/2000	**Amount of Each Receipt this Period** 250.00

SUBTOTAL of Receipts This Page (optional)	2,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code Carol Schmidtgall 441 S Montana Morton,IL 61550-2731 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 04/26/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Mark Scott 5519 Cedarwilde Court Peoria,IL 61615- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Sprint Cellular Occupation Account Executive Aggregate Year-to-Date -> 250.00	Date (month, day, year) 06/16/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Mark Selvaggio 3021 Newport Road Springfield,IL 62702- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Selvaggio Steel Occupation Engineer Aggregate Year-to-Date -> 250.00	Date (month, day, year) 04/18/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Timothy Shea 5504 N Cedarwilde Court Peoria,IL 61615- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Remax Property Mgmt Occupation Aggregate Year-to-Date -> 250.00	Date (month, day, year) 04/09/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Eugene Siebenthal RR 1 Box 43 Wyoming,IL 61491- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Farmer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 05/12/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Maurice Sims 4 Nob Hill Jacksonville,IL 62650- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Aggregate Year-to-Date -> 300.00	Date (month, day, year) 06/20/2000	Amount of Each Receipt this Period 300.00
G. Full Name, Mailing Address and Zip Code Craig Sinclair 12000 Hickory Grove Road Dunlap,IL 61525- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Tinthoff & Sinclair Occupation Orthodontist Aggregate Year-to-Date -> 250.00	Date (month, day, year) 04/04/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)	2,800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wayne Slone 308 Southgate Drive Elmwood, IL 61529-9539	Retired	04/05/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation	Aggregate Year-to-Date ->	100.00

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wayne Slone 308 Southgate Drive Elmwood, IL 61529-9539	Retired	05/15/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation	Aggregate Year-to-Date ->	200.00

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Smith 2115 Huntleigh Road Springfield, IL 62704-	Self	04/18/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation attorney	Aggregate Year-to-Date ->	250.00

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Snider 123 SW Jefferson Peoria, IL 61602-	Robert W Baird	06/16/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation Broker	Aggregate Year-to-Date ->	250.00

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Solomon 10 Timber Hill Springfield, IL 62704-	Solomon Colors	04/06/2000	50.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation Director	Aggregate Year-to-Date ->	50.00

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Solomon 10 Timber Hill Springfield, IL 62704-	Solomon Colors	04/09/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation Director	Aggregate Year-to-Date ->	300.00

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Sommer 320 E High Point Road Peoria, IL 61614-	Retired	04/13/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation	Aggregate Year-to-Date ->	200.00

SUBTOTAL of Receipts This Page (optional)	1,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Evalyn Spinder 134 Rue Vue Du Lac East Peoria,IL 61611-1542	Occupation: homemaker	04/26/2000	300.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 300.00		

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Spurgeon 1841 E Beach Street Peoria Heights,IL 61614-	Lincoln Office Occupation: President	04/26/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 200.00		

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Frances Squires 1100 Oakmont Drive Springfield,IL 62704-	Il Commerce Company Occupation: County Board Chairman	04/13/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 250.00		

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Keith Steffen 8 Kara Court Washington,IL 61571-	St Francis Occupation: ADMINISTRATOR	05/08/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 500.00		

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rosemary Steinfort PO Box 110 200 E elkhart Road Mount Pulaski,IL 62548-0110	Retired Occupation:	05/01/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 250.00		

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Scott Steinfort 1019 State Route 121 Lincoln,IL 62656-5355	Mt Pulaski Products Occupation: OWNER	04/13/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 250.00		

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Catherine Stevenson 4536 Miller Avenue Peoria Heights,IL 61614-	Occupation: homemaker	06/16/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 250.00		

SUBTOTAL of Receipts This Page (optional)	2,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code Herbert Stoller 1135 N Blackberry Lane East Peoria, IL 61611-5403 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Widmer Inc **Occupation** CEO **Aggregate Year-to-Date ->** 250.00	**Date (month, day, year)** 04/06/2000	**Amount of Each Receipt this Period** 250.00
B. Full Name, Mailing Address and Zip Code Nick Striglos PO Box 167 Decatur, IL 62525-0167 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Contemp. Prop., Inc. **Occupation** PRESIDENT **Aggregate Year-to-Date ->** 200.00	**Date (month, day, year)** 04/18/2000	**Amount of Each Receipt this Period** 200.00
C. Full Name, Mailing Address and Zip Code Nick Striglos PO Box 167 Decatur, IL 62525-0167 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Contemp. Prop., Inc. **Occupation** PRESIDENT **Aggregate Year-to-Date ->** 450.00	**Date (month, day, year)** 04/26/2000	**Amount of Each Receipt this Period** 250.00
D. Full Name, Mailing Address and Zip Code Kevin Sullivan 6426 N Syler Peoria, IL 61615- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Self **Occupation** attorney **Aggregate Year-to-Date ->** 250.00	**Date (month, day, year)** 06/16/2000	**Amount of Each Receipt this Period** 250.00
E. Full Name, Mailing Address and Zip Code Robert Swaim 2125 Timberview Drive Springfield, IL 62702- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Public Affairs Group **Occupation** CONSULTANT **Aggregate Year-to-Date ->** 1,000.00	**Date (month, day, year)** 05/19/2000	**Amount of Each Receipt this Period** 1,000.00
F. Full Name, Mailing Address and Zip Code William Tansey 7 Baybrook Lane Oak Brook, IL 60523- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** Downers Grove Orthopedic **Occupation** Doctor **Aggregate Year-to-Date ->** 250.00	**Date (month, day, year)** 04/14/2000	**Amount of Each Receipt this Period** 250.00
G. Full Name, Mailing Address and Zip Code Kathy Taylor 2 Locust Grove Court Groveland, IL 61535- **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** A Sweet Arrangement **Occupation** OWNER **Aggregate Year-to-Date ->** 1,000.00	**Date (month, day, year)** 05/04/2000	**Amount of Each Receipt this Period** 1,000.00

SUBTOTAL of Receipts This Page (optional)	3,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Bruce Thiemann 1523 Fondulac Drive East Peoria,IL 61611-2131 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Self / attorney Aggregate Year-to-Date -> 100.00	04/06/2000	100.00
B. Bruce Thiemann 1523 Fondulac Drive East Peoria,IL 61611-2131 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Self / attorney Aggregate Year-to-Date -> 350.00	06/14/2000	250.00
C. Susan Thomas 419 Kingsbury Road Metamora,IL 61548- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	/ homemaker Aggregate Year-to-Date -> 500.00	05/16/2000	500.00
D. Craig Thompson 1603 N Holiday Lane Trivoli,IL 61569-9705 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Thompson Electronics / PRESIDENT Aggregate Year-to-Date -> 1,000.00	05/15/2000	1,000.00
E. Full Name, Mailing Address and Zip Code Martha Thompson 2724 W Reservoir Boulevard #600 Peoria,IL 61615-4137 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Retired / Occupation Aggregate Year-to-Date -> 200.00	04/12/2000	200.00
F. Full Name, Mailing Address and Zip Code Richard Thompson 2311 E Tanglewood Lane Peoria,IL 61614- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Caterpillar Inc / Executive Aggregate Year-to-Date -> 500.00	05/12/2000	500.00
G. Full Name, Mailing Address and Zip Code Robert Thomson PO Box 260 Virginia,IL 62691-0260 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Self / attorney Aggregate Year-to-Date -> 1,000.00	05/01/2000	1,000.00

SUBTOTAL of Receipts This Page (optional)	3,550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alma Toedter 507 S Sheridan P O Box 82 Granville,IL 61326-	Toedter Oil Co Occupation: OWNER	04/09/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	100.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alma Toedter 507 S Sheridan P O Box 82 Granville,IL 61326-	Toedter Oil Co Occupation: OWNER	06/29/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Unes 4625 W Merol Court Peoria,IL 61604-	Retired Occupation:	06/12/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mike Unes 2520 W Flint Peoria,IL 61604-3012	Retired Occupation:	05/17/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald VanFossan 2011 Briarcliff Drive Springfield,IL 62704-4125	Retired Occupation:	04/13/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hormaz Vania 2704 Bennington Drive Springfield,IL 62704-4225	Vania Engineering Occupation: Engineer	04/18/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Janet Vergon 2914 W Windpointe Drive Peoria,IL 61614-	Central IL Business Publisher Occupation: Fundraising	05/11/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	2,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Darrell Vierling 42 Waldheim Road Morton, IL 61550-1157 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Caterpillar Inc Occupation: Manager Aggregate Year-to-Date -> 500.00	05/25/2000	500.00
B. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Karen Viete 11305 N Pawnee Road Peoria, IL 61615- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: homemaker Aggregate Year-to-Date -> 1,000.00	05/19/2000	1,000.00
C. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Donald Vonachen 456 Fulton Street Suite 425 Peoria, IL 61602- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Vonachen Lawless Occupation: attorney Aggregate Year-to-Date -> 200.00	04/05/2000	200.00
D. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Harold Vonachen 304 W Wolf Road Peoria, IL 61614- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Occupation: Peoria Chiefs Aggregate Year-to-Date -> 300.00	04/09/2000	300.00
E. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Jay Vonachen PO Box 3113 2302 E Lake Avenue Peoria, IL 61612-3113 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Vonachen Service and Supply Occupation: Executive Aggregate Year-to-Date -> 500.00	05/02/2000	500.00
F. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Jay Vonachen PO Box 3113 2302 E Lake Avenue Peoria, IL 61612-3113 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Vonachen Service and Supply Occupation: Executive Aggregate Year-to-Date -> 1,000.00	05/24/2000	500.00
G. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Matthew Vonachen 709 Bridgetown Court Dunlap, IL 61525- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Vonachen Industrial Supplies Occupation: Vice-President Aggregate Year-to-Date -> 50.00	04/12/2000	50.00

SUBTOTAL of Receipts This Page (optional)	3,050.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Matthew Vonachen 709 Bridgetown Court Dunlap,IL 61525- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Vonachen Industrial Supplies Occupation: Vice-President Aggregate Year-to-Date -> 300.00	05/31/2000	250.00
B. Full Name, Mailing Address and Zip Code Jon Ware 1553 Mound Avenue Jacksonville,IL 62650- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: Wareco Occupation: Manager Aggregate Year-to-Date -> 250.00	05/08/2000	250.00
C. Full Name, Mailing Address and Zip Code Joseph Warner 12 Kent Drive Normal,IL 61761- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: Heritage Enterprises Occupation: CEO Aggregate Year-to-Date -> 250.00	06/30/2000	250.00
D. Full Name, Mailing Address and Zip Code Parrish Warner 23107 N Crew Lane Sparland,IL 61565- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: Il Dept Of Trans Occupation: JANITOR Aggregate Year-to-Date -> 1,000.00	05/02/2000	1,000.00
E. Full Name, Mailing Address and Zip Code John Waugh 1728 Baywood Peoria,IL 61614- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: Waugh Foods Occupation: Secretary Aggregate Year-to-Date -> 250.00	06/16/2000	250.00
F. Full Name, Mailing Address and Zip Code Keith Weinstein 106 B Northgate Road Peoria,IL 61614- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: Cellular Connection Occupation: Dealer Aggregate Year-to-Date -> 250.00	06/16/2000	250.00
G. Full Name, Mailing Address and Zip Code Elizabeth Worry 6209 W Route 150 Edwards,IL 61528- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: Occupation: homemaker Aggregate Year-to-Date -> 1,000.00	04/19/2000	1,000.00

SUBTOTAL of Receipts This Page (optional)	3,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Glenn Werry 6209 W Route 150 Edwards, IL 61528-	Star Transport Inc PRESIDENT	04/19/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
B. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Dawn Wilkins 5902 N Elm Lane Peoria, IL 61614-	Homemaker	04/26/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	
C. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Aimee Williams 2309 W Wagner Lane Peoria, IL 61615-	Williams Bros Construction Office Manager	05/12/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
D. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
David Williams 1005 Holland Road Metamora, IL 61548-	William Bros Construction Vice President	05/12/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
E. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Joseph Williams 1300 Indigo Drive Morton, IL 61550-	Williams Bros Construction PROJECT MGR	05/12/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
F. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Marybeth Williams 1018 W Centennial Drive Peoria, IL 61614-	Williams Bros Construction Estimator	05/12/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
G. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Nancy Williams 233 East High Point Road Peoria, IL 61614-3009	Williams Bros Construction PAYROLL	05/12/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	6,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Rita Williams 2309 W Wagner Lane Peoria, IL 61615-4238 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Homemaker Occupation	05/12/2000	1,000.00
	Aggregate Year-to-Date ->	1,000.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Williams 2309 W Wagner Lane Peoria, IL 61615-4238 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Williams Bros Construction President	05/12/2000	1,000.00
	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Williams 7419 N Windsor Lane Peoria, IL 61614- Receipt For: [ ] Primary [X] General [ ] Other (specify)	William Bros Construction Vice President	05/12/2000	1,000.00
	Aggregate Year-to-Date ->	1,000.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Marilyn Winkler RR 7 Box 151 Metamora, IL 61548- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Winkler Meats Secretary	04/09/2000	200.00
	Aggregate Year-to-Date ->	200.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Michael Wisdom 2418 E Grandview Drive Peoria, IL 61614- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Wisdom Development PRESIDENT	06/16/2000	250.00
	Aggregate Year-to-Date ->	250.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Betty Woolsey 5810 N Prospect Road Peoria, IL 61614- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Jones Bros Jewelers President	06/20/2000	500.00
	Aggregate Year-to-Date ->	500.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Robert Woolsey 117 W Deerbrook Drive Peoria, IL 61615- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Jones Bros Jewelers VP	06/20/2000	250.00
	Aggregate Year-to-Date ->	250.00	

SUBTOTAL of Receipts This Page (optional)	4,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Wyman 5110 N Prospect Peoria Heights, IL 61614-	Il Eye Center Occupation OPHTHALMOLOGIST	05/08/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wayne Zimmerman 6 Roth Court Metamora, IL 61548-	Retired Occupation	04/18/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Zinser 9201 N Old Towerline Road Edwards, IL 61528	Zinser & Bruns Occupation Chiropractor	05/22/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edmund Zosky 1426 N Main Street East Peoria, IL 61611-	Zosky Realty Occupation President	05/22/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Zosky PO Box 3685 Peoria, IL 61612-3685	Department of Justice Occupation Bankruptcy Analyst	04/11/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Al Zuccarini 10300 N Schopp Lane Peoria, IL 61615-1180	Peoria Speakeasy Occupation OWNER	06/16/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	1,900.00
TOTAL This Period (last page this line number only)	155,875.00

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 11(b)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code National Republican Congressional Comm 320 First Street SE Washington, DC 20003- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 23.93	Date (month, day, year) 04/04/2000	Amount of Each Receipt this Period 23.93 IN-KIND
B. Full Name, Mailing Address and Zip Code National Republican Congressional Comm 320 First Street SE Washington, DC 20003- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 263.21	Date (month, day, year) 04/04/2000	Amount of Each Receipt this Period 239.28 IN-KIND
C. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
D. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
F. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	263.21
TOTAL This Period (last page this line number only)	263.21

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 49

FOR LINE NUMBER
23M

Disbursements for Candidate: Ray LaHood

APR 04 2000

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NAME OF COMMITTEE

National Republican Congressional Committee

A. Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date	Amount This Period
FRIENDS OF RAY LAHOOD CAROL GARCEAU, TREASURER 3311 NORTH STERLING, #10 PEORIA, IL 61604	IL-18 Satellite Feed Agg YTD $263.21 Disbursement for: ☐ Primary ☒ General ☐ Other	03-27-00	$239.28 INKIND
B. Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date	Amount This Period
FRIENDS OF RAY LAHOOD CAROL GARCEAU, TREASURER 3311 NORTH STERLING, #10 PEORIA, IL 61604	IL-18 Satellite Feed Agg YTD $263.21 Disbursement for: ☐ Primary ☒ General ☐ Other	03-29-00	$23.93 INKIND
C. Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other	Date	Amount This Period
D. Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other	Date	Amount This Period
E. Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other	Date	Amount This Period
F. Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other	Date	Amount This Period
G. Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other	Date	Amount This Period
H. Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other	Date	Amount This Period
I. Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other	Date	Amount This Period

SUBTOTAL of Disbursements This Page	$263.21
TOTAL This Period	$263.21

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code A E Staley PAC 2200 E Eldorado Decatur,IL 62521- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 05/15/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code AGC Political Action Committee 1957 E Street NW Washington,DC 20006- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 04/09/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code American Dental PAC 111 14th Street NW #1100 Washington,DC 20005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 05/22/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code American Society of Anesthesiologists 520 N Northwest Highway Park Ridge,IL 60068-2573 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 5,000.00	Date (month, day, year) 05/16/2000	Amount of Each Receipt this Period 5,000.00
E. Full Name, Mailing Address and Zip Code American Success Pac 1155 21st Street N W Suite 300 Washington,DC 20036- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 06/29/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code American Veterinary Medical PAC 1101 Vermont Avenue Suite 710 Washington,DC 20005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 06/12/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Arab American Leadership PAC 919 16th Street NW #601 Washington,DC 20006- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 05/22/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	10,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Arab American Leadership PAC 918 16th Street NW #601 Washington,DC 20006-		05/30/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	2,000.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Auction Markets PAC of the CBOT 141 W Jackson Blvd Chicago,IL 60604-		04/09/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Boyd Political Action Committee 2950 s Industrial Road Las Vegas,NV 89109-		06/26/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
National Association of Homebuilders 1201 15th Street NW #500 Washington,DC 20005-2800		06/19/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Building and Construction Trades Dept Federal Political Education Fund Washington,DC 20006-4104		06/29/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Chicago Board of Options Exchange PAC 400 S LaSalle Street Chicago,IL 60605-		05/22/2000	2,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	2,000.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Carpenters' Legislative Improvement Comm 101 Constitution Avenue NW Washington,DC 20001-		06/26/2000	5,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	5,000.00	

SUBTOTAL of Receipts This Page (optional)	11,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Caterpillar Employees PAC 100 NE Adams Street Peoria,IL 61629-1430	Occupation	06/27/2000	5,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	5,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chicago Mercantile Exchange PAC 1299 Pennsyvania Avenue NW Washington,DC 20004-	Occupation	06/29/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Credit Union Legislative Action Council 805 Fifteenth Street NW Suite 300 Washington,DC 20005-2207	Occupation	04/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Credit Union Legislative Action Council 805 Fifteenth Street NW Suite 300 Washington,DC 20005-2207	Occupation	06/23/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
International Union of Operating Engrs 1125 17th Street NW Washington,DC 20036-	Occupation	06/16/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ernst & Young PAC 1225 Connecticut Avenue 2nd Floor Washington,DC 20036-	Occupation	06/30/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Farm Credit Council PAC 50F Street NW #900 Washington,DC 20001-	Occupation	06/01/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	9,000.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
The Hartford Advocates Fund 1101 Connecticut Avenue NW #401 Washington,DC 20036- Receipt For: [ ] Primary [X] General [ ] Other (specify)		04/09/2000 Aggregate Year-to-Date -> 500.00	500.00
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
IAFF Fire Pac International Assn of Fire Fighters Washington,DC 20006- Receipt For: [ ] Primary [X] General [ ] Other (specify)		06/29/2000 Aggregate Year-to-Date -> 2,000.00	2,000.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
M. B. PAC Morton Buildings Inc Morton,IL 61550- Receipt For: [ ] Primary [X] General [ ] Other (specify)		05/22/2000 Aggregate Year-to-Date -> 2,000.00	2,000.00
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Motorola Civic Action Campaign Fund 13501 I Street NW #400 Washington,DC 20005- Receipt For: [ ] Primary [X] General [ ] Other (specify)		05/25/2000 Aggregate Year-to-Date -> 500.00	500.00
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
National Beer Wholesalers Assn PAC 1110 S Washington Street Alexandria,VA 22314-4494 Receipt For: [ ] Primary [X] General [ ] Other (specify)		06/20/2000 Aggregate Year-to-Date -> 2,500.00	2,500.00
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
NRA Stonepac 1412 Elliot Place NW Washington,DC 20007- Receipt For: [ ] Primary [X] General [ ] Other (specify)		05/01/2000 Aggregate Year-to-Date -> 500.00	500.00
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Corridor 67 PAC 155 W Morton Jacksonville,IL 62650- Receipt For: [ ] Primary [X] General [ ] Other (specify)		04/11/2000 Aggregate Year-to-Date -> 500.00	500.00

SUBTOTAL of Receipts This Page (optional)	8,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the detailed summary page

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Wells Fargo Employee PAC Norwest Center, Sixth & Marquette Minneapolis,MN 55479-1032		06/23/2000	2,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	2,000.00	
B. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
		/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
C. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
		/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
D. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
		/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
		/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
		/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
		/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	2,000.00
TOTAL This Period (last page this line number only)	41,500.00

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 15

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and Zip Code Heritage Bank of Central Illinois 3420 W Willow Knolls Peoria,IL 61614- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 96.18	Date (month, day, year) 04/30/2000	Amount of Each Receipt this Period 96.18
B. Full Name, Mailing Address and Zip Code Heritage Bank of Central Illinois 3420 W Willow Knolls Peoria,IL 61614- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 719.46	Date (month, day, year) 05/31/2000	Amount of Each Receipt this Period 623.28
C. Full Name, Mailing Address and Zip Code Heritage Bank of Central Illinois 3420 W Willow Knolls Peoria,IL 61614- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,697.82	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period 978.36
D. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
F. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	1,697.82
TOTAL This Period (last page this line number only)	1,697.82

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A T & T PO Box 27-866 Kansas City, MO 64184-0866	Phone service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/18/2000	163.67
A T & T PO Box 27-866 Kansas City, MO 64184-0866	Phone service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/02/2000	58.46
A T & T PO Box 27-866 Kansas City, MO 64184-0866	Phone service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/08/2000	20.49
A T & T PO Box 27-866 Kansas City, MO 64184-0866	Phone service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/11/2000	328.75
A T & T PO Box 27-866 Kansas City, MO 64184-0866	Phone service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/15/2000	23.12
Alltel Communications 815 W Pioneer Pky Peoria, IL 61615	Phone service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/03/2000	233.67
Alltel Communications 815 W Pioneer Pky Peoria, IL 61615	Phone service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/09/2000	173.62

SUBTOTAL of Disbursements This Page (optional)	1,001.78
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 11

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Alltel Communications 815 W Pioneer Pky Peoria, IL 61615	Phone service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/05/2000	160.86
Alphagraphics 7800 Sommer Street Suite 203 Peoria, IL 61615-	Printing Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/02/2000	564.58
Alphagraphics 7800 Sommer Street Suite 203 Peoria, IL 61615-	Printing Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/25/2000	198.13
American Diabetes Association C/O Bev Grimes 2825 W Briarcliff Lane Peoria, IL 61604-	Advertising Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/18/2000	40.00
Ameritech PO Box 5420 Carol Stream, IL 60197-4520	Phone service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/03/2000	173.00
Ameritech PO Box 5420 Carol Stream, IL 60197-4520	Phone service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/28/2000	156.97
Ameritech PO Box 5420 Carol Stream, IL 60197-4520	Phone service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/02/2000	20.22

SUBTOTAL of Disbursements This Page (optional)	1,313.76
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 11

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ameritech PO Box 5420 Carol Stream, IL 60197-4520	Phone service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/22/2000	18.37
Ameritech PO Box 5420 Carol Stream, IL 60197-4520	Phone service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/25/2000	113.97
Mr Jay Bryant 18351 Queen Anne Road Upper Marlboro, MD 20774-	Consulting and Research Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/04/2000	13,250.00
Mr Jay Bryant 18351 Queen Anne Road Upper Marlboro, MD 20774-	Communications Consulting Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/02/2000	3,000.00
Mr Jay Bryant 18351 Queen Anne Road Upper Marlboro, MD 20774-	Consulting and research Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/11/2000	13,250.00
Mr Jay Bryant 18351 Queen Anne Road Upper Marlboro, MD 20774-	Communications Consulting Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/05/2000	3,000.00
Campaigns & Elections Inc 3311 N Sterling #10 Peoria, IL 61604-1837	Rent, fees, copies Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/28/2000	5,653.34

SUBTOTAL of Disbursements This Page (optional)	38,285.68
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 4 OF 11

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Campaigns & Elections Inc 3311 N Sterling #10 Peoria, IL 61604-1837	Rent, fees, copies Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/08/2000	5,706.08
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Capitol Hill Club 300 First Street SE Washington, DC 20003-	Bar B Q expense and meals Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/18/2000	729.82
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Petty Cash Account 3311 N Sterling Av #10 Peoria, IL 61604-1837	Petty Cash Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/03/2000	100.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Petty Cash Account 3311 N Sterling Av #10 Peoria, IL 61604-1837	Petty cash Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/18/2000	100.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Petty Cash Account 3311 N Sterling Av #10 Peoria, IL 61604-1837	Petty cash Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/18/2000	100.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Petty Cash Account 3311 N Sterling Av #10 Peoria, IL 61604-1837	Petty cash Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/28/2000	100.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Petty Cash Account 3311 N Sterling Av #10 Peoria, IL 61604-1837	Petty cash Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/02/2000	100.00

SUBTOTAL of Disbursements This Page (optional)	6,935.90
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Petty Cash Account 3311 N Sterling Av #10 Peoria, IL 61604-1837	Petty cash Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/15/2000	100.00
Petty Cash Account 3311 N Sterling Av #10 Peoria, IL 61604-1837	Petty cash Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/16/2000	100.00
Petty Cash Account 3311 N Sterling Av #10 Peoria, IL 61604-1837	Petty cash Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/18/2000	100.00
Petty Cash Account 3311 N Sterling Av #10 Peoria, IL 61604-1837	Flags Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/22/2000	372.50
Petty Cash Account 3311 N Sterling Av #10 Peoria, IL 61604-1837	Petty cash Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/15/2000	100.00
Central Illinois Light Co PO Box 1600 Peoria, IL 61656-1600	Utilities Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/02/2000	129.78
Central Illinois Light Co PO Box 1600 Peoria, IL 61656-1600	Utilities Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/17/2000	160.56

SUBTOTAL of Disbursements This Page (optional)	1,062.84
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D & J Custom Signs 2349 Washington Rd Washington, IL 61571-	Campaign signs Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/18/2000	1,180.00
Deluxe Business Forms PO Box 64500 St Paul, MN 55164-0500	Checks and envelopes Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/18/2000	189.64
Mr Terrance K Fondriest 7201 N Gilles Road Edwards, IL 61528-9763	Photo processing Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/17/2000	30.18
Mr Terrance K Fondriest 7201 N Gilles Road Edwards, IL 61528-9763	Film and developing Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/25/2000	352.87
Human Events Po Box 59733 Potomac, MD 20897-5919	Renew subscription Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/04/2000	69.95
Illini Country Club 1601 Illini road Springfield, IL 62704-	Catering Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/19/2000	739.63
Illinois Issues Po Box 251 Mt Morris, IL 61054	Subscription Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/04/2000	39.95

SUBTOTAL of Disbursements This Page (optional)	2,602.22
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Interior Plants & Designs Becky Auer PO Box 1135 Peoria, IL 61653	Floral arrangement Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/04/2000	84.62
Interior Plants & Designs Becky Auer PO Box 1135 Peoria, IL 61653	Volunteer flowers Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/01/2000	41.62
Jacksonville Journal Courier 235 W State Jacksonville, IL 62651-	Advertising Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/11/2000	30.00
Joan's Trophy & Plaque Po Box 5939 Peoria, IL 61601-5939	Name plate Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/15/2000	59.39
Kinko's PO Box 672085 Dallas, TX 75267-2085	Printing Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/18/2000	673.47
Kinko's PO Box 672085 Dallas, TX 75267-2085	Printing Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/11/2000	25.96
Laserpro of Peoria 2210 W Townline Road Peoria IL 61615	Printer cartridge Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/08/2000	73.64

SUBTOTAL of Disbursements This Page (optional)	986.70
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Laserpro of Peoria 2210 W Townline Road Peoria IL 61615	Printer repairs Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/15/2000	81.28
Gina McClancy 511 W Melbourne Peoria, IL 61604-	Music at fundraiser Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/22/2000	100.00
Melissa Carr 9206 Flower Avenue Silver Spring, MD 20901-	Catering Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/15/2000	735.00
MTCO Communications 220 N Menard Street Metamora, IL 61548-0649	Internet service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/04/2000	57.00
MTCO Communications 220 N Menard Street Metamora, IL 61548-0649	Internet access Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/11/2000	57.00
National City PO Box 85440 Louisville, KY 40285-5440	See memo attached Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/17/2000	3,663.57
National City PO Box 85440 Louisville, KY 40285-5440	See memo attached Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/11/2000	2,327.93

SUBTOTAL of Disbursements This Page (optional)	7,021.78
TOTAL This Period (last page this line number only)	

NATIONAL CITY VISA

04/17/00

RLaHood	23.20	Amoco, Peoria IL
	37.90	US House-Members Dining, Washington DC
	169.00	United Air, Sterling VA
	33.03	CITGO, East Peoria IL
	59.98	The Tutwiler Hotel, Birmingham AL
	19.99	Mobil, Schiller Park IL
	14.00	GTEAir, Oakbrook IL
	6.84	GTEAir, Oakbrook IL
	34.55	VF Scott's & TheTombs, Washington DC
	48.38	Svendsen Florist Inc, Decatur IL
	15.20	US House-Members Dining, Washington DC
	184.55	Pines of Rome, Bethesda MD
	249.00	United Air, Fairfax VA (Air fare)
	40.92	Amoco, Peoria IL
	143.42	The Grill, Peoria IL
	14.52	Shell, Washington IL
	15.08	Shell Oil, Oglesby IL
	27.60	Shellys Back Room, Washington DC
	16.95	US House-Members Dining, Washington DC
JKrones	70.81	Kroger, Peoria IL
	108.50	Office Depot, Peoria IL
	320.00	US Postal Service, Peoria IL (Stamps)
	1,848.00	US Postal Service, Peoria IL (Stamps)
	34.56	Celebrations Party Supplies, Peoria IL
	19.33	Dick Blick, Peoria IL
	25.43	Wal Mart, Peoria IL
BMcMillan	17.01	Shell, Springfield IL
	33.54	Uftring Ford, East Peoria IL
	24.71	Gil's Diner, Hanna City IL
	42.57	The Grill, Peoria IL

05/11/00
RLaHood

45.35	US House Dining Room, Washington DC
18.95	Shell, Oglesby IL
31.95	US House Dining Room, Washington DC
32.94	Amoco, Peoria IL
30.00	Mobil, Hinsdale IL
50.75	M & S Grill, Washington DC
420.00	United Air, Sterling VA (Air fare)
19.38	Citgo, East Peoria IL
45.50	Amoco, Peoria IL
28.26	Mobil, Hinsdale IL
14.95	GTEAIR, Oakbrook IL
283.09	Joe Theismann's Restaurant, Alexandra VA (Meals)
221.00	Peoria Journal Star (Subscription)
40.57	Clark Station, Peoria IL
20.98	Clark Station, Peoria IL
21.83	Hucks Food and Fuel, Peoria IL
26.80	Shell, Oglesby IL
21.74	Shell, Oglesby IL
11.29	Amoco, Peoria IL
27.43	Amoco, Peoria IL

BMcMillan

19.51	Shell, Edwards IL

J Krones

36.71	Kroger, Peoria IL
15.45	Kroger, Peoria IL
28.03	Kroger, Peoria IL
21.47	Walgreen, Peoria IL
10.73	Office Depot, Peoria IL
20.00	Lone Star Steakhouse, Peoria IL
12.63	Wal Mart, Peoria IL
108.96	Color Classic Portrait, Peoria IL
495.00	US Postal Service, Peoria IL (Stamps)
51.75	Pack-N-Mail, Peoria IL
18.26	Wal Mart, Peoria IL

06/11/00

RLaHood

18.00	Red Carpet Car Wash, Peoria IL
33.32	Phillips Station, Lincoln IL
32.41	Amoco, Peoria IL
22.07	Mobil, Peoria IL
14.98	Huck Food & Fuel, Peoria IL
33.45	US House Members Dining Room, Washington DC
65.90	Us House Members Dining Room, Washington DC
294.00	Monocle on Capitol Hill, Washington DC (Meals)
72.95	US House Members Dining, Washington DC
559.00	United Air, Washington DC (Air Fare)
219.50	ATA Air, Washington DC (Air Fare)
11.15	Amoco, Peoria IL
17.45	Amoco, Peoria Il
24.75	Amoco, Peoria IL

BMcMillan

21.46	Wal Mart, Peoria IL
22.42	Thompson Food Basket, Peoria IL
23.54	Uftring Ford
137.70	The Grill, Peoria IL
52.02	The Grill, Peoria IL
19.95	Amoco, Peoria IL

JKrones

99.07	Office Depot, Peoria IL
86.81	Walgreen, Peoria IL
10.00	Agent Fee, Peoria IL
882.00	American Airlines, Peoria Il
20.39	Walgreens, Peoria Il
168.89	American Rental, Peoria IL
596.00	US Postal Service, Peoria IL

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 9 OF 11

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National City PO Box 85440 Louisville, KY 40285-5440	See memo attached Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/08/2000	3,584.99
Full Name, Mailing Address and Zip Code National Republican Congressional Comm 320 First Street SE Washington, DC 20003-	Purpose of Disbursement Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 04/04/2000	Amount of Each Disbursement This Period 239.20 IN KIND
Full Name, Mailing Address and Zip Code National Republican Congressional Comm 320 First Street SE Washington, DC 20003-	Purpose of Disbursement Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 04/04/2000	Amount of Each Disbursement This Period 23.93 IN KIND
Full Name, Mailing Address and Zip Code Natl Republican Club 300 First Street Washington, DC 20003-	Purpose of Disbursement Catering Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 06/01/2000	Amount of Each Disbursement This Period 458.49
Full Name, Mailing Address and Zip Code Peoria Flag Decorating Company 920 E Glen Avenue Peoria Heights, IL 61614-	Purpose of Disbursement Pipe and drape Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 05/25/2000	Amount of Each Disbursement This Period 42.50
Full Name, Mailing Address and Zip Code Pepsi-Cola Gen Bottlers PO Box 75900 Chicago, IL 60675-5944	Purpose of Disbursement Soda for machine Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 06/15/2000	Amount of Each Disbursement This Period 74.50
Full Name, Mailing Address and Zip Code Postmaster 95 State Street Peoria, IL 61601-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 05/02/2000	Amount of Each Disbursement This Period 330.00

SUBTOTAL of Disbursements This Page (optional)	4,753.69
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Praxair Distribution Inc PO Box 9213 Des Moines, IA 50306-9213	Helium tank rent Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/18/2000	8.26
Praxair Distribution Inc PO Box 9213 Des Moines, IA 50306-9213	Helium tank rent Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/08/2000	9.26
R L Polk & Company PO Box 77709 Detroit, MI 48277-0709	Springfield directory Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/02/2000	244.00
St Sharbel Church 2914 W Scenic Drive Peoria, IL 61615	Advertising Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/11/2000	50.00
State Journal Register PO Box19486 Springfield, IL 62794-9486	Subscription renewal Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/15/2000	179.40
Marlise Streitmatter 200 S Althea #2D Elmwood, IL 61529	Reimburse expenses Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/06/2000	600.66
Marlise Streitmatter 200 S Althea #2D Elmwood, IL 61529	Grassrooting consulting and expense Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/02/2000	5,365.95

SUBTOTAL of Disbursements This Page (optional)	6,457.51
TOTAL This Period (last page this line number only)	

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 11 OF 11 FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Marlise Streitmatter 200 S Althea #2D Elmwood, IL 61529	Grassroots consulting and expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	05/25/2000	5,414.09
White Oaks Flower Shoppe 3115 Robbins Road Springfield, IL 62704	Volunteer flowers Disbursement for: [ ] Primary [X] General [ ] Other (specify)	04/04/2000	30.56
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	

SUBTOTAL of Disbursements This Page (optional)	5,444.65
TOTAL This Period (last page this line number only)	75,868.51

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 19b

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National City Bank PO Box 1030 Southgate, MI 48195-0030	Campaign van payment Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/13/2000	923.28
National City Bank PO Box 1030 Southgate, MI 48195-0030	Campaign van payment Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/12/2000	923.28
National City Bank PO Box 1030 Southgate, MI 48195-0030	Campaign van payment Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/13/2000	923.28
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	

SUBTOTAL of Disbursements This Page (optional)	2,769.84
TOTAL This Period (last page this line number only)	2,769.84

SCHEDULE B — **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 20a

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Glennon 875 N Michigan Avenue Suite 3718 Chicago, IL 60611-	Refund contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	05/02/2000	1,000.00
Stuart Levine 875 Michigan Avenue, Suite 2930 Chicago, IL 60611-	Refund contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	05/02/2000	1,000.00
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	

SUBTOTAL of Disbursements This Page (optional)	2,000.00
TOTAL This Period (last page this line number only)	2,000.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 4

FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Baker For Congress 46 Lincoln Hills SW Quincy, IL 62301-	Contribution Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/01/2000	1,000.00
Full Name, Mailing Address and Zip Code Bowling for Kids Big Brothers Big Sister 714 Hamilton Blvd Peoria, IL 61602-	Purpose of Disbursement Sponsorship Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 05/11/2000	Amount of Each Disbursement This Period 300.00
Full Name, Mailing Address and Zip Code Boy Scouts Springfie PO Box 7125 1911 West Monroe Springfield, IL 62791-7125	Purpose of Disbursement Contribution Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 05/11/2000	Amount of Each Disbursement This Period 50.00
Full Name, Mailing Address and Zip Code Central Ill Trades and Labor Council PO Box 6128 Springfield, IL 62708-	Purpose of Disbursement Program ad Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 06/20/2000	Amount of Each Disbursement This Period 60.00
Full Name, Mailing Address and Zip Code Citizens to Re-elect Barb Baker 1230 Parnassus Jacksonville, IL 62650-	Purpose of Disbursement tickets Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 05/15/2000	Amount of Each Disbursement This Period 100.00
Full Name, Mailing Address and Zip Code Corn Stock Theatre Po Box 412 Peoria, IL 61651-	Purpose of Disbursement Program Advertising Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 04/17/2000	Amount of Each Disbursement This Period 195.00
Full Name, Mailing Address and Zip Code Michael Dineen 1300 Crystal Drive #607-S Arlington, VA 22202-	Purpose of Disbursement Golf fees Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 05/15/2000	Amount of Each Disbursement This Period 324.00

SUBTOTAL of Disbursements This Page (optional)	2,029.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Easter Seals Rehab Center 507 E Armstrong Avenue Peoria, IL 61603-	Golf sponsorship Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/04/2000	250.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Faith and Politics Institute 110 Maryland Avenue NW #306 Washington, DC 20002-	Tickets Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/22/2000	250.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Tim Johnson Friends of Tim Johnson 905 Neil Street Champaign, IL 61820-	Contribution Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/12/2000	1,000.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Greater Springfield Chamber of Commerce 3 9 Old State Capitol Plaza Springfield, IL 62701	Registration Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/11/2000	35.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Green Plantscapes 1208 NE Adams Street Peoria, IL 61603	Volunteer flowers Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/08/2000	43.63
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Grucci for Congress PO Box 790 Medford, NY 11763-	Contribution Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/12/2000	1,000.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Il Republican Party 320 S Fourth St Springfield, IL 62701-1702	Convention hospitality Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/20/2000	500.00

SUBTOTAL of Disbursements This Page (optional)	3,078.63
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 4

FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Illinois Delegation Fund 364 Russell Washington DC 20515	dues Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/18/2000	200.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lazio 2000 PO Box 5063 Bay Shore, NY 11706-	Contribution Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/05/2000	1,000.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mark Kirk for Congress Mark Kirk for Congress 28 Green Bay Road Winnetka, IL 60093-	Contribution Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/12/2000	1,000.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Menard County Fair PO Box 375 Petersburg, IL 62675-	Fair trophy Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/15/2000	25.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mohammed Shrine Temple 207 NE Monroe Peoria, IL 61602	Program ad Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/20/2000	75.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Northwest Airlines Andrea Fuscher-Newman Detroit Metro Airport Detroit, MI 48242-	Air fare Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/05/2000	750.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pekin Marigold Festival 411 Elizabeth Street Pekin, IL 61554-	Program-ad Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/017/2000	240.00

SUBTOTAL of Disbursements This Page (optional)	3,290.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 4 OF 4

FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)
Friends of Ray LaHood

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Peoria Area Chamber of Commerce 124 SW Adams St Suite 300 Peoria, IL 61602-1388	Ticket Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/09/2000	25.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Peoria Area Convention & Visitors Bureau 403 NE Jefferson Street Peoria, IL 61603	Membership Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/09/2000	210.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Peoria Civic Center 201 SW Jefferson Street Peoria, IL 61602	Program ad Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/01/2000	315.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Peoria Federal Executive Assoc Peoria Federal Executive Assoc Dr Peter Johnson, President NCAUR-PFEA Peoria, IL 61604-	Tickets Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/11/2000	96.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Return to Pimiteoui Peoria Park District 2218 N Prospect Peoria, IL 61603-	Program advertising Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	04/18/2000	60.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
St Jude Midwest Affiliate 900 Main St Peoria, IL 61602	Entry fee Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	06/08/2000	100.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Town & Country PO Box 5104 Scottsdale, AZ 85261-	Advertising Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	05/18/2000	58.00

SUBTOTAL of Disbursements This Page (optional)	864.00
TOTAL This Period (last page this line number only)	9,261.63

SCHEDULE C
(Revised 3/80)

LOANS

Page 1 of 1 for
LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (In Full)
Friends of Ray LaHood

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
National City Bank PO Box 1030 Southgate MI 48195-0030	$44,317.44	$17,542.32	$26,775.12

Election: ☐ Primary ☒ General ☐ Other (specify):

Terms: Date Incurred 11/12/1998 Date Due 11/12/2002 Interest Rate 7.3 %(apr) ☐ Secured NO

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	

B. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period

Election: ☐ Primary ☐ General ☐ Other (specify):

Terms: Date Incurred____ Date Due____ Interest Rate___ %(apr) ☐ Secured

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	

SUBTOTALS This Period This Page (optional)	$26,775.12
TOTALS This Period (last page in this line only)	$26,775.12

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED (R/C) 7/13/08
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

Q.A.O.
PREPARER

7/16/08
DATE PREPARED

(6/2010)