



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**FRIENDS FOR CHRIS STEWART, INC.**

Report Covering the Period: From:  /  /  To:  /  /

|                                                                                                                   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|-------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| <b>6. Net Contributions (other than loans)</b>                                                                    |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....                                               | 67526.01                | 144676.01                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                         | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                              | 67526.01                | 144676.01                          |
| <b>7. Net Operating Expenditures</b>                                                                              |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                          | 39385.99                | 95327.72                           |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....                                                | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                        | 39385.99                | 95327.72                           |
| <b>8. Cash on Hand at Close of<br/>Reporting Period (from Line 27).....</b>                                       | 122903.53               |                                    |
| <b>9. Debts and Obligations Owed TO<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D).....</b>  | 0.00                    |                                    |
| <b>10. Debts and Obligations Owed BY<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D).....</b> | 0.00                    |                                    |

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**FRIENDS FOR CHRIS STEWART, INC.**

Report Covering the Period: From:  /  /  To:  /  /

| <b>I. RECEIPTS</b>                                                                                         | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Election Cycle-to-Date</b> |
|------------------------------------------------------------------------------------------------------------|---------------------------------------|--------------------------------------------|
| <b>11. CONTRIBUTIONS (other than loans) FROM:</b>                                                          |                                       |                                            |
| (a) Individuals/Persons Other Than Political Committees                                                    |                                       |                                            |
| (i) Itemized (use Schedule A).....                                                                         | 13450.00                              | 20450.00                                   |
| (ii) Unitemized.....                                                                                       | 0.00                                  | 150.00                                     |
| (iii) TOTAL of contributions from individuals ▶                                                            | 13450.00                              | 20600.00                                   |
| (b) Political Party Committees.....                                                                        | 0.00                                  | 0.00                                       |
| (c) Other Political Committees (such as PACs).....                                                         | 54076.01                              | 124076.01                                  |
| (d) The Candidate.....                                                                                     | 0.00                                  | 0.00                                       |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..                     | 67526.01                              | 144676.01                                  |
| <b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>                                                | 0.00                                  | 0.00                                       |
| <b>13. LOANS:</b>                                                                                          |                                       |                                            |
| (a) Made or Guaranteed by the Candidate.....                                                               | 0.00                                  | 0.00                                       |
| (b) All Other Loans.....                                                                                   | 0.00                                  | 0.00                                       |
| (c) TOTAL LOANS (add Lines 13(a) and (b)).....                                                             | 0.00                                  | 0.00                                       |
| <b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>                                | 0.00                                  | 0.00                                       |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>                                                | 0.00                                  | 103.49                                     |
| <b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b> | 67526.01                              | 144779.50                                  |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 39385.99                      | 95327.72                           |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....                                                | 20000.00                      | 20000.00                           |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 59385.99                      | 115327.72                          |

**III. CASH SUMMARY**

|                                                                                       |           |
|---------------------------------------------------------------------------------------|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 114763.51 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 67526.01  |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 182289.52 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 59385.99  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 122903.53 |

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

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

FOR LINE NUMBER: PAGE 5 OF 44  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**SIRACUSE, KRAIG, , ,**

Mailing Address 2201 WOODMONT RD

City ALEXANDRIA State VA Zip Code 22307-1157

FEC ID number of contributing federal political committee. **C**

Name of Employer PARK STRATEGIES, LLC Occupation MANAGING DIRECTOR

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 14 / 2017

Transaction ID : **A4F66349E44AE4CA5BBE**

Amount of Each Receipt this Period  
 250.00

Memo Item  
**RECEIPT**

**B.** Full Name (Last, First, Middle Initial)  
**JARVIS, ALEIX, , ,**

Mailing Address 1306 CLAYBORNE HOUSE CT

City MCLEAN State VA Zip Code 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer FIERCE GOVERNMENT RELATIONS Occupation CONSULTANT

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 23 / 2017

Transaction ID : **A016B24BEEFDB4318BCE**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MEISSNER, OLIVER, , ,**

Mailing Address 110 D ST SE  
 APT 316

City WASHINGTON State DC Zip Code 20003-1823

FEC ID number of contributing federal political committee. **C**

Name of Employer THE CONSILO GROUP Occupation CONSULTANT

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2017

Transaction ID : **A9C66FCA417494E7DBB6**

Amount of Each Receipt this Period  
 500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **1750.00**

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

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

|                                                                               |                                               |                                     |                                     |                                    |
|-------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                     | PAGE 6 OF 44                        |                                    |
|                                                                               | <input checked="" type="checkbox"/> 11a<br>12 | <input type="checkbox"/> 11b<br>13a | <input type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**CUNNINGHAM, WILLIAM, , ,**

Mailing Address PO BOX 1304

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>ALEXANDRIA | State<br>VA | Zip Code<br>22313 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

|                                             |                          |
|---------------------------------------------|--------------------------|
| Name of Employer<br>POLARIS CONSULTING, LLC | Occupation<br>CONSULTANT |
|---------------------------------------------|--------------------------|

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 16 / 2017

**Transaction ID : A77D7ADEC07274AB38B2**

Amount of Each Receipt this Period  
 500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SCOFIELD, JOHN, , ,**

Mailing Address 227 C ST. SE

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20003 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

|                               |                       |
|-------------------------------|-----------------------|
| Name of Employer<br>S-3 GROUP | Occupation<br>PARTNER |
|-------------------------------|-----------------------|

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 16 / 2017

**Transaction ID : A91AA829777074273A0A**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DELGADO, MARTIN, , ,**

Mailing Address 12300 SKYLARK LN

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>BOWIE | State<br>MD | Zip Code<br>20715 |
|---------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

|                              |                        |
|------------------------------|------------------------|
| Name of Employer<br>S3 GROUP | Occupation<br>LOBBYIST |
|------------------------------|------------------------|

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2017

**Transaction ID : AF3125CD5F7E1425BB03**

Amount of Each Receipt this Period  
 500.00

Memo Item

|                                                                   |         |
|-------------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶           | 2000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶ |         |

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

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

FOR LINE NUMBER: PAGE 7 OF 44  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**SIRACUSE, HELEN, , ,**

Mailing Address 2201 WOODMONT ROAD

City ALEXANDRIA State VA Zip Code 22307

FEC ID number of contributing federal political committee. **C**

Name of Employer ATLANTIC STRATEGIES GROUP Occupation PARTNER

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2017

Transaction ID : **A02DE58CD5FB04571923**

Amount of Each Receipt this Period  
**500.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BARKER, JAMES, , ,**

Mailing Address 2818 BERRYLAND DR

City OAKTON State VA Zip Code 22124-1435

FEC ID number of contributing federal political committee. **C**

Name of Employer BARKER PC Occupation ATTORNEY

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2017

Transaction ID : **A8C0101EA9D064209B2E**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**RECEIPT**

**C.** Full Name (Last, First, Middle Initial)  
**FAUST, MARCUS, , ,**

Mailing Address 3008 APPLE BROOKLN

City OAKTON State VA Zip Code 22124-1842

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2017

Transaction ID : **ACEA0704B687A479488C**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**RECEIPT**

**SUBTOTAL** of Receipts This Page (optional)..... ▶

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

**1500.00**

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

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

FOR LINE NUMBER: PAGE 8 OF 44  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**NAFUS, CYNTHIA, , ,**  
 Mailing Address 131 MISTY HOLLOW WAY  
 City HUNTSVILLE State AL Zip Code 35806-4229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNITED LAUNCH ALLIANCE Occupation VICE PRESIDENT  
 Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**  
 Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2017  
**Transaction ID : AE646A339485F4374874**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
**RECEIPT**

**B.** Full Name (Last, First, Middle Initial)  
**SANFORD, OLIVIA, , ,**  
 Mailing Address 2711 S ADAMS ST #205  
 City ARLINGTON State VA Zip Code 22206-2882  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MARCUS G FAUST, PC Occupation LEGISLATIVE DIRECTOR  
 Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**  
 Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2017  
**Transaction ID : A64FCE7FE9FD343569C6**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
**RECEIPT**

**C.** Full Name (Last, First, Middle Initial)  
**TRACY, MAUREEN, , ,**  
 Mailing Address 520 N CHARTER STREET  
 City MONTICELLO State IL Zip Code 61856  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VAREX IMAGING Occupation GOVERNMENT AFFAIRS  
 Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**  
 Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2017  
**Transaction ID : AF8AA1D118D684E8E85D**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

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

1500.00



# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 44  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAMS, ZEKE, , ,**

Mailing Address 5851 GOVERNOR'S HILL DR

City ALEXANDRIA State VA Zip Code 22310-2358

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation BUSINESS DEVELOPMENT CONSULTANT

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2017

Transaction ID : **AF106DE1318A34CE5A89**

Amount of Each Receipt this Period  
 500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**FREEMEYER, ALLEN, D, ,**

Mailing Address 2015 48TH ST NW

City WASHINGTON State DC Zip Code 20007-1553

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation LOBBYIST

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2017

Transaction ID : **A434D133744634E87950**

Amount of Each Receipt this Period  
 500.00

Memo Item  
**RECEIPT**

**C.** Full Name (Last, First, Middle Initial)  
**MEISSNER, OLIVER, , ,**

Mailing Address 110 D ST SE  
APT 316

City WASHINGTON State DC Zip Code 20003-1823

FEC ID number of contributing federal political committee. **C**

Name of Employer THE CONSILO GROUP Occupation CONSULTANT

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2017

Transaction ID : **A7B0A6C3F7929425CABB**

Amount of Each Receipt this Period  
 500.00

Memo Item  
**RECEIPT**

**SUBTOTAL** of Receipts This Page (optional)..... ▶

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

1500.00

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

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

FOR LINE NUMBER: PAGE 10 OF 44  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**RIGELL, SCOTT, MR., ,**  
 Mailing Address 1301 TAYLORS POINT ROAD  
 City VIRGINIA BEACH State VA Zip Code 23454-2516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**  
 Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2017  
**Transaction ID : AE79D27B15BE44109A33**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**RIGELL, SCOTT, MR., ,**  
 Mailing Address 1301 TAYLORS POINT ROAD  
 City VIRGINIA BEACH State VA Zip Code 23454-2516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2018  
 Primary  General  
 Other (specify) **RECEIPT**  
 Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2017  
**Transaction ID : A03CA19A0B4AA4663986**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

|                                                                   |          |
|-------------------------------------------------------------------|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶           | 5200.00  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶ | 13450.00 |

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

|                                                                         |                                     |                                                |                                    |
|-------------------------------------------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page |                                     | FOR LINE NUMBER: (check only one)              | PAGE 11 OF 44                      |
| <input type="checkbox"/> 11a<br>12                                      | <input type="checkbox"/> 11b<br>13a | <input checked="" type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |
|                                                                         |                                     |                                                | <input type="checkbox"/> 15        |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF JASON CHAFFETZ**

Mailing Address 315 WESTFIELD CIR

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>ALPINE | State<br>UT | Zip Code<br>84004-1594 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00431684

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
0.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

**Transaction ID : A340838AADDCB4BC693D**

Amount of Each Receipt this Period  
500.00

Memo Item  
REDESIGNATION-EXCESS IN-KIND CONTRIBUTION FROM 2018 CONV. TO 2018 GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**JPMORGAN CHASE & CO. FEDERAL PAC**

Mailing Address 601 PENNSYLVANIA AVE NW  
FL 7

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20004-2601 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00104299

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼ CONVENTION

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 14 / 2017

**Transaction ID : AB26DDC38E8E9442C981**

Amount of Each Receipt this Period  
1000.00

Memo Item  
RECEIPT

**C.** Full Name (Last, First, Middle Initial)  
**TRUCKING PAC OF THE AMERICAN TRUCKING ASSOCIATIONS INC.**

Mailing Address 430 1ST ST SE

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20003-1826 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00002881

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼ CONVENTION

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 14 / 2017

**Transaction ID : A3E3BE175879F4FAD976**

Amount of Each Receipt this Period  
1000.00

Memo Item  
RECEIPT

|                                                                  |         |
|------------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 2000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

|                                                                         |                                     |                                                |                                                                |
|-------------------------------------------------------------------------|-------------------------------------|------------------------------------------------|----------------------------------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page |                                     | FOR LINE NUMBER: (check only one)              | PAGE 12 OF 44                                                  |
| <input type="checkbox"/> 11a<br>12                                      | <input type="checkbox"/> 11b<br>13a | <input checked="" type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1100 WILSON BLVD  
STE 1500

City ARLINGTON State VA Zip Code 22209-3900

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **3000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2017

Transaction ID : **A242B35D61B27486CBF2**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
RECEIPT

**B.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' PAC**

Mailing Address 2121 CRYSTAL DR  
STE 100

City ARLINGTON State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **4000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 28 / 2017

Transaction ID : **A4B94C286C1E34698A22**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
RECEIPT

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REALTORS PAC**

Mailing Address 430 N MICHIGAN AVE

City CHICAGO State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **1000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 15 / 2017

Transaction ID : **A600CA46D956740C5B45**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
RECEIPT

|                                                                   |                |
|-------------------------------------------------------------------|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶           | <b>3000.00</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶ |                |

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

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

FOR LINE NUMBER: PAGE 13 OF 44  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**EXXON MOBIL CORPORATION PAC (EXXONMOBIL PAC)**

Mailing Address PO BOX 20503

City INDIANAPOLIS State IN Zip Code 46220-0503

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2017

**Transaction ID : A480CB892F9C54FD7979**

Amount of Each Receipt this Period  
**1500.00**

Memo Item  
**RECEIPT**

**B.** Full Name (Last, First, Middle Initial)  
**RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1100 WILSON BLVD  
STE 1500

City ARLINGTON State VA Zip Code 22209-3900

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2017

**Transaction ID : A4C5C7E62665F4675BB5**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**RECEIPT**

**C.** Full Name (Last, First, Middle Initial)  
**RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1100 WILSON BLVD  
STE 1500

City ARLINGTON State VA Zip Code 22209-3900

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2017

**Transaction ID : A8DE5E26612DB4B81AC1**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**RECEIPT**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **3500.00**

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

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

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

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

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**UNISYS COPROATION EMPLOYEES PAC**

Mailing Address 11720 PLAZA AMERICA DR

City RESTON State VA Zip Code 20190-4757

FEC ID number of contributing federal political committee. **C** C00345603

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2017

**Transaction ID : AAE64E3F009194D77B76**

Amount of Each Receipt this Period  
 1000.00

Memo Item  
**RECEIPT**

**B.** Full Name (Last, First, Middle Initial)  
**1-800 CONTACTS, INC. PAC**

Mailing Address 261 W DATA DR

City DRAPER State UT Zip Code 84020-2372

FEC ID number of contributing federal political committee. **C** C00621912

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2017

**Transaction ID : AC67D27C05A6E41E1B86**

Amount of Each Receipt this Period  
 1000.00

Memo Item  
**RECEIPT**

**C.** Full Name (Last, First, Middle Initial)  
**CHEVRON EMPLOYEES PAC - CHEVRON CORPORATION**

Mailing Address PO BOX 6016

City SAN RAMON State CA Zip Code 94583-0716

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2017

**Transaction ID : AC90CCEA88A344C9E95A**

Amount of Each Receipt this Period  
 2500.00

Memo Item  
**RECEIPT**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4500.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 44  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)**

Mailing Address 2941 FAIRVIEW PARK DR  
STE 100

City FALLS CHURCH State VA Zip Code 22042-4541

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2017

Transaction ID : **AD0C8050F0D884C2998E**

Amount of Each Receipt this Period  
2500.00

Memo Item  
RECEIPT

**B.** Full Name (Last, First, Middle Initial)  
**L3 TECHNOLOGIES, INC. PAC**

Mailing Address 600 3RD AVE

City NEW YORK State NY Zip Code 10016-1901

FEC ID number of contributing federal political committee. **C** C00338087

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼ CONVENTION

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2017

Transaction ID : **AEDC41212A3AA4605B3B**

Amount of Each Receipt this Period  
1000.00

Memo Item  
RECEIPT

**C.** Full Name (Last, First, Middle Initial)  
**MILLERCOORS LLC PAC**

Mailing Address 1501 M ST NW  
STE 330

City WASHINGTON State DC Zip Code 20005-1701

FEC ID number of contributing federal political committee. **C** C00457697

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼ CONVENTION

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2017

Transaction ID : **A6A74CDB3FB264AF18EB**

Amount of Each Receipt this Period  
1000.00

Memo Item  
RECEIPT

**SUBTOTAL** of Receipts This Page (optional)..... ▶

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

4500.00

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

|                                                                         |                                    |                                     |                                                |                                    |
|-------------------------------------------------------------------------|------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  |                                     | PAGE 16 OF 44                                  |                                    |
|                                                                         | <input type="checkbox"/> 11a<br>12 | <input type="checkbox"/> 11b<br>13a | <input checked="" type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION PAC (SKINPAC)**

Mailing Address 1445 NEW YORK AVE NW  
STE 800

City WASHINGTON State DC Zip Code 20005-2125

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 09 / 2017

Transaction ID : **A5AE990997BB04EEEB73**

Amount of Each Receipt this Period  
1000.00

Memo Item  
RECEIPT

**B.** Full Name (Last, First, Middle Initial)  
**EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**

Mailing Address 2980 FAIRVIEW PARK DR

City FALLS CHURCH State VA Zip Code 22042-4511

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 09 / 2017

Transaction ID : **AD0721F72CD5844C38B0**

Amount of Each Receipt this Period  
2500.00

Memo Item  
RECEIPT

**C.** Full Name (Last, First, Middle Initial)  
**ALTRIA GROUP, INC. PAC (ALTRIAPAC)**

Mailing Address 101 CONSTITUTION AVE NW  
STE 400W

City WASHINGTON State DC Zip Code 20001-2155

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 12 / 2017

Transaction ID : **A6F7E70DA8A17401AA8C**

Amount of Each Receipt this Period  
1000.00

Memo Item  
RECEIPT

|                                                                  |         |
|------------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 4500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |



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

|                                                                         |                                    |                                     |                                                |                                    |
|-------------------------------------------------------------------------|------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  |                                     | PAGE 17 OF 44                                  |                                    |
|                                                                         | <input type="checkbox"/> 11a<br>12 | <input type="checkbox"/> 11b<br>13a | <input checked="" type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' PAC**

Mailing Address 2121 CRYSTAL DR  
STE 100

City ARLINGTON State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 12 / 2017

Transaction ID : **A9E94096F33F94321AFD**

Amount of Each Receipt this Period  
1000.00

Memo Item  
RECEIPT

**B.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' PAC**

Mailing Address 2121 CRYSTAL DR  
STE 100

City ARLINGTON State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 12 / 2017

Transaction ID : **ABD37D5EFE84E4B5D89E**

Amount of Each Receipt this Period  
1000.00

Memo Item  
RECEIPT

**C.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 929 LONG BRIDGE DR

City ARLINGTON State VA Zip Code 22202-4208

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼ CONVENTION

Election Cycle-to-Date ▼  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 12 / 2017

Transaction ID : **A4580B80AC5364227A00**

Amount of Each Receipt this Period  
500.00

Memo Item  
RECEIPT

|                                                                   |         |
|-------------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶           | 2500.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶ |         |

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

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

FOR LINE NUMBER: PAGE 18 OF 44  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 929 LONG BRIDGE DR

City ARLINGTON State VA Zip Code 22202-4208

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 12 / 2017

Transaction ID : **AAD202D42FFD445A68E7**

Amount of Each Receipt this Period  
1000.00

Memo Item  
RECEIPT

**B.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 929 LONG BRIDGE DR

City ARLINGTON State VA Zip Code 22202-4208

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 12 / 2017

Transaction ID : **A5F46F26E08A248D3B14**

Amount of Each Receipt this Period  
500.00

Memo Item  
RECEIPT

**C.** Full Name (Last, First, Middle Initial)  
**EDWARDS LIFESCIENCES PAC (EWPAC)**

Mailing Address ONE EDWARDS WAY

City IRVINE State CA Zip Code 92614

FEC ID number of contributing federal political committee. **C** C00411900

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 16 / 2017

Transaction ID : **AC0C815095BDF40B4947**

Amount of Each Receipt this Period  
2000.00

Memo Item  
RECEIPT

**SUBTOTAL** of Receipts This Page (optional)..... ▶

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

3500.00

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

|                                                                         |                                    |                                     |                                                |                                    |
|-------------------------------------------------------------------------|------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  |                                     | PAGE 19 OF 44                                  |                                    |
|                                                                         | <input type="checkbox"/> 11a<br>12 | <input type="checkbox"/> 11b<br>13a | <input checked="" type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL PORK PRODUCERS COUNCIL PORK PAC**

Mailing Address PO BOX 10383

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>DES MOINES | State<br>IA | Zip Code<br>50306-0383 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00201871

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2017

**Transaction ID : AC84B1467CC3848E4AC1**

Amount of Each Receipt this Period  
 1000.00

Memo Item  
**RECEIPT**

**B.** Full Name (Last, First, Middle Initial)  
**INTERNATIONAL ACADEMY OF COMPOUNDING PHARMACISTS PAC (COMP PAC)**

Mailing Address 4638 RIVERSTONE BLVD

|                       |             |                        |
|-----------------------|-------------|------------------------|
| City<br>MISSOURI CITY | State<br>TX | Zip Code<br>77459-6157 |
|-----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00424143

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018  
 Primary  General  
 Other (specify) **CONVENTION**

Election Cycle-to-Date **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2017

**Transaction ID : AB1784F4A323A4FB3AFB**

Amount of Each Receipt this Period  
 4000.00

Memo Item  
**RECEIPT**

**C.** Full Name (Last, First, Middle Initial)  
**ORBITAL ATK INC. LEGACY POLITICAL ACTION COMMITTEE**

Mailing Address 1300 WILSON BLVD  
STE 1100

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>ARLINGTON | State<br>VA | Zip Code<br>22209-2313 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00250209

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2017

**Transaction ID : AEE957443400342A48F5**

Amount of Each Receipt this Period  
 2000.00

Memo Item  
**RECEIPT**

|                                                                   |         |
|-------------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶           | 7000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶ |         |

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

|                                                                               |                                      |                                     |                                                |                                    |
|-------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one) |                                     | PAGE 20 OF 44                                  |                                    |
|                                                                               | <input type="checkbox"/> 11a<br>12   | <input type="checkbox"/> 11b<br>13a | <input checked="" type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**REYNOLDS AMERICAN INC. PAC; RAI PAC**

Mailing Address PO BOX 718

|                       |             |                        |
|-----------------------|-------------|------------------------|
| City<br>WINSTON SALEM | State<br>NC | Zip Code<br>27102-0718 |
|-----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00042002

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2017

**Transaction ID : AE50B4C6253214BAB9DF**

Amount of Each Receipt this Period  
2500.00

Memo Item  
RECEIPT

**B.** Full Name (Last, First, Middle Initial)  
**HEXCEL CORPORATION PAC**

Mailing Address 281 TRESSER BLVD

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>STAMFORD | State<br>CT | Zip Code<br>06901-3284 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00345173

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2017

**Transaction ID : A5087A97A3CF4494EB47**

Amount of Each Receipt this Period  
2500.00

Memo Item  
RECEIPT

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND**

Mailing Address 11250 WAPLES MILL RD

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>FAIRFAX | State<br>VA | Zip Code<br>22030 |
|-----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00053553

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2017

**Transaction ID : A5D2BBC1656144282ADB**

Amount of Each Receipt this Period  
1000.00

Memo Item  
RECEIPT

|                                                                  |         |
|------------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 6000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

|                                                                         |                                    |                                     |                                                |                                    |
|-------------------------------------------------------------------------|------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  |                                     | PAGE 21 OF 44                                  |                                    |
|                                                                         | <input type="checkbox"/> 11a<br>12 | <input type="checkbox"/> 11b<br>13a | <input checked="" type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MARATHON PETROLEUM CORPORATION EMPLOYEES PAC (MPAC)**

Mailing Address 539 S MAIN ST

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>FINDLAY | State<br>OH | Zip Code<br>45840-3229 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00496307

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2017

**Transaction ID : ABE69DEEB79E143628A7**

Amount of Each Receipt this Period  
1000.00

Memo Item  
**RECEIPT**

**B.** Full Name (Last, First, Middle Initial)  
**VISTA OUTDOOR INC. EMPLOYEE CITIZENSHIP FUND**

Mailing Address 4601 FAIRFAX DR  
STE 1200

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>ARLINGTON | State<br>VA | Zip Code<br>22203-1559 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00572156

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
76.01

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2017

**Transaction ID : A12672E839CE4452AA5A**

Amount of Each Receipt this Period  
76.01

Memo Item  
**IN-KIND:CAMPAIGN EVENT - SUPPLIES**

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL CAMPAIGN**

Mailing Address 1201 N ORANGE ST  
STE 700

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WILMINGTON | State<br>DE | Zip Code<br>19801-1186 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00563759

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼ **CONVENTION**

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 29 / 2017

**Transaction ID : ADDCF9FFE744C43C4871**

Amount of Each Receipt this Period  
500.00

Memo Item

|                                                                   |         |
|-------------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶           | 1576.01 |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶ |         |

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

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

FOR LINE NUMBER: PAGE 22 OF 44  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
CMS ENERGY CORPORATION EMPLOYEES FOR BETTER GOVERNMENT- FEDERAL

Mailing Address 1 ENERGY PLAZA DR  
EP8-220

City JACKSON State MI Zip Code 49201-2357

FEC ID number of contributing federal political committee. **C** C00075473

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2017

Transaction ID : **A33F6359C712B49DF8FD**

Amount of Each Receipt this Period  
2500.00

Memo Item  
RECEIPT

**B.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF JASON CHAFFETZ**

Mailing Address 315 WESTFIELD CIR

City ALPINE State UT Zip Code 84004-1594

FEC ID number of contributing federal political committee. **C** C00431684

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼ CONVENTION

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2017

Transaction ID : **A43932935DBE74A59947**

Amount of Each Receipt this Period  
2500.00

Memo Item  
IN-KIND:TRAILER

**C.** Full Name (Last, First, Middle Initial)  
**HARRIS CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 600 MARYLAND AVE SW  
STE 850E

City WASHINGTON State DC Zip Code 20024-2566

FEC ID number of contributing federal political committee. **C** C00100321

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2017

Transaction ID : **ADCAD17FA80D149F4AEB**

Amount of Each Receipt this Period  
1000.00

Memo Item  
RECEIPT

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00

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

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

|                                                                               |                                      |                                     |                                                |                                    |
|-------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one) |                                     | PAGE 23 OF 44                                  |                                    |
|                                                                               | <input type="checkbox"/> 11a<br>12   | <input type="checkbox"/> 11b<br>13a | <input checked="" type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**HUNTINGTON INGALLS INDUSTRIES, INC. PAC (SHIPAC)**

Mailing Address 300 M ST SE  
STE 350

City WASHINGTON State DC Zip Code 20003-3436

FEC ID number of contributing federal political committee. **C** C00325092

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : **ABE46D8B31B914E15974**

Amount of Each Receipt this Period  
1000.00

Memo Item  
RECEIPT

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL SHOOTING SPORTS FOUNDATION, INC. POLITICAL ACTION COMMITTEE (NSSF PAC)**

Mailing Address 400 N CAPITOL ST NW  
STE 490

City WASHINGTON State DC Zip Code 20001-6509

FEC ID number of contributing federal political committee. **C** C00480863

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : **ADC3118CB3C6349C5A82**

Amount of Each Receipt this Period  
1000.00

Memo Item  
RECEIPT

**C.** Full Name (Last, First, Middle Initial)  
**TESORO PETROLEUM CORPORATION PAC**

Mailing Address 19100 RIDGEWOOD PKWY

City SAN ANTONIO State TX Zip Code 78259-1834

FEC ID number of contributing federal political committee. **C** C00358366

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼ CONVENTION

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : **AD7146D1972EB40E0B69**

Amount of Each Receipt this Period  
2500.00

Memo Item  
RECEIPT

|                                                                  |         |
|------------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 4500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

|                                      |                                     |                                                |                                    |
|--------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------|
| FOR LINE NUMBER:<br>(check only one) |                                     | PAGE 24 OF 44                                  |                                    |
| <input type="checkbox"/> 11a<br>12   | <input type="checkbox"/> 11b<br>13a | <input checked="" type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |
|                                      |                                     | <input type="checkbox"/> 15                    |                                    |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**VMWARE, INC. PAC (VMWARE PAC)**

Mailing Address 3401 HILLVIEW AVE

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>PALO ALTO | State<br>CA | Zip Code<br>94304-1320 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00477299

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼ **CONVENTION**

Election Cycle-to-Date ▼

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  | / | 30  | / | 2017    |

**Transaction ID : A29F1992C295B43CFBE1**

Amount of Each Receipt this Period  

|         |
|---------|
| 1000.00 |
|---------|

Memo Item  
RECEIPT

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

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period  

|  |
|--|
|  |
|--|

Memo Item

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

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period  

|  |
|--|
|  |
|--|

Memo Item

|                                                                  |          |
|------------------------------------------------------------------|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 1000.00  |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 54076.01 |



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                               |                                               |                                    |                                     |                                    |  |
|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 25 OF 44                      |                                     |                                    |  |
|                                                                               | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                               |                                               |                                                               |  |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ARI'S DINER</b>                                                          |                                                                                                                                                               |                                               | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 04 / 2017 |  |  |
| Mailing Address 212 7TH ST SE                                                                                             |                                                                                                                                                               |                                               | FEC Identification Number<br>C                                |  |  |
| City<br>WASHINGTON                                                                                                        | State<br>DC                                                                                                                                                   | Zip Code<br>20003-4311                        | Amount of Each Disbursement this Period<br>496.55             |  |  |
| Purpose of Disbursement<br>FUNDRAISING EVENT - CATERING                                                                   |                                                                                                                                                               | Category/<br>Type<br>003                      | Transaction ID : BD374247C3EE24E4C9A1                         |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input checked="" type="checkbox"/> |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                               |                                                               |  |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                               |                                                               |  |  |

|                                                                                                                           |                                                                                                                                                               |                                               |                                                               |  |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DC TASTE</b>                                                             |                                                                                                                                                               |                                               | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 11 / 2017 |  |  |
| Mailing Address 1600 FITZGERALD LANE                                                                                      |                                                                                                                                                               |                                               | FEC Identification Number<br>C                                |  |  |
| City<br>ALEXANDRIA                                                                                                        | State<br>VA                                                                                                                                                   | Zip Code<br>22302-2004                        | Amount of Each Disbursement this Period<br>394.85             |  |  |
| Purpose of Disbursement<br>FUNDRAISING EVENT - CATERINGT                                                                  |                                                                                                                                                               | Category/<br>Type                             | Transaction ID : B35DC913D16114BC4ACE                         |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input checked="" type="checkbox"/> |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                               |                                                               |  |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                               |                                                               |  |  |

|                                                                                                                                      |                                                                                                                                                               |                                               |                                                               |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. FRIENDS OF JASON CHAFFETZ</b>                                                       |                                                                                                                                                               |                                               | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2017 |  |  |
| Mailing Address 315 WESTFIELD CIR                                                                                                    |                                                                                                                                                               |                                               | FEC Identification Number<br>C C00431684                      |  |  |
| City<br>ALPINE                                                                                                                       | State<br>UT                                                                                                                                                   | Zip Code<br>84004-1594                        | Amount of Each Disbursement this Period<br>500.00             |  |  |
| Purpose of Disbursement<br>REDESIGNATION OF EXCESS IN-KIND CONTRIBUTION FROM 2018<br>CONVENTION TO 2018 GENERAL ELECTION             |                                                                                                                                                               | Category/<br>Type                             | Transaction ID : B5BAD8B70321C4EC4A8B                         |  |  |
| Candidate Name<br>CHAFFETZ, JASON, , ,                                                                                               |                                                                                                                                                               | Memo Item <input checked="" type="checkbox"/> |                                                               |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                               |                                                               |  |  |
| State: UT District: 03                                                                                                               |                                                                                                                                                               |                                               |                                                               |  |  |

|                                                                 |      |
|-----------------------------------------------------------------|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                               |                                               |                                    |                                     |                                    |
|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 26 OF 44                       |                                    |
|                                                                               | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                                      |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BEEHIVE STORAGE</b>                                                      |                                                                                                                                                                      |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 03 / 2017 |  |
| Mailing Address 12519 MINUTEMAN DR,                                                                                       |                                                                                                                                                                      |                                    | FEC Identification Number<br>C                                |  |
| City<br>DRAPER                                                                                                            | State<br>UT                                                                                                                                                          | Zip Code<br>84020-9541             | Amount of Each Disbursement this Period<br>159.00             |  |
| Purpose of Disbursement<br>STORAGE FEE                                                                                    |                                                                                                                                                                      | Category/<br>Type<br>001           | Transaction ID : <b>BB33276262C1944CBB7B</b>                  |  |
| Candidate Name                                                                                                            |                                                                                                                                                                      | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>CONVENTION</b> |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                                      |                                    |                                                               |  |

|                                                                                                                           |                                                                                                                                                                      |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MARKET STREET GRILL</b>                                                  |                                                                                                                                                                      |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 03 / 2017 |  |
| Mailing Address 48 W MARKET ST.                                                                                           |                                                                                                                                                                      |                                    | FEC Identification Number<br>C                                |  |
| City<br>SALT LAKE CITY                                                                                                    | State<br>UT                                                                                                                                                          | Zip Code<br>84101                  | Amount of Each Disbursement this Period<br>101.71             |  |
| Purpose of Disbursement<br>DINNER EXPENSE                                                                                 |                                                                                                                                                                      | Category/<br>Type<br>007           | Transaction ID : <b>BA870BF1F31694332B7E</b>                  |  |
| Candidate Name                                                                                                            |                                                                                                                                                                      | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>CONVENTION</b> |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                                      |                                    |                                                               |  |

|                                                                                                                           |                                                                                                                                                                      |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DAVIS COUNTY REPUBLICAN PARTY</b>                                        |                                                                                                                                                                      |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 07 / 2017 |  |
| Mailing Address 4334 W 1700 S                                                                                             |                                                                                                                                                                      |                                    | FEC Identification Number<br>C                                |  |
| City<br>SYRACUSE                                                                                                          | State<br>UT                                                                                                                                                          | Zip Code<br>84075                  | Amount of Each Disbursement this Period<br>200.00             |  |
| Purpose of Disbursement<br>CONVENTION FEE                                                                                 |                                                                                                                                                                      | Category/<br>Type<br>007           | Transaction ID : <b>B32FF07F82CB14B018CB</b>                  |  |
| Candidate Name<br><b>DAVIS COUNTY REPUBLICAN PARTY</b>                                                                    |                                                                                                                                                                      | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>CONVENTION</b> |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                                      |                                    |                                                               |  |

|                                                                 |   |        |
|-----------------------------------------------------------------|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | ▶ | 460.71 |
| <b>TOTAL</b> This Period (last page this line number only)..... | ▶ |        |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                               |                                               |                                    |                                     |                                    |
|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 27 OF 44                       |                                    |
|                                                                               | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ARISTOTLE</b>                                                            |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 10 / 2017 |  |
| Mailing Address 205 PENNSYLVANIA AVE. SE                                                                                  |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>WASHINGTON                                                                                                        | State<br>DC                                                                                                                                                   | Zip Code<br>20003                  | Amount of Each Disbursement this Period<br>2700.00            |  |
| Purpose of Disbursement<br>SAAS FEE                                                                                       |                                                                                                                                                               | Category/<br>Type<br>003           | Transaction ID : B5DDB762DA7F142378F5                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. VERIZON WIRELESS</b>                                                     |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 13 / 2017 |  |
| Mailing Address PO BOX 5029                                                                                               |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>WALLINGFORD                                                                                                       | State<br>CT                                                                                                                                                   | Zip Code<br>06492-7529             | Amount of Each Disbursement this Period<br>248.16             |  |
| Purpose of Disbursement<br>PHONE EXPENSE                                                                                  |                                                                                                                                                               | Category/<br>Type<br>001           | Transaction ID : B1BD9469F822F40D4B97                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

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|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DELTA AIRLINES</b>                                                       |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 17 / 2017 |  |
| Mailing Address 1030 DELTA BLVD                                                                                           |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>ATLANTA                                                                                                           | State<br>GA                                                                                                                                                   | Zip Code<br>30354                  | Amount of Each Disbursement this Period<br>966.40             |  |
| Purpose of Disbursement<br>TRAVEL - AIRFARE                                                                               |                                                                                                                                                               | Category/<br>Type<br>002           | Transaction ID : B8C2CB0B38CF94355834                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

|                                                                 |         |
|-----------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3914.56 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                         |                                               |                                    |                                     |                                    |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 28 OF 44                       |                                    |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                               |                          |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ACUMEN, DARYL, , ,</b>                                                   |                                                                                                                                                               |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 18 / 2017 |  |
| Mailing Address 15152 BRIAR CREST COURT                                                                                   |                                                                                                                                                               |                          | FEC Identification Number<br>C                                |  |
| City<br>DRAPER                                                                                                            | State<br>UT                                                                                                                                                   | Zip Code<br>84020        | Amount of Each Disbursement this Period<br>349.50             |  |
| Purpose of Disbursement<br>POLITICAL DATA CONSULTING                                                                      |                                                                                                                                                               | Category/<br>Type<br>001 | Transaction ID : B630E6944CA454327933                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               |                          | <input type="checkbox"/> Memo Item                            |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                          |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                          |                                                               |  |

|                                                                                                                           |                                                                                                                                                               |                          |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CAPITOL HILL CLUB</b>                                                    |                                                                                                                                                               |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 19 / 2017 |  |
| Mailing Address 300 1ST STREET SOUTH EAST                                                                                 |                                                                                                                                                               |                          | FEC Identification Number<br>C                                |  |
| City<br>WASHINGTON                                                                                                        | State<br>DC                                                                                                                                                   | Zip Code<br>20003        | Amount of Each Disbursement this Period<br>238.80             |  |
| Purpose of Disbursement<br>CLUB DUES                                                                                      |                                                                                                                                                               | Category/<br>Type<br>007 | Transaction ID : B20B52928D43D4E8E876                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               |                          | <input type="checkbox"/> Memo Item                            |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                          |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                          |                                                               |  |

|                                                                                                                           |                                                                                                                                                               |                          |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CHEVRON</b>                                                              |                                                                                                                                                               |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 20 / 2017 |  |
| Mailing Address 6001 BOLLINGER CANYON RD<br>HEADQUARTERS                                                                  |                                                                                                                                                               |                          | FEC Identification Number<br>C                                |  |
| City<br>SAN RAMON                                                                                                         | State<br>CA                                                                                                                                                   | Zip Code<br>94583        | Amount of Each Disbursement this Period<br>58.03              |  |
| Purpose of Disbursement<br>TRAVEL- FUEL                                                                                   |                                                                                                                                                               | Category/<br>Type<br>002 | Transaction ID : B0B65C8E710784ECF98B                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               |                          | <input type="checkbox"/> Memo Item                            |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                          |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                          |                                                               |  |

|                                                                  |        |
|------------------------------------------------------------------|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 646.33 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                         |                                               |                                    |                                     |                                    |  |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 29 OF 44                      |                                     |                                    |  |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                                      |                                    |                                                               |  |  |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. SPEAK BY DESIGN</b>                                                      |                                                                                                                                                                      |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 25 / 2017 |  |  |
| Mailing Address 1654 W 525 N                                                                                              |                                                                                                                                                                      |                                    | FEC Identification Number<br>C                                |  |  |
| City<br>WEST POINT                                                                                                        | State<br>UT                                                                                                                                                          | Zip Code<br>84015                  | Amount of Each Disbursement this Period<br>42.23              |  |  |
| Purpose of Disbursement<br>PRINTING AND MAILING                                                                           |                                                                                                                                                                      | Category/<br>Type<br>004           | Transaction ID : B026F36CF29E040D3B75                         |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                                      | Memo Item <input type="checkbox"/> |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>CONVENTION</b> |                                    |                                                               |  |  |
| State: District:                                                                                                          |                                                                                                                                                                      |                                    |                                                               |  |  |

|                                                                                                                           |                                                                                                                                                                      |                                    |                                                               |  |  |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. SPEAK BY DESIGN</b>                                                      |                                                                                                                                                                      |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 25 / 2017 |  |  |
| Mailing Address 1654 W 525 N                                                                                              |                                                                                                                                                                      |                                    | FEC Identification Number<br>C                                |  |  |
| City<br>WEST POINT                                                                                                        | State<br>UT                                                                                                                                                          | Zip Code<br>84015                  | Amount of Each Disbursement this Period<br>423.63             |  |  |
| Purpose of Disbursement<br>PRINTING AND MAILING                                                                           |                                                                                                                                                                      | Category/<br>Type<br>004           | Transaction ID : B6A19E20D53264347B91                         |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                                      | Memo Item <input type="checkbox"/> |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>CONVENTION</b> |                                    |                                                               |  |  |
| State: District:                                                                                                          |                                                                                                                                                                      |                                    |                                                               |  |  |

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|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DELTA AIRLINES</b>                                                       |                                                                                                                                                                      |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 26 / 2017 |  |  |
| Mailing Address 1030 DELTA BLVD                                                                                           |                                                                                                                                                                      |                                    | FEC Identification Number<br>C                                |  |  |
| City<br>ATLANTA                                                                                                           | State<br>GA                                                                                                                                                          | Zip Code<br>30354                  | Amount of Each Disbursement this Period<br>312.00             |  |  |
| Purpose of Disbursement<br>TRAVEL - AIRFARE                                                                               |                                                                                                                                                                      | Category/<br>Type<br>002           | Transaction ID : BE80F0FC5499C47CE9EA                         |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                                      | Memo Item <input type="checkbox"/> |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>CONVENTION</b> |                                    |                                                               |  |  |
| State: District:                                                                                                          |                                                                                                                                                                      |                                    |                                                               |  |  |

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|------------------------------------------------------------------|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 777.86 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                               |                                               |                                    |                                     |                                    |
|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 30 OF 44                       |                                    |
|                                                                               | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. UTAH REPUBLICAN PARTY</b>                                                |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 27 / 2017 |  |
| Mailing Address 117 EAST SOUTH TEMPLE                                                                                     |                                                                                                                                                               |                                    | FEC Identification Number<br>C C00089482                      |  |
| City<br>SALT LAKE CITY                                                                                                    | State<br>UT                                                                                                                                                   | Zip Code<br>84111                  | Amount of Each Disbursement this Period<br>450.00             |  |
| Purpose of Disbursement<br>STATE CONVENTION FEE                                                                           |                                                                                                                                                               | Category/<br>Type                  | Transaction ID : B583C8A1D3D994A22912                         |  |
| Candidate Name<br>UTAH REPUBLICAN PARTY                                                                                   |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ALTICOR</b>                                                              |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 28 / 2017 |  |
| Mailing Address 429 NEW JERSEY AVE SE                                                                                     |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>WASHINGTON                                                                                                        | State<br>DC                                                                                                                                                   | Zip Code<br>20003-4034             | Amount of Each Disbursement this Period<br>200.00             |  |
| Purpose of Disbursement<br>RECEPTION FEE                                                                                  |                                                                                                                                                               | Category/<br>Type                  | Transaction ID : BCF647EC6F66C47E4880                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

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|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CHEVRON</b>                                                              |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 01 / 2017 |  |
| Mailing Address 6001 BOLLINGER CANYON RD<br>HEADQUARTERS                                                                  |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>SAN RAMON                                                                                                         | State<br>CA                                                                                                                                                   | Zip Code<br>94583                  | Amount of Each Disbursement this Period<br>30.62              |  |
| Purpose of Disbursement<br>TRAVEL- FUEL                                                                                   |                                                                                                                                                               | Category/<br>Type<br>002           | Transaction ID : BA79A455564D54758A76                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 680.62 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                               |                                               |                                    |                                     |                                    |
|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 31 OF 44                       |                                    |
|                                                                               | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                                      |                                                               |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. VERIZON WIRELESS</b>                                                     |                                                                                                                                                                      | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 01 / 2017 |
| Mailing Address PO BOX 5029                                                                                               |                                                                                                                                                                      | FEC Identification Number<br>C                                |
| City<br>WALLINGFORD                                                                                                       | State<br>CT                                                                                                                                                          | Zip Code<br>06492-7529                                        |
| Purpose of Disbursement<br>PHONE EXPENSE                                                                                  | Category/<br>Type<br>001                                                                                                                                             |                                                               |
| Candidate Name                                                                                                            |                                                                                                                                                                      | Amount of Each Disbursement this Period<br>19.99              |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>CONVENTION</b> | Transaction ID : <b>BD3B410EBA6134C038F8</b>                  |
| State: District:                                                                                                          | <input type="checkbox"/> Memo Item                                                                                                                                   |                                                               |

|                                                                                                                           |                                                                                                                                                                      |                                                               |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. PHILLIPS, TODD, , ,</b>                                                  |                                                                                                                                                                      | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 02 / 2017 |
| Mailing Address                                                                                                           |                                                                                                                                                                      | FEC Identification Number<br>C                                |
| City                                                                                                                      | State                                                                                                                                                                | Zip Code                                                      |
| Purpose of Disbursement<br>TRAVEL REIMBURSEMENT - AIRFARE                                                                 | Category/<br>Type                                                                                                                                                    |                                                               |
| Candidate Name                                                                                                            |                                                                                                                                                                      | Amount of Each Disbursement this Period<br>804.31             |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>CONVENTION</b> | Transaction ID : <b>BECBAACF4A96C4559979</b>                  |
| State: District:                                                                                                          | <input type="checkbox"/> Memo Item                                                                                                                                   |                                                               |

|                                                                                                                           |                                                                                                                                                                      |                                                               |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. ACUMEN, DARYL, , ,</b>                                                   |                                                                                                                                                                      | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 03 / 2017 |
| Mailing Address 15152 BRIAR CREST COURT                                                                                   |                                                                                                                                                                      | FEC Identification Number<br>C                                |
| City<br>DRAPER                                                                                                            | State<br>UT                                                                                                                                                          | Zip Code<br>84020                                             |
| Purpose of Disbursement<br>POLITICAL DATA CONSULTING                                                                      | Category/<br>Type<br>001                                                                                                                                             |                                                               |
| Candidate Name                                                                                                            |                                                                                                                                                                      | Amount of Each Disbursement this Period<br>349.50             |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>CONVENTION</b> | Transaction ID : <b>BD1E813FA0372482EA37</b>                  |
| State: District:                                                                                                          | <input type="checkbox"/> Memo Item                                                                                                                                   |                                                               |

|                                                                  |         |
|------------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 1173.80 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                         |                                                                                                                                                         |               |  |  |  |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)                                                                                                                    | PAGE 32 OF 44 |  |  |  |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                        |                                                                                                                                                                      |                                              |                                                               |  |  |
|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BEEHIVE STORAGE</b>                                                   |                                                                                                                                                                      |                                              | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 03 / 2017 |  |  |
| Mailing Address 12519 MINUTEMAN DR,                                                                                    |                                                                                                                                                                      |                                              |                                                               |  |  |
| City<br>DRAPER                                                                                                         | State<br>UT                                                                                                                                                          | Zip Code<br>84020-9541                       | FEC Identification Number<br>C                                |  |  |
| Purpose of Disbursement<br>STORAGE FEE                                                                                 |                                                                                                                                                                      | Category/<br>Type<br>001                     | Amount of Each Disbursement this Period<br>159.00             |  |  |
| Candidate Name                                                                                                         |                                                                                                                                                                      | Transaction ID : <b>BD51ECD2405094641A84</b> |                                                               |  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>CONVENTION</b> |                                              | <input type="checkbox"/> Memo Item                            |  |  |
| State:                                                                                                                 | District:                                                                                                                                                            |                                              |                                                               |  |  |

|                                                                                                                        |                                                                                                                                                                      |                                              |                                                               |  |  |
|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JWN ENTERPRISES</b>                                                   |                                                                                                                                                                      |                                              | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 03 / 2017 |  |  |
| Mailing Address 450 LIPIZZAN LANE                                                                                      |                                                                                                                                                                      |                                              |                                                               |  |  |
| City<br>CELINA                                                                                                         | State<br>TX                                                                                                                                                          | Zip Code<br>75009-4657                       | FEC Identification Number<br>C                                |  |  |
| Purpose of Disbursement<br>CAMPAIGN STRATEGY CONSULTING                                                                |                                                                                                                                                                      | Category/<br>Type<br>001                     | Amount of Each Disbursement this Period<br>4000.00            |  |  |
| Candidate Name                                                                                                         |                                                                                                                                                                      | Transaction ID : <b>B60BE4EA9183743EA8E4</b> |                                                               |  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>CONVENTION</b> |                                              | <input type="checkbox"/> Memo Item                            |  |  |
| State:                                                                                                                 | District:                                                                                                                                                            |                                              |                                                               |  |  |

|                                                                                                                        |                                                                                                                                                                      |                                             |                                                               |  |  |
|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JWN ENTERPRISES</b>                                                   |                                                                                                                                                                      |                                             | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 03 / 2017 |  |  |
| Mailing Address 450 LIPIZZAN LANE                                                                                      |                                                                                                                                                                      |                                             |                                                               |  |  |
| City<br>CELINA                                                                                                         | State<br>TX                                                                                                                                                          | Zip Code<br>75009-4657                      | FEC Identification Number<br>C                                |  |  |
| Purpose of Disbursement<br>FUNDRAISING CONSULTING                                                                      |                                                                                                                                                                      | Category/<br>Type<br>001                    | Amount of Each Disbursement this Period<br>750.00             |  |  |
| Candidate Name                                                                                                         |                                                                                                                                                                      | Transaction ID : <b>BEAAE5E74EF874EFAFF</b> |                                                               |  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>CONVENTION</b> |                                             | <input type="checkbox"/> Memo Item                            |  |  |
| State:                                                                                                                 | District:                                                                                                                                                            |                                             |                                                               |  |  |

|                                                                 |         |
|-----------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4909.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                         |                                                                                                                                                         |               |  |  |  |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)                                                                                                                    | PAGE 33 OF 44 |  |  |  |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                                      |                          |                                                               |  |  |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. JWN ENTERPRISES</b>                                                      |                                                                                                                                                                      |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 03 / 2017 |  |  |
| Mailing Address 450 LIPIZZAN LANE                                                                                         |                                                                                                                                                                      |                          |                                                               |  |  |
| City<br>CELINA                                                                                                            | State<br>TX                                                                                                                                                          | Zip Code<br>75009-4657   | FEC Identification Number<br>C                                |  |  |
| Purpose of Disbursement<br>ACCOUNTING AND COMPLIANCE CONSULTING                                                           |                                                                                                                                                                      | Category/<br>Type<br>001 | Amount of Each Disbursement this Period<br>2250.00            |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                                      |                          |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>CONVENTION</b> |                          | Transaction ID : B3F68704CBB8A4C4E9CE                         |  |  |
| State: District:                                                                                                          | <input type="checkbox"/> Memo Item                                                                                                                                   |                          |                                                               |  |  |

|                                                                                                                           |                                                                                                                                                                      |                          |                                                               |  |  |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. COSTCO WHOLESALE</b>                                                     |                                                                                                                                                                      |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 04 / 2017 |  |  |
| Mailing Address 999 LAKE DR.<br>HEADQUARTERS                                                                              |                                                                                                                                                                      |                          |                                                               |  |  |
| City<br>ISSAQUAH                                                                                                          | State<br>WA                                                                                                                                                          | Zip Code<br>98027        | FEC Identification Number<br>C                                |  |  |
| Purpose of Disbursement<br>TRAVEL - FUEL                                                                                  |                                                                                                                                                                      | Category/<br>Type<br>007 | Amount of Each Disbursement this Period<br>23.12              |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                                      |                          |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>CONVENTION</b> |                          | Transaction ID : B9451930680634EA8BC0                         |  |  |
| State: District:                                                                                                          | <input type="checkbox"/> Memo Item                                                                                                                                   |                          |                                                               |  |  |

|                                                                                                                           |                                                                                                                                                                      |                          |                                                               |  |  |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DELTA AIRLINES</b>                                                       |                                                                                                                                                                      |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 08 / 2017 |  |  |
| Mailing Address 1030 DELTA BLVD                                                                                           |                                                                                                                                                                      |                          |                                                               |  |  |
| City<br>ATLANTA                                                                                                           | State<br>GA                                                                                                                                                          | Zip Code<br>30354        | FEC Identification Number<br>C                                |  |  |
| Purpose of Disbursement<br>TRAVEL - AIRFARE                                                                               |                                                                                                                                                                      | Category/<br>Type<br>002 | Amount of Each Disbursement this Period<br>348.00             |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                                      |                          |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>CONVENTION</b> |                          | Transaction ID : BA1B2DB05F16A49D4941                         |  |  |
| State: District:                                                                                                          | <input type="checkbox"/> Memo Item                                                                                                                                   |                          |                                                               |  |  |

|                                                                 |         |
|-----------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2621.12 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                               |                                               |                                    |                                     |                                    |  |
|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 34 OF 44                      |                                     |                                    |  |
|                                                                               | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CHEVRON</b>                                                              |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 10 / 2017 |  |  |
| Mailing Address 6001 BOLLINGER CANYON RD<br>HEADQUARTERS                                                                  |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |  |
| City<br>SAN RAMON                                                                                                         | State<br>CA                                                                                                                                                   | Zip Code<br>94583                  | Amount of Each Disbursement this Period<br>51.70              |  |  |
| Purpose of Disbursement<br>TRAVEL- FUEL                                                                                   |                                                                                                                                                               | Category/<br>Type<br>002           | Transaction ID : B7C3BFA5AD4294FB7B0D                         |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |  |

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. VERIZON WIRELESS</b>                                                     |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 12 / 2017 |  |  |
| Mailing Address PO BOX 5029                                                                                               |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |  |
| City<br>WALLINGFORD                                                                                                       | State<br>CT                                                                                                                                                   | Zip Code<br>06492-7529             | Amount of Each Disbursement this Period<br>561.64             |  |  |
| Purpose of Disbursement<br>PHONE EXPENSE                                                                                  |                                                                                                                                                               | Category/<br>Type<br>001           | Transaction ID : B374DDE31A9C049D8A59                         |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |  |

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|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DISTRICT CITY CONSULTING</b>                                             |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 15 / 2017 |  |  |
| Mailing Address 1217 DELAFIELD PLACE NW                                                                                   |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |  |
| City<br>WASHINGTON                                                                                                        | State<br>DC                                                                                                                                                   | Zip Code<br>20011                  | Amount of Each Disbursement this Period<br>1018.48            |  |  |
| Purpose of Disbursement<br>REIMBURSEMENT - FUNDRAISING EVENTS                                                             |                                                                                                                                                               | Category/<br>Type<br>003           | Transaction ID : BDC005E5FDA5E4AA797F                         |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |  |

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|------------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 1631.82 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                         |                                               |                                    |                                     |                                    |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 35 OF 44                       |                                    |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DISTRICT CITY CONSULTING</b>                                             |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 15 / 2017 |  |
| Mailing Address 1217 DELAFIELD PLACE NW                                                                                   |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>WASHINGTON                                                                                                        | State<br>DC                                                                                                                                                   | Zip Code<br>20011                  | Amount of Each Disbursement this Period<br>4825.00            |  |
| Purpose of Disbursement<br>FUNDRAISING CONSULTING                                                                         |                                                                                                                                                               | Category/<br>Type<br>003           | Transaction ID : B13388B7175264B86815                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

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|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JWN ENTERPRISES</b>                                                      |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 15 / 2017 |  |
| Mailing Address 450 LIPIZZAN LANE                                                                                         |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>CELINA                                                                                                            | State<br>TX                                                                                                                                                   | Zip Code<br>75009-4657             | Amount of Each Disbursement this Period<br>526.98             |  |
| Purpose of Disbursement<br>REIMBURSEMENT - TRAVEL                                                                         |                                                                                                                                                               | Category/<br>Type<br>001           | Transaction ID : B5AD9412D05434A3EA76                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

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|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ACUMEN, DARYL, , ,</b>                                                   |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 16 / 2017 |  |
| Mailing Address 15152 BRIAR CREST COURT                                                                                   |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>DRAPER                                                                                                            | State<br>UT                                                                                                                                                   | Zip Code<br>84020                  | Amount of Each Disbursement this Period<br>200.00             |  |
| Purpose of Disbursement<br>POLITICAL DATA CONSULTING                                                                      |                                                                                                                                                               | Category/<br>Type<br>001           | Transaction ID : B22BFEE14D62446C89D4                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 5551.98 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                               |                                               |                                    |                                     |                                    |
|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 36 OF 44                       |                                    |
|                                                                               | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CAPITOL HILL CLUB</b>                                                    |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 17 / 2017 |  |
| Mailing Address 300 1ST STREET SOUTH EAST                                                                                 |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>WASHINGTON                                                                                                        | State<br>DC                                                                                                                                                   | Zip Code<br>20003                  | Amount of Each Disbursement this Period<br>4.23               |  |
| Purpose of Disbursement<br>CLUB MEAL                                                                                      |                                                                                                                                                               | Category/<br>Type<br>007           | Transaction ID : B28C7CA73D4444009CD                          |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

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|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ACUMEN, DARYL, , ,</b>                                                   |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 22 / 2017 |  |
| Mailing Address 15152 BRIAR CREST COURT                                                                                   |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>DRAPER                                                                                                            | State<br>UT                                                                                                                                                   | Zip Code<br>84020                  | Amount of Each Disbursement this Period<br>200.00             |  |
| Purpose of Disbursement<br>POLITICAL DATA CONSULTING                                                                      |                                                                                                                                                               | Category/<br>Type<br>001           | Transaction ID : B4079F0FC3564433A938                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

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|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CHEVRON</b>                                                              |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 23 / 2017 |  |
| Mailing Address 6001 BOLLINGER CANYON RD<br>HEADQUARTERS                                                                  |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>SAN RAMON                                                                                                         | State<br>CA                                                                                                                                                   | Zip Code<br>94583                  | Amount of Each Disbursement this Period<br>49.82              |  |
| Purpose of Disbursement<br>TRAVEL- FUEL                                                                                   |                                                                                                                                                               | Category/<br>Type<br>002           | Transaction ID : B2F91AFDA34194400BF7                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

|                                                                  |        |
|------------------------------------------------------------------|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 254.05 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                         |                                               |                                    |                                     |                                    |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 37 OF 44                       |                                    |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ARISTOTLE</b>                                                            |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 24 / 2017 |  |
| Mailing Address 205 PENNSYLVANIA AVE. SE                                                                                  |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>WASHINGTON                                                                                                        | State<br>DC                                                                                                                                                   | Zip Code<br>20003                  | Amount of Each Disbursement this Period<br>900.00             |  |
| Purpose of Disbursement<br>SAAS FEE                                                                                       |                                                                                                                                                               | Category/<br>Type<br>003           | Transaction ID : B0B8924EBC5B54517B3B                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DISTRICT CITY CONSULTING</b>                                             |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 26 / 2017 |  |
| Mailing Address 1217 DELAFIELD PLACE NW                                                                                   |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>WASHINGTON                                                                                                        | State<br>DC                                                                                                                                                   | Zip Code<br>20011                  | Amount of Each Disbursement this Period<br>843.59             |  |
| Purpose of Disbursement<br>REIMBURSEMENT - FUNDRAISING EVENTS                                                             |                                                                                                                                                               | Category/<br>Type<br>003           | Transaction ID : B6C1229DE3CE24091BA0                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DISTRICT CITY CONSULTING</b>                                             |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 26 / 2017 |  |
| Mailing Address 1217 DELAFIELD PLACE NW                                                                                   |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>WASHINGTON                                                                                                        | State<br>DC                                                                                                                                                   | Zip Code<br>20011                  | Amount of Each Disbursement this Period<br>1125.00            |  |
| Purpose of Disbursement<br>REIMBURSEMENTS - FUNDRAISING EVENTS                                                            |                                                                                                                                                               | Category/<br>Type<br>003           | Transaction ID : B623A2D891099489890A                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

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|------------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 2868.59 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                               |                                               |                                    |                                     |                                    |
|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 38 OF 44                       |                                    |
|                                                                               | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DELTA AIRLINES</b>                                                       |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 30 / 2017 |  |
| Mailing Address 1030 DELTA BLVD                                                                                           |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City ATLANTA                                                                                                              | State GA                                                                                                                                                      | Zip Code 30354                     | Amount of Each Disbursement this Period<br>342.00             |  |
| Purpose of Disbursement<br>TRAVEL - AIRFARE                                                                               |                                                                                                                                                               | Category/Type<br>002               | Transaction ID : BDFB53AD1BF344E08A7F                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. JWN ENTERPRISES</b>                                                      |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 31 / 2017 |  |
| Mailing Address 450 LIPIZZAN LANE                                                                                         |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City CELINA                                                                                                               | State TX                                                                                                                                                      | Zip Code 75009-4657                | Amount of Each Disbursement this Period<br>2250.00            |  |
| Purpose of Disbursement<br>ACCOUNTING AND COMPLIANCE CONSULTING                                                           |                                                                                                                                                               | Category/Type<br>001               | Transaction ID : BEEA41542C98D4DE184B                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JWN ENTERPRISES</b>                                                      |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 31 / 2017 |  |
| Mailing Address 450 LIPIZZAN LANE                                                                                         |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City CELINA                                                                                                               | State TX                                                                                                                                                      | Zip Code 75009-4657                | Amount of Each Disbursement this Period<br>300.00             |  |
| Purpose of Disbursement<br>REIMBURSEMENT - MILEAGE                                                                        |                                                                                                                                                               | Category/Type<br>001               | Transaction ID : B52A87039C56C44F4B83                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

|                                                                  |         |
|------------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 2892.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                               |                                               |                                    |                                     |                                    |  |
|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 39 OF 44                      |                                     |                                    |  |
|                                                                               | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. JWN ENTERPRISES</b>                                                      |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 31 / 2017 |  |  |
| Mailing Address 450 LIPIZZAN LANE                                                                                         |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |  |
| City<br>CELINA                                                                                                            | State<br>TX                                                                                                                                                   | Zip Code<br>75009-4657             | Amount of Each Disbursement this Period<br>3000.00            |  |  |
| Purpose of Disbursement<br>CAMPAIGN STRATEGY CONSULTING                                                                   |                                                                                                                                                               | Category/<br>Type<br>001           | Transaction ID : B0E1A7B176AF14FC28F9                         |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |  |

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. QUINTANA, CINDIE, , ,</b>                                                |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 31 / 2017 |  |  |
| Mailing Address 11412 AUTUMN HILL DRIVE                                                                                   |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |  |
| City<br>SANDY                                                                                                             | State<br>UT                                                                                                                                                   | Zip Code<br>84094                  | Amount of Each Disbursement this Period<br>240.00             |  |  |
| Purpose of Disbursement<br>SALARY                                                                                         |                                                                                                                                                               | Category/<br>Type<br>001           | Transaction ID : B A B E 9 C F C 4 3 D 9 C 4 7 6 7 A F 7      |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |  |

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|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ACUMEN, DARYL, , ,</b>                                                   |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 02 / 2017 |  |  |
| Mailing Address 15152 BRIAR CREST COURT                                                                                   |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |  |
| City<br>DRAPER                                                                                                            | State<br>UT                                                                                                                                                   | Zip Code<br>84020                  | Amount of Each Disbursement this Period<br>448.50             |  |  |
| Purpose of Disbursement<br>POLITICAL DATA CONSULTING                                                                      |                                                                                                                                                               | Category/<br>Type<br>001           | Transaction ID : B 6 9 E C 2 3 7 5 1 7 0 D 4 D F F 9 A 8      |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |  |

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|------------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 3688.50 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                         |                                               |                                    |                                     |                                    |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 40 OF 44                       |                                    |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BEEHIVE STORAGE</b>                                                      |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 05 / 2017 |  |
| Mailing Address 12519 MINUTEMAN DR,                                                                                       |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>DRAPER                                                                                                            | State<br>UT                                                                                                                                                   | Zip Code<br>84020-9541             | Amount of Each Disbursement this Period<br>159.00             |  |
| Purpose of Disbursement<br>STORAGE FEE                                                                                    |                                                                                                                                                               | Category/<br>Type<br>001           | Transaction ID : BAA21F82B5E1D4651895                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CAPITOL HILL CLUB</b>                                                    |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 07 / 2017 |  |
| Mailing Address 300 1ST STREET SOUTH EAST                                                                                 |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>WASHINGTON                                                                                                        | State<br>DC                                                                                                                                                   | Zip Code<br>20003                  | Amount of Each Disbursement this Period<br>1005.35            |  |
| Purpose of Disbursement<br>CLUB DUES                                                                                      |                                                                                                                                                               | Category/<br>Type<br>007           | Transaction ID : B24260763144148E6BF5                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

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|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JWN ENTERPRISES</b>                                                      |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 08 / 2017 |  |
| Mailing Address 450 LIPIZZAN LANE                                                                                         |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>CELINA                                                                                                            | State<br>TX                                                                                                                                                   | Zip Code<br>75009-4657             | Amount of Each Disbursement this Period<br>300.00             |  |
| Purpose of Disbursement<br>FUNDRAISING CONSULTING                                                                         |                                                                                                                                                               | Category/<br>Type<br>001           | Transaction ID : B453D0343AE134A58B73                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

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|-----------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1464.35 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                         |                                               |                                    |                                     |                                    |  |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 41 OF 44                      |                                     |                                    |  |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. USPS</b>                                                                 |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 09 / 2017 |  |  |
| Mailing Address 145 E STATE ST                                                                                            |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |  |
| City<br>FARMINGTON                                                                                                        | State<br>UT                                                                                                                                                   | Zip Code<br>84025                  | Amount of Each Disbursement this Period<br>118.00             |  |  |
| Purpose of Disbursement<br>SHIPPING                                                                                       |                                                                                                                                                               | Category/<br>Type<br>001           | Transaction ID : B927E1047BA994FC7A60                         |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |  |

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|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CHEVRON</b>                                                              |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 12 / 2017 |  |  |
| Mailing Address 6001 BOLLINGER CANYON RD<br>HEADQUARTERS                                                                  |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |  |
| City<br>SAN RAMON                                                                                                         | State<br>CA                                                                                                                                                   | Zip Code<br>94583                  | Amount of Each Disbursement this Period<br>55.82              |  |  |
| Purpose of Disbursement<br>TRAVEL- FUEL                                                                                   |                                                                                                                                                               | Category/<br>Type<br>002           | Transaction ID : BE3480EEA0D404F5B8C9                         |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |  |

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|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. VERIZON WIRELESS</b>                                                     |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 13 / 2017 |  |  |
| Mailing Address PO BOX 5029                                                                                               |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |  |
| City<br>WALLINGFORD                                                                                                       | State<br>CT                                                                                                                                                   | Zip Code<br>06492-7529             | Amount of Each Disbursement this Period<br>199.44             |  |  |
| Purpose of Disbursement<br>PHONE EXPENSE                                                                                  |                                                                                                                                                               | Category/<br>Type<br>001           | Transaction ID : B174BA11DDC9741D6B04                         |  |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |  |

|                                                                  |        |
|------------------------------------------------------------------|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 373.26 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                               |                                               |                                    |                                     |                                    |
|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 42 OF 44                       |                                    |
|                                                                               | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

**A. CAPITOL HILL CLUB**

Full Name (Last, First, Middle Initial)  
Mailing Address 300 1ST STREET SOUTH EAST

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement CLUB DUES Category/Type 007

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) CONVENTION

State: District:

Date of Disbursement 06 / 19 / 2017

FEC Identification Number C

Amount of Each Disbursement this Period 796.94

Transaction ID : BF0ACE3C5FC5A4866841

Memo Item

**B. VISTA OUTDOOR INC. EMPLOYEE CITIZENSHIP FUND**

Full Name (Last, First, Middle Initial)  
Mailing Address 4601 FAIRFAX DR STE 1200

City ARLINGTON State VA Zip Code 22203-1559

Purpose of Disbursement IN-KIND:CAMPAIGN EVENT - SUPPLIES Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify)

State: District:

Date of Disbursement 06 / 27 / 2017

FEC Identification Number C

Amount of Each Disbursement this Period 76.01

Transaction ID : B12672E839CE4452AA5A

Memo Item

**C. ALTICOR**

Full Name (Last, First, Middle Initial)  
Mailing Address 429 NEW JERSEY AVE SE

City WASHINGTON State DC Zip Code 20003-4034

Purpose of Disbursement RECEPTION FEE Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) CONVENTION

State: District:

Date of Disbursement 06 / 28 / 2017

FEC Identification Number C

Amount of Each Disbursement this Period 200.00

Transaction ID : B3B66C1E8A4B744BE9DE

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1072.95

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|                                                                         |                                               |                                    |                                     |                                    |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 43 OF 44                       |                                    |
|                                                                         | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                           |                                                                                                                                                               |                                    |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. FRIENDS OF JASON CHAFFETZ</b>                                            |                                                                                                                                                               |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2017 |  |
| Mailing Address 315 WESTFIELD CIR                                                                                         |                                                                                                                                                               |                                    | FEC Identification Number<br>C                                |  |
| City<br>ALPINE                                                                                                            | State<br>UT                                                                                                                                                   | Zip Code<br>84004-1594             | Amount of Each Disbursement this Period<br>2500.00            |  |
| Purpose of Disbursement<br>IN-KIND:TRAILER                                                                                |                                                                                                                                                               | Category/Type                      | Transaction ID : B43932935DBE74A59947                         |  |
| Candidate Name                                                                                                            |                                                                                                                                                               | Memo Item <input type="checkbox"/> |                                                               |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                    |                                                               |  |
| State: District:                                                                                                          |                                                                                                                                                               |                                    |                                                               |  |

|                                                                                                                           |                                                                                                                                      |               |                                             |  |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b>                                                                      |                                                                                                                                      |               | Date of Disbursement<br>M M / D D / Y Y Y Y |  |
| Mailing Address                                                                                                           |                                                                                                                                      |               | FEC Identification Number<br>C              |  |
| City                                                                                                                      | State                                                                                                                                | Zip Code      | Amount of Each Disbursement this Period     |  |
| Purpose of Disbursement                                                                                                   |                                                                                                                                      | Category/Type | Memo Item <input type="checkbox"/>          |  |
| Candidate Name                                                                                                            |                                                                                                                                      |               |                                             |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |               |                                             |  |
| State: District:                                                                                                          |                                                                                                                                      |               |                                             |  |

|                                                                                                                           |                                                                                                                                      |               |                                             |  |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>                                                                      |                                                                                                                                      |               | Date of Disbursement<br>M M / D D / Y Y Y Y |  |
| Mailing Address                                                                                                           |                                                                                                                                      |               | FEC Identification Number<br>C              |  |
| City                                                                                                                      | State                                                                                                                                | Zip Code      | Amount of Each Disbursement this Period     |  |
| Purpose of Disbursement                                                                                                   |                                                                                                                                      | Category/Type | Memo Item <input type="checkbox"/>          |  |
| Candidate Name                                                                                                            |                                                                                                                                      |               |                                             |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |               |                                             |  |
| State: District:                                                                                                          |                                                                                                                                      |               |                                             |  |

|                                                                  |          |
|------------------------------------------------------------------|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 2500.00  |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 37481.50 |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

|                                                                               |                                      |                                    |                                     |                                               |
|-------------------------------------------------------------------------------|--------------------------------------|------------------------------------|-------------------------------------|-----------------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one) |                                    | PAGE 44 OF 44                       |                                               |
|                                                                               | <input type="checkbox"/> 17<br>20a   | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input checked="" type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**FRIENDS FOR CHRIS STEWART, INC.**

|                                                                                                                                                               |                                                                                                                           |                          |                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE</b>                                                              |                                                                                                                           |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 08 / 2017 |  |
| Mailing Address 320 1ST ST SE                                                                                                                                 |                                                                                                                           |                          | FEC Identification Number<br>C C00075820                      |  |
| City<br>WASHINGTON                                                                                                                                            | State<br>DC                                                                                                               | Zip Code<br>20003-1838   | Amount of Each Disbursement this Period<br>20000.00           |  |
| Purpose of Disbursement<br>CONTRIBUTION                                                                                                                       |                                                                                                                           | Category/<br>Type<br>011 | Transaction ID : BE395D1D31A4743ADBAA                         |  |
| Candidate Name<br>NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE                                                                                                 | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                          | Memo Item <input type="checkbox"/>                            |  |
| Disbursement For: 2018<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) CONVENTION |                                                                                                                           | State: District:         |                                                               |  |

|                                                                                                                                    |       |                                                                                                                           |                                             |  |
|------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b>                                                                               |       |                                                                                                                           | Date of Disbursement<br>M M / D D / Y Y Y Y |  |
| Mailing Address                                                                                                                    |       |                                                                                                                           | FEC Identification Number<br>C              |  |
| City                                                                                                                               | State | Zip Code                                                                                                                  | Amount of Each Disbursement this Period     |  |
| Purpose of Disbursement                                                                                                            |       | Category/<br>Type                                                                                                         | Memo Item <input type="checkbox"/>          |  |
| Candidate Name                                                                                                                     |       | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                             |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |       | State: District:                                                                                                          |                                             |  |

|                                                                                                                                    |       |                                                                                                                           |                                             |  |
|------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>                                                                               |       |                                                                                                                           | Date of Disbursement<br>M M / D D / Y Y Y Y |  |
| Mailing Address                                                                                                                    |       |                                                                                                                           | FEC Identification Number<br>C              |  |
| City                                                                                                                               | State | Zip Code                                                                                                                  | Amount of Each Disbursement this Period     |  |
| Purpose of Disbursement                                                                                                            |       | Category/<br>Type                                                                                                         | Memo Item <input type="checkbox"/>          |  |
| Candidate Name                                                                                                                     |       | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                             |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |       | State: District:                                                                                                          |                                             |  |

|                                                                  |          |
|------------------------------------------------------------------|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 20000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 20000.00 |