

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

13 FEB -4 PM 4:05
Office Use Only

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5

FRIENDS OF MIKE LEE INC.

ADDRESS (number and street)

10 West Broadway, Suite 500

Check if different than previously reported. (ACC)

Salt Lake City

UT

84101

2. FEC IDENTIFICATION NUMBER

C C00473827

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

UT

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on M M / D D / Y Y Y Y

in the State of

5. Covering Period 10 / 01 / 2012 through 12 / 31 / 2012

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

Type or Print Name of Treasurer Mike McCauley

Signature of Treasurer

Date

01 / 29 / 2013

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
FRIENDS OF MIKE LEE INC.

Report Covering the Period: From: ^M10 / ^D01 / ^Y2012 To: ^M12 / ^D31 / ^Y2012

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)) | 29797.39 | 523571.39 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 2400.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | 29797.39 | 521171.39 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 58921.20 | 668867.30 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | 68.00 | 25070.46 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | 58853.20 | 643796.84 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | 5421.50 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 31864.28 | |

For further information contact:

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

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

13026690118

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 39

Write or Type Committee Name

FRIENDS OF MIKE LEE INC.

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 10 01 2012 To: ^{M M / D D / Y Y Y Y} 12 31 2012

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A) | 21750.00 | 310870.00 |
| (ii) Unitemized | 1547.39 | 40212.39 |
| (iii) TOTAL of contributions from individuals | 23297.39 | 351082.39 |
| (b) Political Party Committees | 0.00 | 1000.00 |
| (c) Other Political Committees (such as PACs) | 6500.00 | 171489.00 |
| (d) The Candidate | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 29797.39 | 523571.39 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | |
| | 0.00 | 0.00 |
| 13. LOANS: | | |
| (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 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | | |
| | 68.00 | 25070.46 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | | |
| | 0.00 | 4.85 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) | 29865.39 | 548646.70 |

13030000119

DETAILED SUMMARY PAGE

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 58921.20 | 668867.30 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 2400.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 2400.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 17600.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 58921.20 | 688867.30 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 34477.31 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 29865.39 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 64342.70 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 58921.20 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 5421.50 |

11030500130

**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 5 OF 39 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d | |
| | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | | | | |
|--|-------------|-----------------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) Kim Asay | | | Date of Receipt M M / D D / Y Y Y Y 10 04 2012 | | |
| A. Mailing Address 1210 Wintergreen Ct. | | | Transaction ID : SA11AI.45117 | | |
| City Alpine | State UT | Zip Code 84004 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. C | | | Receipt , , 1000.00 | | |
| Name of Employer Morinda Holdings, Inc. | | Occupation Executive | Receipt , , . | | |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | Election Cycle-to-Date 1000.00 | Receipt , , . | | |

| | | | | | |
|--|-------------|----------------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) Thomas Barnett | | | Date of Receipt M M / D D / Y Y Y Y 10 03 2012 | | |
| B. Mailing Address 1980 Massachusetts Ave. | | | Transaction ID : SA11AI.45094 | | |
| City McLean | State VA | Zip Code 22101 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. C | | | Receipt , , 500.00 | | |
| Name of Employer Covington & Burling | | Occupation Attorney | Receipt , , . | | |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | Election Cycle-to-Date 500.00 | Receipt , , . | | |

| | | | | | |
|--|-------------|-----------------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) Christopher Corley | | | Date of Receipt M M / D D / Y Y Y Y 10 04 2012 | | |
| C. Mailing Address 7017 Aspen Wood Trail | | | Transaction ID : SA11AI.45119 | | |
| City Fort Worth | State TX | Zip Code 76132 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. C | | | Receipt , , 2000.00 | | |
| Name of Employer Corley Consulting | | Occupation Consultant | Receipt , , . | | |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | Election Cycle-to-Date 2000.00 | 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) | PAGE 6 OF 39 |
| <input checked="" type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a |
| <input type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |
| <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) Michele Davis | | Date of Receipt M M / D D / Y Y Y Y 10 04 2012 |
| A. Mailing Address 3003 Westhurst Lane | | Transaction ID : SA11AI.45108 |
| City Oakton | State VA | Zip Code 22124 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period Receipt , , 1000.00 |
| Name of Employer Brunswick Group | Occupation Partner | |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | Election Cycle-to-Date Receipt , , 1000.00 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) Will Holley | | Date of Receipt M M / D D / Y Y Y Y 10 04 2012 |
| B. Mailing Address 3130 Wisconsin Ave NW #120 | | Transaction ID : SA11AI.45103 |
| City Washington | State DC | Zip Code 20016 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period Receipt , , 250.00 |
| Name of Employer Mercury | Occupation Consultant | |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | Election Cycle-to-Date Receipt , , 250.00 | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) David Howard | | Date of Receipt M M / D D / Y Y Y Y 10 04 2012 |
| C. Mailing Address 1060 89th Ave. NE | | Transaction ID : SA11AI.45097 |
| City Bellevue | State WA | Zip Code 98004 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period Receipt , , 1000.00 |
| Name of Employer Microsoft Corporation | Occupation Attorney | |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | Election Cycle-to-Date Receipt , , 1000.00 | |

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | , , 2250.00 |
| TOTAL This Period (last page this line number only)..... | , , . |

13020000122

**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 7 OF 39 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | | | | |
|---|--------------------|--|--|--|--|
| Full Name (Last, First, Middle Initial) ALEX JARVIS | | | Date of Receipt M M / D D / Y Y Y Y 10 03 2012 | | |
| Mailing Address 1306 CLAYBORNE HOUSE CT | | | Transaction ID : SA11AI.45096 | | |
| City MCLEAN | State VA | Zip Code 22101 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. C | | | Receipt , , 1000.00 | | |
| Name of Employer Fierce Isakowitz | | Occupation Partner | Receipt , , . | | |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | Election Cycle-to-Date 2500.00 | Receipt , , . | | |

| | | | | | |
|---|--------------------|--|--|--|--|
| Full Name (Last, First, Middle Initial) Edward Kutler | | | Date of Receipt M M / D D / Y Y Y Y 10 04 2012 | | |
| Mailing Address 6450 Tree Top Circle | | | Transaction ID : SA11AI.45106 | | |
| City Columbia | State MD | Zip Code 21045 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. C | | | Receipt , , 250.00 | | |
| Name of Employer Clark & Weinstock | | Occupation Consultant/Lobbyist | Receipt , , . | | |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | Election Cycle-to-Date 250.00 | Receipt , , . | | |

| | | | | | |
|---|--------------------|--|--|--|--|
| Full Name (Last, First, Middle Initial) Eli Levitin | | | Date of Receipt M M / D D / Y Y Y Y 10 30 2012 | | |
| Mailing Address 1222 E 22nd Street | | | Transaction ID : SA11AI.45074 | | |
| City Brooklyn | State NY | Zip Code 11210 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. C | | | Receipt , , 2000.00 | | |
| Name of Employer Best Efforts | | Occupation Best Efforts | Receipt , , . | | |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | Election Cycle-to-Date 2000.00 | Receipt , , . | | |

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | , , 3250.00 |
| 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) | PAGE 8 OF 39 |
| | <input checked="" type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a |
| | <input type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) Jason M. Lieber | | Date of Receipt M M / D D / Y Y Y Y 10 30 2012 |
| Mailing Address 344 Atlantic Ave. | | Transaction ID : SA11AI.45072 |
| City Cedarhurst | State NY | |
| Zip Code 11516 | | Amount of Each Receipt this Period Receipt , , 1000.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Best Efforts | Occupation Best Efforts | Receipt , , 1000.00 |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | Election Cycle-to-Date , , 1000.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) John Lonergan | | Date of Receipt M M / D D / Y Y Y Y 10 04 2012 |
| Mailing Address 5115 52nd Street | | Transaction ID : SA11AI.45101 |
| City Washington | State DC | |
| Zip Code 20016 | | Amount of Each Receipt this Period Receipt , , 500.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Mercury, Clark & Weinstock | Occupation Consultant | Receipt , , 500.00 |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | Election Cycle-to-Date , , 500.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) Kieran Mahoney | | Date of Receipt M M / D D / Y Y Y Y 10 04 2012 |
| Mailing Address 4706 Rue Bordeaux | | Transaction ID : SA11AI.45099 |
| City Lutz | State FL | |
| Zip Code 33558 | | Amount of Each Receipt this Period Receipt , , 2000.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Mercury Public Affairs | Occupation Consultant | Receipt , , 2000.00 |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | Election Cycle-to-Date , , 2000.00 | |

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | , , 3500.00 |
| TOTAL This Period (last page this line number only)..... | , , . |

15020000174

**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 9 OF 39 |
| | <input checked="" type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a |
| | <input type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | | | | |
|---|--------------------|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. Craig J. Mundie | | | Date of Receipt M M / D D / Y Y Y Y 11 21 2012 | | |
| Mailing Address 834 36th Ave E | | | Transaction ID : SA11AI.45089 | | |
| City Seattle | State WA | Zip Code 98112 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. C | | | Receipt , , 1000.00 | | |
| Name of Employer Best Efforts | | Occupation Best Efforts | Receipt , , . | | |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | Election Cycle-to-Date 1000.00 | Receipt , , . | | |

| | | | | | |
|---|--------------------|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Charles Rule | | | Date of Receipt M M / D D / Y Y Y Y 10 04 2012 | | |
| Mailing Address 480 River Bend Road | | | Transaction ID : SA11AI.45112 | | |
| City Great Falls | State VA | Zip Code 22066 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. C | | | Receipt , , 5000.00 | | |
| Name of Employer Cadwalader, Wickersham & Taft | | Occupation Managing Partner | Receipt , , . | | |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | Election Cycle-to-Date 5000.00 | Receipt , , . | | |

| | | | | | |
|---|--------------------|---------------------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) C. Charles Rule | | | Date of Receipt M M / D D / Y Y Y Y 10 04 2012 | | |
| Mailing Address 480 River Bend Road | | | Transaction ID : SA11AI.45115 | | |
| City Great Falls | State VA | Zip Code 22066 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. C | | | Redesignate: Receipt , , -2500.00 | | |
| Name of Employer Cadwalader, Wickersham & Taft | | Occupation Managing Partner | [MEMO ITEM] | | |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | Election Cycle-to-Date | 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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|--------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> |
| 12 | 13a | 13b | 14 | 15 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

Full Name (Last, First, Middle Initial)
Charles Rule

Mailing Address **480 River Bend Road**

City State Zip Code
Great Falls VA 22066

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

Name of Employer Occupation
Cadwalader, Wickersham & Taft Managing Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 04 2012

Transaction ID : **SA11AI.45116**

Amount of Each Receipt this Period
2500.00

Redesignated to Primary

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
David Safier

Mailing Address **123 Winchester Place**

City State Zip Code
Lawrence NY 11559

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

Name of Employer Occupation
Best Efforts Best Efforts

Receipt For: 2016
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **1000.00**

Date of Receipt
M M / D D / Y Y Y Y
10 30 2012

Transaction ID : **SA11AI.45070**

Amount of Each Receipt this Period
1000.00

Receipt

Full Name (Last, First, Middle Initial)
Mary Snapp

Mailing Address **1500 38th Ave**

City State Zip Code
Seattle WA 98122

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

Name of Employer Occupation
Microsoft Programmer

Receipt For: 2016
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **1000.00**

Date of Receipt
M M / D D / Y Y Y Y
10 04 2012

Transaction ID : **SA11AI.45110**

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... **2000.00**

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) | | PAGE 11 OF 39 | |
| | <input checked="" type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | | | | |
|--|-------------|--------------------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) Bruce TODD | | | Date of Receipt M M / D D / Y Y Y Y 10 04 2012 | | |
| Mailing Address 635 Areva Road (68-2) | | | Transaction ID : SA11AI.45121 | | |
| City Roosevelt | State UT | Zip Code 84066 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. C | | | Receipt , , 250.00 | | |
| Name of Employer Strata Networks | | Occupation CEO/GM | Receipt , , 250.00 | | |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | Election Cycle-to-Date 325.00 | Receipt , , 325.00 | | |

| | | | | | |
|--|-------------|---------------------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) Morris E. Wolfson | | | Date of Receipt M M / D D / Y Y Y Y 10 30 2012 | | |
| Mailing Address One State Street Plaza 29th Floor | | | Transaction ID : SA11AI.45068 | | |
| City New York | State NY | Zip Code 10004 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. C | | | Receipt , , 1000.00 | | |
| Name of Employer Best Efforts | | Occupation Best Efforts | Receipt , , 1000.00 | | |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | Election Cycle-to-Date 1000.00 | Receipt , , 1000.00 | | |

| | | | | | |
|---|-------|------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) | | | Date of Receipt M M / D D / Y Y Y Y | | |
| Mailing Address | | | Amount of Each Receipt this Period | | |
| City | State | Zip Code | Receipt , , | | |
| FEC ID number of contributing federal political committee. C | | | Receipt , , | | |
| Name of Employer | | Occupation | Receipt , , | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date | Receipt , , | | |

| | |
|---|--------------|
| SUBTOTAL of Receipts This Page (optional)..... | , , 1250.00 |
| TOTAL This Period (last page this line number only)..... | , , 21750.00 |

**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 12 OF 39 | | | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 | <input type="checkbox"/> 15 |

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

NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|---|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) EDWARDS LIFESCIENCES POLITICAL ACTION COMMITTEE (EWPAC) | | Date of Receipt M M / D D / Y Y Y Y 12 31 2012 |
| A. Mailing Address ONE EDWARDS WAY | | Transaction ID : SA11C.45091 |
| City IRVINE | State Zip Code CA 92614 | |
| FEC ID number of contributing federal political committee. C C00411900 | | Amount of Each Receipt this Period |
| Name of Employer | Occupation | Receipt , , 1000.00 |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | Election Cycle-to-Date 1000.00 | |

| | | |
|---|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) HOLLYFRONTIER CORPORATION PAC | | Date of Receipt M M / D D / Y Y Y Y 10 16 2012 |
| B. Mailing Address 2828 N HARWOOD STREET SUITE 1300 | | Transaction ID : SA11C.45083 |
| City DALLAS | State Zip Code TX 75201 | |
| FEC ID number of contributing federal political committee. C C00342766 | | Amount of Each Receipt this Period |
| Name of Employer | Occupation | Receipt , , 1000.00 |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | Election Cycle-to-Date 1000.00 | |

| | | |
|---|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y 11 21 2012 |
| C. Mailing Address 1295 STATE STREET | | Transaction ID : SA11C.45085 |
| City SPRINGFIELD | State Zip Code MA 01111 | |
| FEC ID number of contributing federal political committee. C C00118943 | | Amount of Each Receipt this Period |
| Name of Employer | Occupation | Receipt , , 1000.00 |
| Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | Election Cycle-to-Date 1500.00 | |

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | , , 3000.00 |
| TOTAL This Period (last page this line number only)..... | , , . |

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**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 13 OF 39 | | | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 | <input type="checkbox"/> 15 |

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

NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | | |
|--|--------------------|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) NORPAC | | | Date of Receipt M M / D D / Y Y Y Y 11 21 2012 |
| A. Mailing Address PO BOX 1543 | | | Transaction ID : SA11C.45086 |
| City ENGLEWOOD CLIFFS | State NJ | Zip Code 07632 | |
| FEC ID number of contributing federal political committee. C C00247403 | | | Amount of Each Receipt this Period |
| Name of Employer | | Occupation | Receipt , , 2500.00 |
| Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | Election Cycle-to-Date 2500.00 | |

| | | | |
|--|--------------------|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH) | | | Date of Receipt M M / D D / Y Y Y Y 10 16 2012 |
| B. Mailing Address 9900 BREN ROAD EAST | | | Transaction ID : SA11C.45084 |
| City MINNETONKA | State MN | Zip Code 55343 | |
| FEC ID number of contributing federal political committee. C C00274431 | | | Amount of Each Receipt this Period |
| Name of Employer | | Occupation | Receipt , , 1000.00 |
| Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | Election Cycle-to-Date 1000.00 | |

| | | | |
|---|-------|------------------------|--|
| Full Name (Last, First, Middle Initial) | | | Date of Receipt M M / D D / Y Y Y Y |
| C. Mailing Address | | | |
| City | State | Zip Code | |
| FEC ID number of contributing federal political committee. C | | | Amount of Each Receipt this Period |
| Name of Employer | | Occupation | Receipt , , . |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) | , , 3500.00 |
| TOTAL This Period (last page this line number only) | , , 6500.00 |

**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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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

NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | | |
|--|---|--|-------------------|
| Full Name (Last, First, Middle Initial) A. American Express | | Date of Disbursement M M / D D / Y Y Y Y 10 03 2012 | |
| Mailing Address P.O. Box 360001 | | Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.45124 | |
| City Ft. Lauderdale | State FL | | Zip Code 33336 |
| Purpose of Disbursement Merchant account fees | | | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | | |
| Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT District: | | | |

| | | | |
|--|---|--|-------------------|
| Full Name (Last, First, Middle Initial) B. American Express | | Date of Disbursement M M / D D / Y Y Y Y 11 05 2012 | |
| Mailing Address P.O. Box 360001 | | Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.45145 | |
| City Ft. Lauderdale | State FL | | Zip Code 33336 |
| Purpose of Disbursement Merchant account fees | | | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | | |
| Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT District: | | | |

| | | | |
|--|---|--|-------------------|
| Full Name (Last, First, Middle Initial) C. American Express | | Date of Disbursement M M / D D / Y Y Y Y 12 04 2012 | |
| Mailing Address P.O. Box 360001 | | Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.45185 | |
| City Ft. Lauderdale | State FL | | Zip Code 33336 |
| Purpose of Disbursement Merchant account fees | | | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | | |
| Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT District: | | | |

| | |
|---|-------|
| SUBTOTAL of Disbursements This Page (optional)..... | 23.85 |
| TOTAL This Period (last page this line number only)..... | |

1 3 3 2 0 0 0 0 1 3 0

**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 15 OF 39 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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

NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. APPLE STORE | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012 |
| Mailing Address 1 INFINITE LOOP | | Amount of Each Disbursement this Period 49.00 Transaction ID : SB17.45183 |
| City CUPERTINO | State CA | |
| Zip Code 95014 | Purpose of Disbursement Office supplies | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 | <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Arena Communications | | Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2012 |
| Mailing Address 1780 Sequoia Vista Cir. | | Amount of Each Disbursement this Period 7821.09 Transaction ID : SB17.45203 |
| City Salt Lake City | State UT | |
| Zip Code 84104 | Purpose of Disbursement Christmas cards for constituents | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 | <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. AT&T | | Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012 |
| Mailing Address P.O. Box 6463 | | Amount of Each Disbursement this Period 136.98 Transaction ID : SB17.45140 |
| City Carol Stream | State IL | |
| Zip Code 60197 | Purpose of Disbursement Telephone | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 | <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 8007.07 |
| TOTAL This Period (last page this line number only) | |

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**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 16 OF 39 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | | |
|---|---|---|-----------------------------|
| Full Name (Last, First, Middle Initial) A. AT&T | | Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012 | |
| Mailing Address P.O. Box 6463 | | Amount of Each Disbursement this Period 128.95 | |
| City Carol Stream | State IL | Zip Code 60197 | Transaction ID : SB17.45156 |
| Purpose of Disbursement Telephone | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

| | | | |
|---|---|---|-----------------------------|
| Full Name (Last, First, Middle Initial) B. AT&T | | Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2012 | |
| Mailing Address P.O. Box 6463 | | Amount of Each Disbursement this Period 254.94 | |
| City Carol Stream | State IL | Zip Code 60197 | Transaction ID : SB17.45196 |
| Purpose of Disbursement Telephone | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

| | | | |
|---|---|---|-----------------------------|
| Full Name (Last, First, Middle Initial) c. Busath Studio & Gardens | | Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012 | |
| Mailing Address 701 EAST SOUTH TEMPLE | | Amount of Each Disbursement this Period 790.00 | |
| City Salt Lake City | State UT | Zip Code 84102 | Transaction ID : SB17.45178 |
| Purpose of Disbursement Christmas card photo | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 1173.89 |
| TOTAL This Period (last page this line number only) | |

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**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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Cafe Rio | | Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012 |
| Mailing Address 4301 Fairfax Rd. | | Amount of Each Disbursement this Period 490.58 Transaction ID : SB17.45204 |
| City Falls Church | State VA | |
| Zip Code 22203 | Purpose of Disbursement Meeting with constituents & donors | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | State: UT District: | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Capital Hill Super Market | | Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012 |
| Mailing Address 241 Massachussetts Ave., NE | | Amount of Each Disbursement this Period 7.38 Transaction ID : SB17.45180 |
| City Washington | State DC | |
| Zip Code 20002 | Purpose of Disbursement Supplies for event | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | State: UT District: | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Capital Hill Super Market | | Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2012 |
| Mailing Address 241 Massachussetts Ave., NE | | Amount of Each Disbursement this Period 7.43 Transaction ID : SB17.45209 |
| City Washington | State DC | |
| Zip Code 20002 | Purpose of Disbursement Supplies for event | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | State: UT District: | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 505.39 |
| TOTAL This Period (last page this line number only)..... | |

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**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 18 OF 39 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Charlie Palmer Steak | | Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012 |
| Mailing Address 101 Constitution Ave NW | | Amount of Each Disbursement this Period 105.20 Transaction ID : SB17.45157 |
| City Washington | State DC | |
| Zip Code 20001 | Category/Type | |
| Purpose of Disbursement Meeting with constituents & donors | | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Comcast | | Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012 |
| Mailing Address PO BOX 3006 | | Amount of Each Disbursement this Period 344.69 Transaction ID : SB17.45141 |
| City Southeastern | State PA | |
| Zip Code 19398 | Category/Type | |
| Purpose of Disbursement Internet | | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Delta Air | | Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2012 |
| Mailing Address 776 North Terminal Drive | | Amount of Each Disbursement this Period 888.40 Transaction ID : SB17.45127 |
| City Salt lake City | State UT | |
| Zip Code 84116 | Category/Type | |
| Purpose of Disbursement Travel - Airfare | | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1338.29 |
| 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: (check only one) | PAGE 19 OF 39 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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

NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Delta Air | | Date of Disbursement M M / D D / Y Y Y Y 10 10 2012 |
| Mailing Address 776 North Terminal Drive | | Amount of Each Disbursement this Period 888.40 , , . Transaction ID : SB17.45129 |
| City Salt lake City | State UT | |
| Purpose of Disbursement Travel - Airfare | | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Delta Air | | Date of Disbursement M M / D D / Y Y Y Y 10 10 2012 |
| Mailing Address 776 North Terminal Drive | | Amount of Each Disbursement this Period 975.60 , , . Transaction ID : SB17.45130 |
| City Salt lake City | State UT | |
| Purpose of Disbursement Travel - Airfare | | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. Delta Air | | Date of Disbursement M M / D D / Y Y Y Y 10 18 2012 |
| Mailing Address 776 North Terminal Drive | | Amount of Each Disbursement this Period 150.00 , , . Transaction ID : SB17.45139 |
| City Salt lake City | State UT | |
| Purpose of Disbursement Travel - Airfare | | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | |
|--|------------------|
| SUBTOTAL of Disbursements This Page (optional) | 2014.00 , , . |
| 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: (check only one) | PAGE 20 OF 39 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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

NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | | |
|--|---|-----------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Dingman Professional Printing | | Date of Disbursement | |
| Mailing Address 5100 South Washington Blvd., Suite | | M M / D D / Y Y Y Y 11 03 2012 | |
| City Ogden | State UT | Zip Code 84405 | Amount of Each Disbursement this Period 2997.76 Transaction ID : SB17.45221 |
| Purpose of Disbursement Printing services | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

| | | | |
|--|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Dixie Junior Livestock Show | | Date of Disbursement | |
| Mailing Address 197 East Tabernacle | | M M / D D / Y Y Y Y 11 03 2012 | |
| City St. George | State UT | Zip Code 84770 | Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.45223 |
| Purpose of Disbursement Contribution | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

| | | | |
|--|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ellen James | | Date of Disbursement | |
| Mailing Address 1003 COTTAGE ST, SW | | M M / D D / Y Y Y Y 11 03 2012 | |
| City Vienna | State VA | Zip Code 22180 | Amount of Each Disbursement this Period 645.44 Transaction ID : SB17.45225 |
| Purpose of Disbursement Mileage reimbursement | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3893.20 |
| TOTAL This Period (last page this line number only)..... | |

13020090136

**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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | | |
|--|--|---|------------------------------------|
| Full Name (Last, First, Middle Initial) A. Ellen Schunk | | Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2012 | |
| Mailing Address 1959 NORTH CASCADE CANYON DR. | | Amount of Each Disbursement this Period 464.69 | |
| City St. George | State UT | Zip Code 84770 | Transaction ID : SB17.45227 |
| Purpose of Disbursement Mileage reimbursement | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | Disbursement For: 2016 | |
| Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> House <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) Convention | State: UT District: | |

| | | | |
|--|--|---|------------------------------------|
| Full Name (Last, First, Middle Initial) B. Gogo Air | | Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2012 | |
| Mailing Address 1250 N. Arlington Heights Rd., Sui | | Amount of Each Disbursement this Period 34.95 | |
| City Itasca | State IL | Zip Code 60143 | Transaction ID : SB17.45189 |
| Purpose of Disbursement Internet | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | Disbursement For: 2016 | |
| Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> House <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) Convention | State: UT District: | |

| | | | |
|--|--|---|------------------------------------|
| Full Name (Last, First, Middle Initial) c. Gorilla Printing | | Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2012 | |
| Mailing Address 47 Canal Street | | Amount of Each Disbursement this Period 1260.00 | |
| City Salem | State MA | Zip Code 01970 | Transaction ID : SB17.45239 |
| Purpose of Disbursement Printing | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | Disbursement For: 2016 | |
| Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> House <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) Convention | State: UT District: | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 1759.64 |
| 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:
(check only one)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Highland Hideaway Storage | | Date of Disbursement M M / D D / Y Y Y Y 10 17 2012 |
| Mailing Address 11251 N SUNSET DR | | Amount of Each Disbursement this Period 215.00 Transaction ID : SB17.45217 |
| City Highland | State UT | |
| Purpose of Disbursement Storage fees | | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Highland Hideaway Storage | | Date of Disbursement M M / D D / Y Y Y Y 11 19 2012 |
| Mailing Address 11251 N SUNSET DR | | Amount of Each Disbursement this Period 355.00 Transaction ID : SB17.45165 |
| City Highland | State UT | |
| Purpose of Disbursement Storage fees | | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Hotels.Com | | Date of Disbursement M M / D D / Y Y Y Y 10 11 2012 |
| Mailing Address 5400 Lyndon B. Johnson Fwy | | Amount of Each Disbursement this Period 867.84 Transaction ID : SB17.45131 |
| City Dallas | State TX | |
| Purpose of Disbursement Travel - Hotels | | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1437.84 |
| TOTAL This Period (last page this line number only)..... | |

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**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 24 OF 39 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | | |
|---|--|---|------------------------------------|
| Full Name (Last, First, Middle Initial) A. Mike Lee | | Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012 | |
| Mailing Address 854 Canterbury Lane | | Amount of Each Disbursement this Period 7961.47 | |
| City Alpine | State UT | Zip Code 84004 | Transaction ID : SB17.45237 |
| Purpose of Disbursement Mileage reimbursement | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | Disbursement For: 2016 | |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

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|---|--|---|------------------------------------|
| Full Name (Last, First, Middle Initial) B. Mailchimp.Com | | Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012 | |
| Mailing Address 512 Means Street, Suite 404 | | Amount of Each Disbursement this Period 240.00 | |
| City Atlanta | State GA | Zip Code 30318 | Transaction ID : SB17.45123 |
| Purpose of Disbursement Email marketing | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | Disbursement For: 2016 | |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

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|---|--|---|------------------------------------|
| Full Name (Last, First, Middle Initial) c. Mailchimp.Com | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012 | |
| Mailing Address 512 Means Street, Suite 404 | | Amount of Each Disbursement this Period 240.00 | |
| City Atlanta | State GA | Zip Code 30318 | Transaction ID : SB17.45144 |
| Purpose of Disbursement Email marketing | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | Disbursement For: 2016 | |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

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| SUBTOTAL of Disbursements This Page (optional) | 8441.47 |
| TOTAL This Period (last page this line number only) | |

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**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 25 OF 39

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Mailchimp.Com | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012 |
| Mailing Address 512 Means Street, Suite 404 | | Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.45184 |
| City Atlanta | State GA | |
| Zip Code 30318 | Purpose of Disbursement Email marketing | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | State: UT District: | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Boyd Matheson | | Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2012 |
| Mailing Address 125 South State St. | | Amount of Each Disbursement this Period 204.98 Transaction ID : SB17.45219 |
| City Salt Lake City | State UT | |
| Zip Code 84138 | Purpose of Disbursement Mileage reimbursement | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | State: UT District: | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. McCauley & Associates PC | | Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2012 |
| Mailing Address 10 West Broadway, Suite 500 | | Amount of Each Disbursement this Period 3792.50 Transaction ID : SB17.45250 |
| City Salt Lake City | State UT | |
| Zip Code 84101 | Purpose of Disbursement Accounting & reporting fees | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | State: UT District: | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4237.48 |
| 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: (check only one) | | PAGE 26 OF 39 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | | |
|--|---|---|------------------------------------|
| Full Name (Last, First, Middle Initial) A. Mccauley & Associates P.C. | | Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2012 | |
| Mailing Address 10 West Broadway, Suite 500 | | Amount of Each Disbursement this Period 1250.00 | |
| City Salt Lake City | State UT | Zip Code 84101 | Transaction ID : SB17.45229 |
| Purpose of Disbursement Accounting & reporting fees | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | Disbursement For: 2016 | |
| Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

| | | | |
|--|---|---|------------------------------------|
| Full Name (Last, First, Middle Initial) B. Mccauley & Associates P.C. | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012 | |
| Mailing Address 10 West Broadway, Suite 500 | | Amount of Each Disbursement this Period 5930.00 | |
| City Salt Lake City | State UT | Zip Code 84101 | Transaction ID : SB17.45236 |
| Purpose of Disbursement Accounting & reporting fees | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | Disbursement For: 2016 | |
| Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

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|--|---|---|------------------------------------|
| Full Name (Last, First, Middle Initial) C. Mumford Gordon P.C. | | Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2012 | |
| Mailing Address 563 West 500 South Suite 240 | | Amount of Each Disbursement this Period 380.30 | |
| City Bountiful | State UT | Zip Code 84010 | Transaction ID : SB17.45231 |
| Purpose of Disbursement Professional service fees | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | Disbursement For: 2016 | |
| Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 7560.30 |
| TOTAL This Period (last page this line number only)..... | |

13020090142

**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 27 OF 39 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. PAPA JOHNS | | Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2012 |
| Mailing Address 313 H STREET NW | | Amount of Each Disbursement this Period 62.25 Transaction ID : SB17.45173 |
| City WASHINGTON | State DC | |
| Purpose of Disbursement Meeting with constituents & donors | Zip Code 20001 | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Ramano'S Resturant | | Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012 |
| Mailing Address 110 West Broadway | | Amount of Each Disbursement this Period 542.91 Transaction ID : SB17.45154 |
| City Salt Lake City | State UT | |
| Purpose of Disbursement Meeting with constituents & donors | Zip Code 84101 | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) c. Regis Hotel | | Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2012 |
| Mailing Address 2300 Deer Valley Dr. E | | Amount of Each Disbursement this Period 1332.71 Transaction ID : SB17.45169 |
| City Park City | State UT | |
| Purpose of Disbursement Travel - hotel | Zip Code 84060 | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1937.87 |
| TOTAL This Period (last page this line number only)..... | |

1302000143

**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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Senate Gift Shop | | Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012 |
| Mailing Address Constitution Ave | | Amount of Each Disbursement this Period 1635.50 Transaction ID : SB17.45200 |
| City Washington | State DC | |
| Zip Code 20002 | Purpose of Disbursement Gifts for constituents | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | State: UT District: | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Smith Wollenski | | Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2012 |
| Mailing Address 1112 19th St. NW | | Amount of Each Disbursement this Period 408.32 Transaction ID : SB17.45198 |
| City Washington | State DC | |
| Zip Code 20036 | Purpose of Disbursement Meeting with constituents & donors | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | State: UT District: | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Sprint | | Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2012 |
| Mailing Address 6391 Sprint Parkway | | Amount of Each Disbursement this Period 253.86 Transaction ID : SB17.45125 |
| City Overland Park | State KS | |
| Zip Code 66251 | Purpose of Disbursement Telephone | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | State: UT District: | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2297.68 |
| 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:
(check only one)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. SPENCER STOKES | | Date of Disbursement M M / D D / Y Y Y Y 10 01 2012 |
| Mailing Address 4259 SKYLINE DRIVE | | Amount of Each Disbursement this Period 1928.67 Transaction ID : SB17.45249 |
| City OGDEN | State UT | |
| Zip Code 84403 | Purpose of Disbursement Consulting fees | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | State: UT District: | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. SPENCER STOKES | | Date of Disbursement M M / D D / Y Y Y Y 11 30 2012 |
| Mailing Address 4259 SKYLINE DRIVE | | Amount of Each Disbursement this Period 2101.17 Transaction ID : SB17.45235 |
| City OGDEN | State UT | |
| Zip Code 84403 | Purpose of Disbursement Political & campaign consulting fees | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | State: UT District: | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. SPENCER STOKES | | Date of Disbursement M M / D D / Y Y Y Y 12 13 2012 |
| Mailing Address 4259 SKYLINE DRIVE | | Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.45238 |
| City OGDEN | State UT | |
| Zip Code 84403 | Purpose of Disbursement Political & campaign consulting fees | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | State: UT District: | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5029.84 |
| TOTAL This Period (last page this line number only)..... | |

13025000145

**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 30 OF 39 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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

NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | | |
|--|---|---|-----------------------------|
| Full Name (Last, First, Middle Initial) A. Target | | Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012 | |
| Mailing Address 3101 Jefferson Davis Hwy | | Amount of Each Disbursement this Period 238.23 | |
| City Alexandria | State VA | Zip Code 22305 | Transaction ID : SB17.45162 |
| Purpose of Disbursement Supplies for event | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

| | | | |
|--|---|---|-----------------------------|
| Full Name (Last, First, Middle Initial) B. Target | | Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012 | |
| Mailing Address 3101 Jefferson Davis Hwy | | Amount of Each Disbursement this Period 175.70 | |
| City Alexandria | State VA | Zip Code 22305 | Transaction ID : SB17.45163 |
| Purpose of Disbursement Supplies for event | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

| | | | |
|--|---|---|-----------------------------|
| Full Name (Last, First, Middle Initial) C. THE ROSE SHOP | | Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012 | |
| Mailing Address 1910 East 10600 South | | Amount of Each Disbursement this Period 26.71 | |
| City Sandy | State UT | Zip Code 84092 | Transaction ID : SB17.45138 |
| Purpose of Disbursement Flowers for constituents | | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

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| SUBTOTAL of Disbursements This Page (optional) | 440.64 |
| TOTAL This Period (last page this line number only) | |

13020000145

**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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | | |
|--|---|---|-------------------|
| Full Name (Last, First, Middle Initial) A. THE ROSE SHOP | | Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012 | |
| Mailing Address 1910 East 10600 South | | Amount of Each Disbursement this Period 80.14 Transaction ID : SB17.45179 | |
| City Sandy | State UT | | Zip Code 84092 |
| Purpose of Disbursement Gifts for constituents | | | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

| | | | |
|--|---|---|-------------------|
| Full Name (Last, First, Middle Initial) B. Transfirst LLC | | Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2012 | |
| Mailing Address 3131 South Vaughn Way, Suite 350 Suite 350 | | Amount of Each Disbursement this Period 71.95 Transaction ID : SB17.45128 | |
| City Aurora | State CO | | Zip Code 80014 |
| Purpose of Disbursement Merchant account fees | | | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

| | | | |
|--|---|--|-------------------|
| Full Name (Last, First, Middle Initial) C. Transfirst LLC | | Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012 | |
| Mailing Address 3131 South Vaughn Way, Suite 350 Suite 350 | | Amount of Each Disbursement this Period 100.75 Transaction ID : SB17.45155 | |
| City Aurora | State CO | | Zip Code 80014 |
| Purpose of Disbursement Merchant account fees | | | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | | |
| State: UT | District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 252.84 |
| 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:
(check only one)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Transfirst LLC | | Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2012 |
| Mailing Address 3131 South Vaughn Way, Suite 350 Suite 350 | | Amount of Each Disbursement this Period 71.95 Transaction ID : SB17.45190 |
| City Aurora | State CO | |
| Purpose of Disbursement Merchant account fees | | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. West Beach Inn | | Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012 |
| Mailing Address 306 West Cabrillo Blvd. | | Amount of Each Disbursement this Period 393.50 Transaction ID : SB17.45137 |
| City Santa Barbara | State CA | |
| Purpose of Disbursement Travel - Hotels | | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. WILSON RESEARCH STRATEGIES | | Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2012 |
| Mailing Address 1319 CLASSEN DRIVE | | Amount of Each Disbursement this Period 973.60 Transaction ID : SB17.45234 |
| City OKLAHOMA CITY | State OK | |
| Purpose of Disbursement Professional service fees | | Category/ Type |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT | District: | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1439.05 |
| TOTAL This Period (last page this line number only)..... | |

13026000148

**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 33 OF 39 | |
| | <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Woomi Kyoto Sushi | | Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012 |
| Mailing Address 201 Massachusetts Ave., NE | | Amount of Each Disbursement this Period 56.13 Transaction ID : SB17.45193 |
| City Washington State DC Zip Code 20002 | Purpose of Disbursement Meeting with constituents & donors | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | Category/Type |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT District: | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Zions Bank | | Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012 |
| Mailing Address 1 South Main St. #18 | | Amount of Each Disbursement this Period 267.00 Transaction ID : SB17.45215 |
| City Salt Lake City State UT Zip Code 84101 | Purpose of Disbursement Bank fees | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | Category/Type |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT District: | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) c. Zoho Corporation | | Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2012 |
| Mailing Address 4900 Hopyard Rd. STE 310 | | Amount of Each Disbursement this Period 270.00 Transaction ID : SB17.45177 |
| City Pleasanton State CA Zip Code 94588 | Purpose of Disbursement Catering for event | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 593.13 |
| 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:
(check only one)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Zoho Corporation | | Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012 |
| Mailing Address 4900 Hopyard Rd. STE 310 | | Amount of Each Disbursement this Period 207.13 Transaction ID : SB17.45194 |
| City Pleasanton | State CA Zip Code 94588 | |
| Purpose of Disbursement Catering for event | Category/ Type | |
| Candidate Name FRIENDS OF MIKE LEE INC. | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention | |
| State: UT District: | | |

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

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

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) | 207.13 |
| TOTAL This Period (last page this line number only) | 56706.00 |

15020000150

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|--|----------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alta Club | | Nature of Debt (Purpose): Fundraising event venue |
| Mailing Address 100 East South Temple | | |
| City State | Zip Code | |
| Salt Lake City | UT 84111 | |

| | | | |
|---|---------------------|---|-----------------------------|
| Outstanding Balance Beginning This Period | | | Transaction ID : SD10.45053 |
| 2247.98 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 2247.98 | |

| | | |
|--|----------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor FOLEY & LARDNER LLP | | Nature of Debt (Purpose): Attorney fees |
| Mailing Address 3000 K STREET NW | | |
| City State | Zip Code | |
| WASHINGTON | DC 20007 | |

| | | | |
|---|---------------------|---|-----------------------------|
| Outstanding Balance Beginning This Period | | | Transaction ID : SD10.45063 |
| 7550.93 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 7550.93 | |

| | | |
|---|----------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor GUIDANT STRATEGIES | | Nature of Debt (Purpose): PRINTING, FUNDRAISING |
| Mailing Address 175 S WEST TEMPLE | | |
| City State | Zip Code | |
| SALT LAKE CITY | UT 84101 | |

| | | | |
|---|---------------------|---|-----------------------------|
| Outstanding Balance Beginning This Period | | | Transaction ID : SD10.44218 |
| 2891.87 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 2891.87 | |

| | |
|---|----------|
| 1) SUBTOTALS This Period This Page (optional) | 12690.78 |
| 2) TOTALS This Period (last page this line number only) | . |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | . |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | . |

13020000151

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | | |
|---|--------------------------------|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MIKE LEE | | Nature of Debt (Purpose): LOAN INTEREST | |
| Mailing Address 917 QUAIL HOLLOW CIRCLE | | | |
| City | State | Zip Code | |
| ALPINE | UT | 84004 | |
| Outstanding Balance Beginning This Period 2460.54 | | Transaction ID : SD10.37158 | |
| Amount Incurred This Period 0.00 | Payment This Period 2460.54 | Outstanding Balance at Close of This Period 0.00 | |
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MIKE LEE | | Nature of Debt (Purpose): LOAN INTEREST | |
| Mailing Address 917 QUAIL HOLLOW CIRCLE | | | |
| City | State | Zip Code | |
| ALPINE | UT | 84004 | |
| Outstanding Balance Beginning This Period 780.61 | | Transaction ID : SD10.37159 | |
| Amount Incurred This Period 0.00 | Payment This Period 780.61 | Outstanding Balance at Close of This Period 0.00 | |
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MIKE LEE | | Nature of Debt (Purpose): Loan interest | |
| Mailing Address 917 QUAIL HOLLOW CIRCLE | | | |
| City | State | Zip Code | |
| ALPINE | UT | 84004 | |
| Outstanding Balance Beginning This Period 874.25 | | Transaction ID : SD10.45058 | |
| Amount Incurred This Period 0.00 | Payment This Period 874.25 | Outstanding Balance at Close of This Period 0.00 | |

| | |
|---|------|
| 1) SUBTOTALS This Period This Page (optional) | 0.00 |
| 2) TOTALS This Period (last page this line number only) | . |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | . |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | . |

15020000152

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor McCauley & Associates PC | Nature of Debt (Purpose): Accounting & reporting fees |
| Mailing Address 10 West Broadway, Suite 500 | |
| City State Zip Code Salt Lake City UT 84101 | |

| | |
|--|---|
| Outstanding Balance Beginning This Period 3792.50 | Transaction ID : SD10.45055 |
| Amount Incurred This Period 0.00 | Outstanding Balance at Close of This Period 0.00 |
| Payment This Period 3792.50 | |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARR BROWN GEE & LOVELESS | Nature of Debt (Purpose): ATTORNEY FEES |
| Mailing Address PO BOX 11019 | |
| City State Zip Code SALT LAKE CITY UT 84147 | |

| | |
|--|--|
| Outstanding Balance Beginning This Period 2050.25 | Transaction ID : SD10.43978 |
| Amount Incurred This Period 0.00 | Outstanding Balance at Close of This Period 2050.25 |
| Payment This Period 0.00 | |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARR BROWN GEE & LOVELESS | Nature of Debt (Purpose): ATTORNEY FEES |
| Mailing Address PO BOX 11019 | |
| City State Zip Code SALT LAKE CITY UT 84147 | |

| | |
|---|---|
| Outstanding Balance Beginning This Period 309.95 | Transaction ID : SD10.44496 |
| Amount Incurred This Period 0.00 | Outstanding Balance at Close of This Period 309.95 |
| Payment This Period 0.00 | |

| | |
|---|---------|
| 1) SUBTOTALS This Period This Page (optional) | 2360.20 |
| 2) TOTALS This Period (last page this line number only) | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | |

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 38 OF 39 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARR BROWN GEE & LOVELESS | Nature of Debt (Purpose): Attorney fees |
| Mailing Address PO BOX 11019 | |
| City State Zip Code SALT LAKE CITY UT 84147 | |

| | | |
|---|---------------------|---|
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.45062 |
| 163.30 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 163.30 |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor SPENCER STOKES | Nature of Debt (Purpose): Expense reimbursement |
| Mailing Address 4259 SKYLINE DRIVE | |
| City State Zip Code OGDEN UT 84403 | |

| | | |
|---|---------------------|---|
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.45059 |
| 1928.67 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 1928.67 | 0.00 |

| | |
|--|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor TERRA ECLIPSE | Nature of Debt (Purpose): POLITICAL CONSULTING |
| Mailing Address 9043 SOQUEL DRIVE | |
| City State Zip Code APTOS CA 95003 | |

| | | |
|---|---------------------|---|
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.44219 |
| 6150.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 6150.00 |

| | |
|--|---------|
| 1) SUBTOTALS This Period This Page (optional) | 6313.30 |
| 2) TOTALS This Period (last page this line number only) | . |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | . |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | . |

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
FRIENDS OF MIKE LEE INC.

| | | |
|--|---------------------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor TERRA ECLIPSE | | Nature of Debt (Purpose): Political consulting |
| Mailing Address 9043 SOQUEL DRIVE | | |
| City APTOS | State CA Zip Code 95003 | |

| | | |
|---|------------------------------------|---|
| Outstanding Balance Beginning This Period | Transaction ID : SD10.45061 | |
| 10500.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 10500.00 |

| | | |
|--|----------------|---------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | Nature of Debt (Purpose): |
| Mailing Address | | |
| City | State Zip Code | |

| | | |
|---|---------------------|---|
| Outstanding Balance Beginning This Period | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| | | |

| | | |
|--|----------------|---------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | Nature of Debt (Purpose): |
| Mailing Address | | |
| City | State Zip Code | |

| | | |
|---|---------------------|---|
| Outstanding Balance Beginning This Period | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| | | |

| | |
|--|----------|
| 1) SUBTOTALS This Period This Page (optional) | 10500.00 |
| 2) TOTALS This Period (last page this line number only) | 31864.28 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | 0.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | 31864.28 |

13026000155

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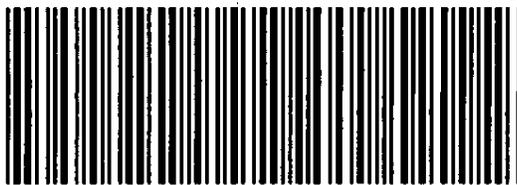
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