

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 315 WESTFIELD CIRCLE ALPINE UT 84004 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00431684 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT UT 03

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 ... in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on ... in the State of

5. Covering Period 01 / 01 / 2015 through 03 / 31 / 2015

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 Bruce Garfield Signature of Treasurer Bruce Garfield [Electronically Filed] Date 06 / 11 / 2015

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 grid and FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

FRIENDS OF JASON CHAFFETZ

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

	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))....	150622.00	183532.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	150622.00	183532.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	116120.91	173992.18
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	116120.91	173992.18
8. Cash on Hand at Close of Reporting Period (from Line 27).....	328878.77	
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).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

FRIENDS OF JASON CHAFFETZ

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

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).....	52400.00	59650.00
(ii) Unitemized.....	222.00	382.00
(iii) TOTAL of contributions from individuals ▶	52622.00	60032.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	98000.00	123500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	150622.00	183532.00
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.)		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	150622.00	183532.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	116120.91	173992.18
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	0.00
(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	0.00
21. OTHER DISBURSEMENTS	15000.00	17500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	131120.91	191492.18

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	309377.68
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	150622.00
25. SUBTOTAL (add Line 23 and Line 24).....	459999.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	131120.91
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	328878.77

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A
Transaction ID :

Form/Schedule:
Transaction ID:

**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 69
	<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	

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 JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
Victor R Nastasia

Mailing Address 183 Lake Glen Dr

City Carson City State NV Zip Code 89703-5216

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

Name of Employer United Naturals Occupation VP of Sales and Marketing

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : A94662254E1E34BCA8CC

Amount of Each Receipt this Period
 800.00

Contribution

B. Full Name (Last, First, Middle Initial)
Jeffery Tassey

Mailing Address 3738 30th PI N

City Arlington State VA Zip Code 22207-5307

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

Name of Employer Tassey & Associates Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : AABE7B8F8387143ACA38

Amount of Each Receipt this Period
 1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. William Mark Simmons

Mailing Address 3545 North Utah St

City Arlington State VA Zip Code 22207-4444

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

Name of Employer Dutko Worldwide Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : A403BBD4810CD4B77B41

Amount of Each Receipt this Period
 1000.00

Contribution

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

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

2800.00

**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 7 OF 69
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Mr. Alan Wood		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 25 / 2015	
Mailing Address 720 Westfield Rd		Transaction ID : AD95B78EC3242483C83A	
City Alpine	State UT	Zip Code 84004-1501	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00	
Name of Employer Self Employed	Occupation Real Estate Developer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Charles Dennis Anderson		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 18 / 2015	
Mailing Address 563 S Peralta Hills Dr		Transaction ID : A61A827F7693F46B2AB7	
City Anaheim	State CA	Zip Code 92807-3520	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Anderson Seafoods, Inc.	Occupation Executive		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. Amy Pellegrino		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2015	
Mailing Address 3913 17th PI NE		Transaction ID : A03365051772147DD968	
City Washington	State DC	Zip Code 20018-2315	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer The Podesta Group	Occupation Manager		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	1575.00
TOTAL This Period (last page this line number only).....	1575.00

**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 8 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
Mark R Paoletta

Mailing Address 6714 Marbo Court

City Falls Church State VA Zip Code 22046-2353

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

Name of Employer DLA Piper Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : AEA4C1361812845BE930

Amount of Each Receipt this Period
 Contribution 1000.00

B. Full Name (Last, First, Middle Initial)
Missi Tessier

Mailing Address 6039 Franklin Park Rd.

City Mc Lean State VA Zip Code 22101-4212

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

Name of Employer The Podesta Group Occupation Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2015

Transaction ID : A5FCE7156286744D7A46

Amount of Each Receipt this Period
 Contribution 500.00

C. Full Name (Last, First, Middle Initial)
Paul V Phillips

Mailing Address 15025 SW 137th PI

City Portland State OR Zip Code 97224-1542

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : A18EB7D18BF4544099F1

Amount of Each Receipt this Period
 Contribution 2500.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 9 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
David Levine

Mailing Address 230 W Superior

City Chicago State IL Zip Code 60654-3595

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

Name of Employer United Naturals Occupation Associate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2015

Transaction ID : AF82FA6A3876743CF85F

Amount of Each Receipt this Period
 Contribution 800.00

B. Full Name (Last, First, Middle Initial)
Harry Weiss

Mailing Address 7020 Armat Dr

City Bethesda State MD Zip Code 20817-2104

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

Name of Employer WilmerHale Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2015

Transaction ID : A54D382A9B8F34ABEB97

Amount of Each Receipt this Period
 Contribution 2500.00

C. Full Name (Last, First, Middle Initial)
Mr. Alan Wood

Mailing Address 720 Westfield Rd

City Alpine State UT Zip Code 84004-1501

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

Name of Employer Self Employed Occupation Real Estate Developer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2015

Transaction ID : A52FFF44CA2A44664A12

Amount of Each Receipt this Period
 Contribution 75.00

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

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

3375.00

**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 10 OF 69
	<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 JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
C. Dan Adams

Mailing Address 84 Villa Rd

City Greenville State SC Zip Code 29615-3052

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

Name of Employer Capital Corp. Private Equity Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : AC957D73C99394F3ABB4

Amount of Each Receipt this Period
 Contribution 1000.00

B. Full Name (Last, First, Middle Initial)
Kirsten Chadwick

Mailing Address 601 President Ford Ln

City Alexandria State VA Zip Code 22302-3033

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

Name of Employer Fierce And Co. Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : A576F8D0CFAF042B3BFC

Amount of Each Receipt this Period
 Contribution 500.00

C. Full Name (Last, First, Middle Initial)
Christa Matte

Mailing Address 439 Elm Twin Ct

City Linthicum Heights State MD Zip Code 21090-2158

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

Name of Employer CAN Manufacturers Institute Occupation Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2015

Transaction ID : AD9D0D6912D064B6F81D

Amount of Each Receipt this Period
 Contribution 2600.00

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Aleix Jarvis		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 16 / 2015	
Mailing Address 1306 Clayborne House Ct		Transaction ID : AA2DD5D65F86C4896A4B	
City Mc Lean	State VA	Zip Code 22101-2402	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Partner	Occupation Fierce Iskowitz & Blalock		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) B. Stephen Rademaker		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 26 / 2015	
Mailing Address 1620 Brookside Rd		Transaction ID : ADFFD56393AE14FE0831	
City Mc Lean	State VA	Zip Code 22101-3306	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer The Podesta Group	Occupation Manager		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. David Morgenstern		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 27 / 2015	
Mailing Address 414 I St NE		Transaction ID : AC2B09F8FACFF4C12A1C	
City Washington	State DC	Zip Code 20002-4344	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Podesta Group	Occupation Principal		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Mr. Robert C OBrien		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 25 / 2015	
Mailing Address 524 Dartmouth Pl		Transaction ID : A01A227D325B24378A37	
City La Canada Flintrid	State CA	Zip Code 91011-4024	Amount of Each Receipt this Period Contribution 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Arent Fox Llp	Occupation Managing Partner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. Thomas V Brown		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 18 / 2015	
Mailing Address 24 Oak Lane		Transaction ID : A8595916BE1464AEE9A5	
City Spencer	State MA	Zip Code 01562-2910	Amount of Each Receipt this Period Contribution 800.00
FEC ID number of contributing federal political committee. C			
Name of Employer United Naturals	Occupation Director of Sales		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00		

Full Name (Last, First, Middle Initial) C. Elizabeth Frazee		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 30 / 2015	
Mailing Address 6313 Evermay Dr		Transaction ID : AC686FC6824AB4200977	
City Mc Lean	State VA	Zip Code 22101-2309	Amount of Each Receipt this Period Contribution 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Twin Logic Strategies LLP	Occupation Attorney/Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	2800.00
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 13 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Michael D Bopp		Date of Receipt M M / D D / Y Y Y Y Y 02 / 25 / 2015	
Mailing Address 1409 Bishop Ln		Transaction ID : AA144D7C28FBF447894A	
City Alexandria	State VA	Zip Code 22302-3403	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 1500.00	
Name of Employer Gibson Dunn & Crutcher	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 1500.00		

Full Name (Last, First, Middle Initial) B. Kyle McSlarrow		Date of Receipt M M / D D / Y Y Y Y Y 03 / 12 / 2015	
Mailing Address 3162 E Eagle View Cir		Transaction ID : AB78D20B4331D4F30A88	
City Sandy	State UT	Zip Code 84092-4916	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 2600.00	
Name of Employer Comcast	Occupation Vice President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 2600.00		

Full Name (Last, First, Middle Initial) C. David Jory		Date of Receipt M M / D D / Y Y Y Y Y 03 / 24 / 2015	
Mailing Address 4528 Macomb St NW		Transaction ID : AAC65961A1CDD445F828	
City Washington	State DC	Zip Code 20016-2753	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 250.00	
Name of Employer Capitol Hill Consulting	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 250.00		

SUBTOTAL of Receipts This Page (optional).....	4350.00
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 14 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
Mark G Borden

Mailing Address 195 Cliff Rd

City Wellesley Hills State MA Zip Code 02481-1343

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

Name of Employer WilmerHale Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : A9DF882B7105948FFB3E

Amount of Each Receipt this Period
 2500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. David Marin

Mailing Address 12201 Hounds Ln

City Reston State VA Zip Code 20191-2616

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

Name of Employer Podesta Group Occupation Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : A649CDC10253E43D8A5E

Amount of Each Receipt this Period
 2000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Elizabeth Morra

Mailing Address 6219 Poindexter Ln

City Rockville State MD Zip Code 20852-3642

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

Name of Employer The Podesta Group Occupation Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2015

Transaction ID : A050D2BF518A745FCB99

Amount of Each Receipt this Period
 500.00

Contribution

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

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

5000.00

**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 15 OF 69
	<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 JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
Joshua H Soven

Mailing Address 1307 P Street NW

City Washington State DC Zip Code 20005-3721

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

Name of Employer Gibson Dunn & Crutcher Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : AAF352A9084394793877

Amount of Each Receipt this Period
 500.00

Contribution

B. Full Name (Last, First, Middle Initial)
William R McLucas

Mailing Address 1958 Virginia Ave

City Mc Lean State VA Zip Code 22101-4939

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

Name of Employer WilmerHale Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : AF6BAF8A6C1944337BD4

Amount of Each Receipt this Period
 2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
James L Quarles III

Mailing Address 4 Carvel Circle

City Bethesda State MD Zip Code 20816-1808

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

Name of Employer WilmerHale Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : A38682B9F9D214C84BC5

Amount of Each Receipt this Period
 2500.00

Contribution

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
Ralph S Cunningham

Mailing Address 5128 Tangle Ln

City State Zip Code
Houston TX 77056-2116

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2015

Transaction ID : A40CBF3C132654556A75

Amount of Each Receipt this Period
Contribution
2000.00

B. Full Name (Last, First, Middle Initial)
Michael J Quaranta

Mailing Address 300 Delaware St

City State Zip Code
New Castle DE 19720-5038

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

Name of Employer Information Requested
Podesta Group
Occupation Information Requested
Associate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 03 / 2015

Transaction ID : A088F5E74097C4C66B94

Amount of Each Receipt this Period
Contribution
500.00

C. Full Name (Last, First, Middle Initial)
James Skurchak

Mailing Address 8 Salisbury Lane

City State Zip Code
Long Valley NJ 07853-6112

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

Name of Employer Information Requested
United Naturals
Occupation Information Requested
Director of Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2015

Transaction ID : AE5AAE972CE774ABFB32

Amount of Each Receipt this Period
Contribution
800.00

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

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

3300.00

**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 17 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Gregory Barnes
Full Name (Last, First, Middle Initial)
Mailing Address 5513 44th Ave

City Hyattsville	State MD	Zip Code 20781-1649
---------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : AA4FCE7929DA14E67934

Amount of Each Receipt this Period
500.00
Contribution

B. Richard Marriott
Full Name (Last, First, Middle Initial)
Mailing Address 10840 Pleasant Hill Dr

City Potomac	State MD	Zip Code 20854-1511
-----------------	-------------	------------------------

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

Name of Employer Hotel	Occupation Host
---------------------------	--------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2015

Transaction ID : AFC752DE88501404D80F

Amount of Each Receipt this Period
2500.00
Contribution

C. Reginald Brown
Full Name (Last, First, Middle Initial)
Mailing Address 317 Mansion Dr

City Alexandria	State VA	Zip Code 22302-2904
--------------------	-------------	------------------------

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

Name of Employer WilmerHale	Occupation Partner
--------------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2015

Transaction ID : A7F5DD7F9FD38419587B

Amount of Each Receipt this Period
2500.00
Contribution

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

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

5500.00

**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 18 OF 69
	<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 JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
Josh Holly

Mailing Address 825 S Monroe St

City State Zip Code
Arlington VA 22204-1537

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

Name of Employer Occupation
The Podesta Group Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : A62A97D5184F7443BA43

Amount of Each Receipt this Period
500.00
Contribution

B. Full Name (Last, First, Middle Initial)
Thomas M Davis III

Mailing Address 2213 Arynness Dr

City State Zip Code
Vienna VA 22181-3047

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

Name of Employer Occupation
Delotte Director, Government Affairs

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2015

Transaction ID : A4AC85ABA0729498696B

Amount of Each Receipt this Period
1000.00
Contribution

C. Full Name (Last, First, Middle Initial)
Danielle Maurer

Mailing Address 2507 N. Vernon St.

City State Zip Code
Arlington VA 22207-4008

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 27 / 2015

Transaction ID : AA8B14CE54CF94BABA52

Amount of Each Receipt this Period
500.00
Contribution

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 69
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Robert R Budway		Date of Receipt M M / D D / Y Y Y Y Y 03 / 12 / 2015	
Mailing Address 6032 4th St N		Transaction ID : AF583ABA983644481A6B	
City Arlington	State VA	Zip Code 22203-1076	Amount of Each Receipt this Period _____ Contribution 2600.00
FEC ID number of contributing federal political committee.		C	
Name of Employer CAN Manufacturers Institute	Occupation President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2600.00		

Full Name (Last, First, Middle Initial) B. Kimberley Fritts		Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2015	
Mailing Address 3847 N River St		Transaction ID : AFB74FBE173484FAFB2B	
City Arlington	State VA	Zip Code 22207-4649	Amount of Each Receipt this Period _____ Contribution 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer The Podesta Group	Occupation Manager		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) C. Matthew Johnson		Date of Receipt M M / D D / Y Y Y Y Y 03 / 26 / 2015	
Mailing Address 5608 Grove St		Transaction ID : A994326CE5E1044A2AE0	
City Chevy Chase	State MD	Zip Code 20815-3421	Amount of Each Receipt this Period _____ Contribution 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer The Podesta Group	Occupation Manager		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 3600.00
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 20 OF 69
<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 JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
John P Venardos

Mailing Address 448 32nd St

City Manhattan Beach State CA Zip Code 90266-3929

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

Name of Employer ZAG Occupation VP of Government Affairs

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : AA43EAB8FC79049C09AE

Amount of Each Receipt this Period
 Contribution 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

52400.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 21 OF 69

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
American Hospital Association PAC

Mailing Address 325 Seventh Street, NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : A03BBAA56AE42424281C

Amount of Each Receipt this Period
 Contribution **1000.00**

B. Full Name (Last, First, Middle Initial)
International Council of Shopping Centers

Mailing Address Political Action Committee
 555 12th St NW

City Washington State DC Zip Code 20004-1200

FEC ID number of contributing federal political committee. **C C00217638**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 24 / 2015

Transaction ID : A3044502A3C254445A2F

Amount of Each Receipt this Period
 Contribution **2500.00**

C. Full Name (Last, First, Middle Initial)
Crown Cork & Seal Co PAC

Mailing Address One Crown Way

City Philadelphia State PA Zip Code 19154-4501

FEC ID number of contributing federal political committee. **C C00254268**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : A105F9C72C8754C0C8F2

Amount of Each Receipt this Period
 Contribution **1000.00**

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 69
	<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	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. General Electric PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2015
Mailing Address 1299 Pennsylvania Ave, NW		Transaction ID : AA0F56DEB9F2D4A1BB60
City Washington	State DC	
Zip Code 20004		Amount of Each Receipt this Period 1000.00 Contribution
FEC ID number of contributing federal political committee. C C00024869		
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. KOCHPAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2015
Mailing Address 600 14th St NW Ste 800		Transaction ID : AD83F2C32B7B04FF98E5
City Washington	State DC	
Zip Code 20005-2099		Amount of Each Receipt this Period 2500.00 Contribution
FEC ID number of contributing federal political committee. C C00236489		
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) C. Deloitte Federal Political Action Commit		Date of Receipt M M / D D / Y Y Y Y Y 02 / 18 / 2015
Mailing Address PO Box 365		Transaction ID : A37E0FBA82372494E916
City Washington	State DC	
Zip Code 20044-0365		Amount of Each Receipt this Period 1000.00 Contribution
FEC ID number of contributing federal political committee. C C00211318		
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 69
	<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	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
FAAMA PAC

Mailing Address 1015 Atlanta Blvd, Suite 245

City Atlantic Beach State FL Zip Code 32233-3313

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : A8E5D4B76FCAC47208A8

Amount of Each Receipt this Period
 Contribution 2500.00

B. Full Name (Last, First, Middle Initial)
Ball Corp PAC

Mailing Address PO Box 5000

City Broomfield State CO Zip Code 80038-5000

FEC ID number of contributing federal political committee. **C C00039461**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2015

Transaction ID : ABDFA5286FE414FE9AB2

Amount of Each Receipt this Period
 Contribution 5000.00

C. Full Name (Last, First, Middle Initial)
RR Donnelley Good Govt Fund

Mailing Address 111 S Wacker Dr

City Chicago State IL Zip Code 60601-4301

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 13 / 2015

Transaction ID : AAC00CED502894FF88E5

Amount of Each Receipt this Period
 Contribution 2500.00

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

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

10000.00

**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 24 OF 69
	<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	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Pork PAC

Full Name (Last, First, Middle Initial)
Pork PAC

Mailing Address PO Box 10383

City Des Moines State IA Zip Code 50306-0383

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : AF9E3B0CAE7B64BD2A60

Amount of Each Receipt this Period
 1000.00
 Contribution

B. United For Health PAC

Full Name (Last, First, Middle Initial)
United For Health PAC

Mailing Address 701 Pennsylvania Ave, NW
Suite 650

City Washington State DC Zip Code 20004-2608

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : A0CF69B60AC674D3FAAB

Amount of Each Receipt this Period
 5000.00
 Contribution

C. PrintPAC

Full Name (Last, First, Middle Initial)
PrintPAC

Mailing Address Printing Industries of America
601 13th St NW, Ste 360 N

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00018028

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2015

Transaction ID : A61FCF89B99D54020980

Amount of Each Receipt this Period
 1000.00
 Contribution

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 25 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
Cardiology Advocacy Alliance Inc PAC

Mailing Address 2050 Kings Circle South

City State Zip Code
Neptune Beach FL 32266-1616

FEC ID number of contributing federal political committee. **C C00421040**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 04 / 2015

Transaction ID : AC6A365C09CCF4B58B0A

Amount of Each Receipt this Period
1000.00
Contribution

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

Mailing Address The Hallmark Political Action Comm
PO Box 419580 MD 288

City State Zip Code
Kansas City MO 64141-6580

FEC ID number of contributing federal political committee. **C C00000059**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 17 / 2015

Transaction ID : ACC70D2E2783D4A1F865

Amount of Each Receipt this Period
1000.00
Contribution

C. Full Name (Last, First, Middle Initial)
Safari Club International PAC

Mailing Address 4800 W. Gates Pass Rd.

City State Zip Code
Tucson AZ 85745

FEC ID number of contributing federal political committee. **C C00122101**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 18 / 2015

Transaction ID : A4D945FFA44084C9D9F3

Amount of Each Receipt this Period
2000.00
Contribution

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

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

4000.00

**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 26 OF 69
	<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	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

Full Name (Last, First, Middle Initial) Metlife, Inc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2015	
Mailing Address 1095 Avenue of the Americas		Transaction ID : A6E0EAC5CA3CD4800B64	
City State Zip Code New York NY 10036	Amount of Each Receipt this Period Contribution 1000.00		
FEC ID number of contributing federal political committee. C C00040923	Election Cycle-to-Date 1000.00		
Name of Employer Occupation	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) TargetCitizens Political Forum		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2015	
Mailing Address 1000 Nicollet Mall - TPS 3275		Transaction ID : A0A46435B1DC74DD8B79	
City State Zip Code Minneapolis MN 55403-2542	Amount of Each Receipt this Period Contribution 2500.00		
FEC ID number of contributing federal political committee. C	Election Cycle-to-Date 2500.00		
Name of Employer Occupation	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Action Comm For Rural Electrification PA		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2015	
Mailing Address 4301 Wilson Blvd		Transaction ID : A64A9F50ED55F47B4B20	
City State Zip Code Arlington VA 22203-1860	Amount of Each Receipt this Period Contribution 2500.00		
FEC ID number of contributing federal political committee. C C00008169	Election Cycle-to-Date 2500.00		
Name of Employer Occupation	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	6000.00

**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 27 OF 69
	<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	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Best Buy Employee Political Forum

Full Name (Last, First, Middle Initial)
Mailing Address 7601 Penn Ave. South

City	State	Zip Code
Richfield	MN	55423-3645

FEC ID number of contributing federal political committee. **C** C00405076

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2015

Transaction ID : A50C15210EC824A3A862

Amount of Each Receipt this Period
 _____ 2500.00
 Contribution

B. Capital One Financial Corp Assoc Politic

Full Name (Last, First, Middle Initial)
Mailing Address 1680 Capital One Drive

City	State	Zip Code
Mc Lean	VA	22102

FEC ID number of contributing federal political committee. **C** C00326595

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2015

Transaction ID : A54ED6E7BAC8A48CB8FC

Amount of Each Receipt this Period
 _____ 1000.00
 Contribution

C. Arent Fox LLP Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 1717 K Street NW

City	State	Zip Code
Washington	DC	20036-5342

FEC ID number of contributing federal political committee. **C** C00241380

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : AB574479FA65E4BAE90E

Amount of Each Receipt this Period
 _____ 5000.00
 Contribution

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

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

_____ 8500.00

**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 28 OF 69
	<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	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Retail PAC

Full Name (Last, First, Middle Initial)
Retail PAC

Mailing Address 325 7th St NW Suite 1100

City Washington State DC Zip Code 20004-2825

FEC ID number of contributing federal political committee. **C** C00040329

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : ACCA55B41C48A4AD99D7

Amount of Each Receipt this Period
 2500.00
 Contribution

B. Comcast Corporation PAC

Full Name (Last, First, Middle Initial)
Comcast Corporation PAC

Mailing Address 1701 JFK Boulevard

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : AD1C1F116EBB347BD806

Amount of Each Receipt this Period
 2500.00
 Contribution

C. Merit Medical Systems, Inc PAC

Full Name (Last, First, Middle Initial)
Merit Medical Systems, Inc PAC

Mailing Address 1600 West Merit Parkway

City South Jordan State UT Zip Code 84095-2416

FEC ID number of contributing federal political committee. **C** C00475343

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2015

Transaction ID : A7B758C70E2124479A56

Amount of Each Receipt this Period
 2500.00
 Contribution

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

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

7500.00

**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 29 OF 69
	<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	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
Oracle USA, Inc. PAC

Mailing Address 1015 15th St, NW, Ste 200

City Washington State DC Zip Code 20005-2635

FEC ID number of contributing federal political committee. **C** C00323048

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : A273BE37237A04E81A91

Amount of Each Receipt this Period
 2500.00
 Contribution

B. Full Name (Last, First, Middle Initial)
AFLAC Inc PAC

Mailing Address 1932 Wynnton Rd

City Columbus State GA Zip Code 31999-0001

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : A6C5EE10CD3774C25BE4

Amount of Each Receipt this Period
 1000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Consumer Electronics Assoc. PAC

Mailing Address 1919 S. Eads St.

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00375048

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : A9E64E127E8E547CE80A

Amount of Each Receipt this Period
 2500.00
 Contribution

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

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

6000.00

**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 30 OF 69
	<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	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
American Society Of Association Executiv

Mailing Address 1575 I St NW
1575 I Street, NW

City Washington State DC Zip Code 20005-1105

FEC ID number of contributing federal political committee. **C** C00041566

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 17 / 2015

Transaction ID : AB606C72E5B6E4DD5BF0

Amount of Each Receipt this Period
Contribution 1000.00

B. Full Name (Last, First, Middle Initial)
National Beer Wholesalers Assn. PAC

Mailing Address 1101 King St, Ste 600

City Alexandria State VA Zip Code 22314-2944

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2015

Transaction ID : AF8A46F7179D749E89B3

Amount of Each Receipt this Period
Contribution 5000.00

C. Full Name (Last, First, Middle Initial)
Verizon Wireless Good Government Club

Mailing Address 1300 I St NW 4th Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 24 / 2015

Transaction ID : A9B1CFE9882C84CE0B13

Amount of Each Receipt this Period
Contribution 2000.00

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

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

8000.00

**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 31 OF 69
	<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	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. CRN PAC - Council Responsible Nutrition
 Full Name (Last, First, Middle Initial)
 Mailing Address 1828 L St, NW, Ste 510
 City Washington State DC Zip Code 20036-5102
 FEC ID number of contributing federal political committee. **C** C00399659
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015
Transaction ID : A7823B42E7340488DB17
 Amount of Each Receipt this Period
 Contribution 2500.00

B. DLA Piper PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 8th St, NW
 City Washington State DC Zip Code 20004-2131
 FEC ID number of contributing federal political committee. **C** C00151340
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2015
Transaction ID : AFA272A3E9D474BF9A7E
 Amount of Each Receipt this Period
 Contribution 500.00

C. The Goldman Sachs Group, Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Constitution Ave, NW Suite 100
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C** C00350744
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2015
Transaction ID : AA916CAE2C78E41068FC
 Amount of Each Receipt this Period
 Contribution 5000.00

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

8000.00

**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 32 OF 69
	<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	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
Caremark RX Inc. Employee's PAC

Mailing Address 1300 I St, NW Suite 525 West

City Washington State DC Zip Code 20005-3336

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : AEF9632DB0655401C89E

Amount of Each Receipt this Period
 Contribution 2500.00

B. Full Name (Last, First, Middle Initial)
Sidley Austin LLP Good Govt Fund

Mailing Address 787 Seventh Ave

City New York State NY Zip Code 10019-6018

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2015

Transaction ID : A511CDA053F0A46B5BB0

Amount of Each Receipt this Period
 Contribution 1000.00

C. Full Name (Last, First, Middle Initial)
Gibson Dunn & Crutcher, LLP PAC

Mailing Address 333 S Grand Ave, 44th Floor

City Los Angeles State CA Zip Code 90071-1504

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : A30848F43E1AA4BFA96B

Amount of Each Receipt this Period
 Contribution 1500.00

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

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

5000.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 33 OF 69

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
Pfizer PAC

Mailing Address 235 East 42nd St

City New York State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C C00016683**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2015

Transaction ID : ACFAAC46C3D9F4821860

Amount of Each Receipt this Period
 Contribution 5000.00

B. Full Name (Last, First, Middle Initial)
Amazon Corporate LLC

Mailing Address 126 C St NW
 126 C Street, NW

City Washington State DC Zip Code 20001-2118

FEC ID number of contributing federal political committee. **C C00360354**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2015

Transaction ID : A2E09AA5A27B94265A14

Amount of Each Receipt this Period
 Contribution 2500.00

C. Full Name (Last, First, Middle Initial)
King & Spalding Nonpartisan Committee For Good Government

Mailing Address 1180 Peachtree St NE

City Atlanta State GA Zip Code 30309-3531

FEC ID number of contributing federal political committee. **C C00204453**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : A6D140FD339E7430DA22

Amount of Each Receipt this Period
 Contribution 2500.00

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

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

10000.00

**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 34 OF 69
	<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	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
BluePac-Blue Cross and Blue Shield Assoc. PAC

Mailing Address 1310 G St. NW, 12th Floor

City Washington State DC Zip Code 20005-3007

FEC ID number of contributing federal political committee. **C C00194746**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : A7D37D2AE6E0345C7A30

Amount of Each Receipt this Period
 Contribution 2000.00

B. Full Name (Last, First, Middle Initial)
Delta Air Lines PAC

Mailing Address 1212 New York Ave, NY

City Washington State DC Zip Code 20005-6609

FEC ID number of contributing federal political committee. **C C00104802**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2015

Transaction ID : A25A507D3E2D04B4DB5E

Amount of Each Receipt this Period
 Contribution 2500.00

C. Full Name (Last, First, Middle Initial)
Altria Group, INC PAC

Mailing Address 101 Constitution Ave NW

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : AC8EF3C50CAAE4E9484D

Amount of Each Receipt this Period
 Contribution 2500.00

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

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

7000.00

**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 35 OF 69
	<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	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
Amgen PAC

Mailing Address One Amgen Center Dr

City State Zip Code
Thousand Oaks CA 91320-1730

FEC ID number of contributing federal political committee. **C C00251876**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : A5A7996983D3348CBB43

Amount of Each Receipt this Period
 1000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Wal-Mart Stores, Inc. PAC

Mailing Address 702 SW 8th Street

City State Zip Code
Bentonville AR 72716

FEC ID number of contributing federal political committee. **C C00093054**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2015

Transaction ID : A78DE2738103F489DBDD

Amount of Each Receipt this Period
 1000.00
 Contribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2000.00

98000.00

**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)		PAGE 36 OF 69	
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2015
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 910.00 Transaction ID : B1018BA1B7AB844CB887
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Daryl Acumen		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2015
Mailing Address 3818 W Morgan Blvd		Amount of Each Disbursement this Period 73.44 Transaction ID : BF89D9EDAF65C433BBC0
City Cedar Hills	State UT	
Zip Code 84062-8809	Purpose of Disbursement Office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Kan Enterprises		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2015
Mailing Address 227 S 770 E		Amount of Each Disbursement this Period 2263.16 Transaction ID : B5DFB961DED6A4155BE9
City Salem	State UT	
Zip Code 84653-8222	Purpose of Disbursement Campaign consultant, phone and mileage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3246.60
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 37 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. The Ink Spot		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2015
Mailing Address 255 N State St		Amount of Each Disbursement this Period 9000.00 Transaction ID : B3F6CB3F08AA243E6869
City Orem	State UT	
Zip Code 84057-4745	Purpose of Disbursement Constituent Gifts	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Jason Chaffetz		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address 315 Westfield Cir		Amount of Each Disbursement this Period 458.30 Transaction ID : B779A176C3BEE462FBE6
City Alpine	State UT	
Zip Code 84004-1594	Purpose of Disbursement Reimbursement - meals, internet, fuel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. The Ink Spot		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2015
Mailing Address 255 N State St		Amount of Each Disbursement this Period 363.75 Transaction ID : B3B727802A6FD469FA8C
City Orem	State UT	
Zip Code 84057-4745	Purpose of Disbursement Constituent Gifts	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	9822.05
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 38 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Podesta Group		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015
Mailing Address 1001 G St, NW Suite 1000 W		Amount of Each Disbursement this Period 495.00 Transaction ID : BB3C1D02448E542FAA4B
City Washington State DC Zip Code 20001-4545	Purpose of Disbursement Events	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Utah Valley University		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2015
Mailing Address 800 W University Ave		Amount of Each Disbursement this Period 250.00 Transaction ID : BAE8C894C06874207B6C
City Orem State UT Zip Code 84058-6703	Purpose of Disbursement Lockhart Scholarship Fund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Reid Johns Design		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2015
Mailing Address 2002 Crescent Dr		Amount of Each Disbursement this Period 250.00 Transaction ID : B0CEE49504FC74BAD89C
City Mapleton State UT Zip Code 84664-4615	Purpose of Disbursement Mailer design	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	995.00
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 39 OF 69	
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Daryl Acumen		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2015
Mailing Address 3818 W Morgan Blvd		Amount of Each Disbursement this Period 352.59 Transaction ID : BF187131AB93F4D2F80F
City Cedar Hills State UT Zip Code 84062-8809	Purpose of Disbursement Office supplies - iPad	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Daryl Acumen		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2015
Mailing Address 3818 W Morgan Blvd		Amount of Each Disbursement this Period 1000.00 Transaction ID : B64F647ED3FB441ABA98
City Cedar Hills State UT Zip Code 84062-8809	Purpose of Disbursement Campaign Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Utah County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2015
Mailing Address c/o Marian Monnahan PO Box 531		Amount of Each Disbursement this Period 2000.00 Transaction ID : B7F42CEE5DC5A4EC9A90
City Provo State UT Zip Code 84603	Purpose of Disbursement Events	
Candidate Name Utah County Republican Party	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3352.59
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 40 OF 69	
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Caplin & Drysdale		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 1 Thomas Cir NW Ste 1100		Amount of Each Disbursement this Period 266.00 Transaction ID : B8946D86FB8E64E4E802
City Washington	State DC Zip Code 20005-5812	
Purpose of Disbursement Legal fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hawkins Cloward & Simister		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address PO Box 971810 Ste 1		Amount of Each Disbursement this Period 2500.00 Transaction ID : B3F87B78C4C984D1CA97
City Orem	State UT Zip Code 84097-1810	
Purpose of Disbursement Accounting fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Kan Enterprises		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2015
Mailing Address 227 S 770 E		Amount of Each Disbursement this Period 2348.09 Transaction ID : B15E40E281A6643DBA96
City Salem	State UT Zip Code 84653-8222	
Purpose of Disbursement Campaign consultant, phone and mileage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5114.09
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 41 OF 69		
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Emery County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2015
Mailing Address PO Box 118		Amount of Each Disbursement this Period 250.00 Transaction ID : BEAB08D9D7C4445369DE
City Huntington	State UT	
Zip Code 84528	Purpose of Disbursement Contribution	Category/ Type
Candidate Name Emery County Republican Party	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Utah Republican Party		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2015
Mailing Address 117 East South Temple		Amount of Each Disbursement this Period 2500.00 Transaction ID : B38541A0293C24544806
City Salt Lake City	State UT	
Zip Code 84111	Purpose of Disbursement Contribution	Category/ Type
Candidate Name Utah Republican Party	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) c. Wells Fargo Business Card		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2015
Mailing Address PO Box 54349		Amount of Each Disbursement this Period 50.00 Transaction ID : BD061B42BB51544A8A7F
City Los Angeles	State CA	
Zip Code 90054-0349	Purpose of Disbursement Annual fees	Category/ Type
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2800.00
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 42 OF 69			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Authorize.net		Date of Disbursement MM / DD / YYYY 02 / 05 / 2015
Mailing Address PO Box 947		Amount of Each Disbursement this Period 195.65 Transaction ID : B1042865A6FAA4DB89CA
City American Fork	State UT	
Zip Code 84003-0947	Purpose of Disbursement Merchant fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. E.M. Rahal & Company		Date of Disbursement MM / DD / YYYY 02 / 10 / 2015
Mailing Address 4101 Cathedral Avenue, Northwest Suite 707		Amount of Each Disbursement this Period 3606.84 Transaction ID : B0F1678E1ED7B4404AC2
City Washington	State DC	
Zip Code 20016-3598	Purpose of Disbursement Fundraising consultant	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Daryl Acumen		Date of Disbursement MM / DD / YYYY 02 / 10 / 2015
Mailing Address 3818 W Morgan Blvd		Amount of Each Disbursement this Period 352.59 Transaction ID : B7462D47B16CF4786839
City Cedar Hills	State UT	
Zip Code 84062-8809	Purpose of Disbursement Office Supplies - iPad	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4155.08
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 43 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Carbon County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2015
Mailing Address P.O. Box 266		Amount of Each Disbursement this Period 250.00 Transaction ID : BF1D8708421EA4759BBA
City Lehighton State PA Zip Code 18235	Purpose of Disbursement Event	
Candidate Name Carbon County Republican Party	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jason Brown		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 3221 E Delcoa		Amount of Each Disbursement this Period 250.00 Transaction ID : BECE74E723DE84907893
City Phoenix State AZ Zip Code 85032-6112	Purpose of Disbursement Webpage design	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Aristotle		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2015
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 2100.00 Transaction ID : B97E384F6162E491DA8F
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2600.00
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 44 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. The Ink Spot		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2015
Mailing Address 255 N State St		Amount of Each Disbursement this Period 8954.81 Transaction ID : BBC97FCF54E4049E19A2
City Orem	State UT Zip Code 84057-4745	
Purpose of Disbursement Constituent Gifts	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hawkins Cloward & Simister		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2015
Mailing Address PO Box 971810 Ste 1		Amount of Each Disbursement this Period 2500.00 Transaction ID : B17E99DB561654D6ABFA
City Orem	State UT Zip Code 84097-1810	
Purpose of Disbursement Accounting fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Silver Bullet, Llc		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2015
Mailing Address 101 Convention Center Dr, Suite 70		Amount of Each Disbursement this Period 2220.00 Transaction ID : B6463DD20037A498CBE3
City Las Vegas	State NV Zip Code 89109-2007	
Purpose of Disbursement Fundraising expenses	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	13674.81
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 45 OF 69	
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Daryl Acumen		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2015
Mailing Address 3818 W Morgan Blvd		Amount of Each Disbursement this Period 1000.00 Transaction ID : BDFDE8FFD7154374802
City Cedar Hills	State UT Zip Code 84062-8809	
Purpose of Disbursement Campaign Consultant	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 495.30 Transaction ID : BD9EB81FBE231440AB3B
City Washington	State DC Zip Code 20003-1801	
Purpose of Disbursement Events	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Kan Enterprises		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address 227 S 770 E		Amount of Each Disbursement this Period 2316.50 Transaction ID : BD207CD9050DB4E6EB28
City Salem	State UT Zip Code 84653-8222	
Purpose of Disbursement Campaign consultant, phone and mileage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3811.80
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 46 OF 69	
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address PO Box 947		Amount of Each Disbursement this Period 162.90 Transaction ID : B59EF12509A1C426FA65
City American Fork	State UT	
Zip Code 84003-0947	Purpose of Disbursement Merchant fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. E.M. Rahal & Company		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015
Mailing Address 4101 Cathedral Avenue, Northwest Suite 707		Amount of Each Disbursement this Period 9485.00 Transaction ID : BB29402401F1840FC85D
City Washington	State DC	
Zip Code 20016-3598	Purpose of Disbursement Fundraising consultant	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. LJ Properties		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015
Mailing Address 874 Crescent Dr		Amount of Each Disbursement this Period 500.00 Transaction ID : B576F0EA3B98345AB826
City Mapleton	State UT	
Zip Code 84664-5614	Purpose of Disbursement Campaign consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	10147.90
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 47 OF 69	
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Grand County GOP		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015
Mailing Address 95 Arches Dr		Amount of Each Disbursement this Period 250.00 Transaction ID : B04E0C8EC5822438581C
City Moab	State UT Zip Code 84532-2725	
Purpose of Disbursement Events	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The St. Regis Deer Crest Resort		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2015
Mailing Address PO Box 4493		Amount of Each Disbursement this Period 4964.88 Transaction ID : B0F1BEC90E98C4C8A87C
City Park City	State UT Zip Code 84060-4493	
Purpose of Disbursement Event	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. E.M. Rahal & Company		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2015
Mailing Address 4101 Cathedral Avenue, Northwest Suite 707		Amount of Each Disbursement this Period 16779.06 Transaction ID : B094507C43A064F2EA68
City Washington	State DC Zip Code 20016-3598	
Purpose of Disbursement Fundraising consultant	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	21993.94
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 48 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Wells Fargo Business Card		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2015
Mailing Address PO Box 54349		Amount of Each Disbursement this Period 15.00 Transaction ID : B826CF7180C37408F9FC
City Los Angeles	State CA	
Zip Code 90054-0349	Purpose of Disbursement Payment - License renewal	Category/ Type
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Daryl Acumen		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2015
Mailing Address 3818 W Morgan Blvd		Amount of Each Disbursement this Period 1000.00 Transaction ID : B80CE02BF589D4E8DA18
City Cedar Hills	State UT	
Zip Code 84062-8809	Purpose of Disbursement Campaign consultant	Category/ Type
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) c. Carbon County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2015
Mailing Address P.O. Box 266		Amount of Each Disbursement this Period 100.00 Transaction ID : B309EA42912C54061806
City Lehighton	State PA	
Zip Code 18235	Purpose of Disbursement Event	Category/ Type
Candidate Name Carbon County Republican Party	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1115.00
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 49 OF 69			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Travelers Insurance		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address c/o LA Bowen Insurance Agency PO Box 67		Amount of Each Disbursement this Period 3582.00 Transaction ID : B1E4431414A5B46499DA
City Orem	State UT Zip Code 84059-0067	
Purpose of Disbursement Insurance		Category/Type
Candidate Name		
Office Sought: House	Disbursement For: 2016	
Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
President	<input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Caplin & Drysdale		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address 1 Thomas Cir NW Ste 1100		Amount of Each Disbursement this Period 416.50 Transaction ID : BA6F3F0BF442B4944AC3
City Washington	State DC Zip Code 20005-5812	
Purpose of Disbursement Legal fees		Category/Type
Candidate Name		
Office Sought: House	Disbursement For: 2016	
Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
President	<input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Hawkins Cloward & Simister		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address PO Box 971810 Ste 1		Amount of Each Disbursement this Period 1500.00 Transaction ID : B6721D1C1DE924EE880D
City Orem	State UT Zip Code 84097-1810	
Purpose of Disbursement Accounting fees		Category/Type
Candidate Name		
Office Sought: House	Disbursement For: 2016	
Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
President	<input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	5498.50
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 50 OF 69	
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Jason Chaffetz		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 315 Westfield Cir		Amount of Each Disbursement this Period 5048.73 Transaction ID : B8471C1E9B7E74609ABF
City Alpine	State UT Zip Code 84004-1594	
Purpose of Disbursement Reimbursement...see below		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2015
Mailing Address 201 N 2200 W		Amount of Each Disbursement this Period 200.00 Transaction ID : B17F83816E0874337803 [MEMO ITEM]
City Salt Lake City	State UT Zip Code 84116-2933	
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Us Airways		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2015
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 230.10 Transaction ID : B8C4530A9E0C547F6AAC [MEMO ITEM]
City Phoenix	State AZ Zip Code 85034-3802	
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5048.73
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 51 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address 201 N 2200 W		Amount of Each Disbursement this Period 160.10
City Salt Lake City	State UT	
Zip Code 84116-2933	Purpose of Disbursement Travel	Transaction ID : BAA65796346CA4992BA8
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Campus Inn Hotel		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2015
Mailing Address 615 E Huron St		Amount of Each Disbursement this Period 578.00
City Ann Arbor	State MI	
Zip Code 48104-1524	Purpose of Disbursement Lodging	Transaction ID : B37AE30A474D54EEFB49
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. Hilton Austin Hotel		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2015
Mailing Address 500 E 4th St		Amount of Each Disbursement this Period 959.10
City Austin	State TX	
Zip Code 78701-3720	Purpose of Disbursement Lodging	Transaction ID : BC710EA20D2A140B69EF
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... 0.00
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 52 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Us House Of Representatives			Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2015
Mailing Address Longworth House Office Building			Amount of Each Disbursement this Period 183.60
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Constituent gifts		Category/ Type	Transaction ID : BC85F47938F734A65888
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM]
State: District:			

Full Name (Last, First, Middle Initial) B. Fairfield Inn and Suites			Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2015
Mailing Address 1863 N Highway 191			Amount of Each Disbursement this Period 406.80
City Moab	State UT	Zip Code 84532-9623	
Purpose of Disbursement Lodging		Category/ Type	Transaction ID : B74C490B4265B4783839
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM]
State: District:			

Full Name (Last, First, Middle Initial) c. Amtrak			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2015
Mailing Address 50 Massachusetts Ave NE			Amount of Each Disbursement this Period 534.00
City Washington	State DC	Zip Code 20002-4214	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B65E7029E51624C7C8E8
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM]
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 53 OF 69	
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. The St. Regis Deer Crest Resort		Date of Disbursement MM / DD / YYYY 02 / 27 / 2015
Mailing Address PO Box 4493		Amount of Each Disbursement this Period 476.42
City Park City	State UT	
Zip Code 84060-4493	Category/ Type	Transaction ID : B0954F57F22674142BB2
Purpose of Disbursement Lodging		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jason Chaffetz		Date of Disbursement MM / DD / YYYY 02 / 03 / 2015
Mailing Address 315 Westfield Cir		Amount of Each Disbursement this Period 7354.54
City Alpine	State UT	
Zip Code 84004-1594	Category/ Type	Transaction ID : B71057402432D4B9690D
Purpose of Disbursement Reimbursement...see below		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement MM / DD / YYYY 11 / 27 / 2014
Mailing Address PO Box 9622		Amount of Each Disbursement this Period 665.08
City Mission Hills	State CA	
Zip Code 91346-9622	Category/ Type	Transaction ID : B88E5E06DA68E4316872
Purpose of Disbursement Telephone		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7354.54
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 54 OF 69	
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. The St. Regis Deer Crest Resort		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2014
Mailing Address PO Box 4493		Amount of Each Disbursement this Period 2060.40
City Park City	State UT	
Zip Code 84060-4493	Purpose of Disbursement Event	Transaction ID : B24B257682B3E47C7923
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. The St. Regis Deer Crest Resort		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2014
Mailing Address PO Box 4493		Amount of Each Disbursement this Period 1210.68
City Park City	State UT	
Zip Code 84060-4493	Purpose of Disbursement Event	Transaction ID : BBBAC574D577B4D34BE7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Columbia Sportswear		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2014
Mailing Address 14375 NW Science Park Drive		Amount of Each Disbursement this Period 1899.58
City Portland	State OR	
Zip Code 97229-5418	Purpose of Disbursement Constituent gifts	Transaction ID : B77C53EF3B48349158C3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 55 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2014
Mailing Address 55 Merchant St		Amount of Each Disbursement this Period 206.95
City American Fork	State UT	
Zip Code 84003-7068	Purpose of Disbursement Postage	Transaction ID : B94DD55749B684F5CA5B
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Purple Sage		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2015
Mailing Address 434 Main St		Amount of Each Disbursement this Period 229.38
City Park City	State UT	
Zip Code 84060-5114	Purpose of Disbursement Meals	Transaction ID : B45015472405E4B46976
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Hyatt Regency On Capitol Hill		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 400 New Jersey Ave NW		Amount of Each Disbursement this Period 205.57
City Washington	State DC	
Zip Code 20001-2002	Purpose of Disbursement Travel	Transaction ID : B809D0169A6E6490C80B
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 56 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Wells Fargo Business Card		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2015
Mailing Address PO Box 54349		Amount of Each Disbursement this Period 3501.51 Transaction ID : B9121C275273544FA8C3
City Los Angeles	State CA	
Zip Code 90054-0349	Purpose of Disbursement Credit card payment - see below	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Nation Builder		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2015
Mailing Address 448 S Hill St, Suite 200		Amount of Each Disbursement this Period 233.00 Transaction ID : BE8259F33572D4912AC8 [MEMO ITEM]
City Los Angeles	State CA	
Zip Code 90013-1155	Purpose of Disbursement Subscription	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Godaddy.com		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2015
Mailing Address 14455 N Hayden Rd Ste 226		Amount of Each Disbursement this Period 234.48 Transaction ID : BEA0B789E00954CC3B10 [MEMO ITEM]
City Scottsdale	State AZ	
Zip Code 85260-6993	Purpose of Disbursement Internet	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3501.51
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 57 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Gift Basket Affairs		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2015
Mailing Address 170 E 800 S		Amount of Each Disbursement this Period 2373.18
City Salt Lake City	State UT	
Zip Code 84111-3827	Purpose of Disbursement Constituent gifts	Transaction ID : B937E6228AE42475A98A
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2015
Mailing Address 201 N 2200 W		Amount of Each Disbursement this Period 200.00
City Salt Lake City	State UT	
Zip Code 84116-2933	Purpose of Disbursement Airfare	Transaction ID : BAFAA5E38BB5449E78FD
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Highland Hideaway		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address 11251 N Sunset Dr		Amount of Each Disbursement this Period 133.00
City Highland	State UT	
Zip Code 84003-3861	Purpose of Disbursement Storage unit	Transaction ID : B7DE9D132CBE74DCFB84
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 58 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Wells Fargo Business Card		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2015
Mailing Address PO Box 54349		Amount of Each Disbursement this Period 358.32 Transaction ID : B3667FF3E4D3A416DA4C
City Los Angeles	State CA	
Zip Code 90054-0349	Purpose of Disbursement Credit card payment - see below	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Nation Builder		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 448 S Hill St, Suite 200		Amount of Each Disbursement this Period 163.00 Transaction ID : BC00CB250DF4A447F9F7 [MEMO ITEM]
City Los Angeles	State CA	
Zip Code 90013-1155	Purpose of Disbursement Subscription	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Jason Chaffetz		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2015
Mailing Address 315 Westfield Cir		Amount of Each Disbursement this Period 6415.81 Transaction ID : B7138A154D5034DE3898
City Alpine	State UT	
Zip Code 84004-1594	Purpose of Disbursement Reimbursement - see below	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6774.13
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)	PAGE 59 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2014
Mailing Address PO Box 9622		Amount of Each Disbursement this Period 354.12
City Mission Hills	State CA	
Zip Code 91346-9622	Category/ Type	Transaction ID : BB718C8E82ADA45ABA9B
Purpose of Disbursement Telephone		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Campaign Financial Bethesda Accountants		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2015
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 1153.00
City Bethesda	State MD	
Zip Code 20824-0844	Category/ Type	Transaction ID : B015246E3190A4A89942
Purpose of Disbursement Professional fees		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 201 N 2200 W		Amount of Each Disbursement this Period 238.10
City Salt Lake City	State UT	
Zip Code 84116-2933	Category/ Type	Transaction ID : B7AAA781F9AC540F5900
Purpose of Disbursement Airfare		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 60 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Delta Airlines			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 201 N 2200 W			Amount of Each Disbursement this Period 238.10
City Salt Lake City	State UT	Zip Code 84116-2933	
Purpose of Disbursement Airfare		Candidate Name	Transaction ID : B36C2AD68722449E9802
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	[MEMO ITEM]
State:	District:		

Full Name (Last, First, Middle Initial) B. Delta Airlines			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 201 N 2200 W			Amount of Each Disbursement this Period 214.10
City Salt Lake City	State UT	Zip Code 84116-2933	
Purpose of Disbursement Airfare		Candidate Name	Transaction ID : B167BB0D6C5BD45F29E7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	[MEMO ITEM]
State:	District:		

Full Name (Last, First, Middle Initial) C. Delta Airlines			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 201 N 2200 W			Amount of Each Disbursement this Period 238.10
City Salt Lake City	State UT	Zip Code 84116-2933	
Purpose of Disbursement Airfare		Candidate Name	Transaction ID : B879854B40A00457BAFA
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	[MEMO ITEM]
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 61 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address 201 N 2200 W		Amount of Each Disbursement this Period 246.10
City Salt Lake City	State UT	
Zip Code 84116-2933	Purpose of Disbursement Airfare	Transaction ID : BAFECB4C6940E474B986
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address 201 N 2200 W		Amount of Each Disbursement this Period 246.20
City Salt Lake City	State UT	
Zip Code 84116-2933	Purpose of Disbursement Airfare	Transaction ID : B5FF7B3B3EFFB438D8DC
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Us House Of Representatives		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address Longworth House Office Building		Amount of Each Disbursement this Period 317.40
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Constituent gifts	Transaction ID : B7995213973084866A92
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 62 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Border Grill Las Vegas			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015	
Mailing Address 3950 S Las Vegas Blvd			Amount of Each Disbursement this Period 1055.54	
City Las Vegas	State NV	Zip Code 89119-1005	Transaction ID : BC5F583C8949E411AA6B	
Purpose of Disbursement Event		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]		

Full Name (Last, First, Middle Initial) B. Venetian Hotel			Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2015	
Mailing Address 3355 Las Vegas Blvd S			Amount of Each Disbursement this Period 729.06	
City Las Vegas	State NV	Zip Code 89109-8941	Transaction ID : B4601F45516254B2F818	
Purpose of Disbursement Lodging		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]		

Full Name (Last, First, Middle Initial) C. Morels French Steakhouse			Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2015	
Mailing Address 3325 S Las Vegas Blvd			Amount of Each Disbursement this Period 265.66	
City Las Vegas	State NV	Zip Code 89109-1414	Transaction ID : BDF432BC44A944D9EB41	
Purpose of Disbursement Meals		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 63 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Wells Fargo Business Card		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2015
Mailing Address PO Box 54349		Amount of Each Disbursement this Period 1069.03 Transaction ID : BE2E72DE8830B4E5D8C8
City Los Angeles	State CA	
Zip Code 90054-0349	Purpose of Disbursement Credit card payment - see below	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Nation Builder		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 448 S Hill St, Suite 200		Amount of Each Disbursement this Period 163.00 Transaction ID : BDF3CA1B6E3AF4FEE9A3 [MEMO ITEM]
City Los Angeles	State CA	
Zip Code 90013-1155	Purpose of Disbursement Subscription	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2015
Mailing Address 201 N 2200 W		Amount of Each Disbursement this Period 621.20 Transaction ID : B0A13FC77F349474C945 [MEMO ITEM]
City Salt Lake City	State UT	
Zip Code 84116-2933	Purpose of Disbursement Airfare	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1069.03
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 64 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Jason Chaffetz		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address 315 Westfield Cir		Amount of Each Disbursement this Period 2048.03 Transaction ID : BC7D8D702FC6D46E99A6
City Alpine	State UT Zip Code 84004-1594	
Purpose of Disbursement Reimbursement...see below		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2015
Mailing Address PO Box 9622		Amount of Each Disbursement this Period 329.60 Transaction ID : B1E40BFECA2CA450393C
City Mission Hills	State CA Zip Code 91346-9622	
Purpose of Disbursement Telephone		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Searsucker Austin		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 415 Colorado St		Amount of Each Disbursement this Period 317.12 Transaction ID : B683278BEB1EE4EA7ADD
City Austin	State TX Zip Code 78701-2918	
Purpose of Disbursement Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2048.03
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 65 OF 69			
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Hilton Austin Hotel		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2015
Mailing Address 500 E 4th St		Amount of Each Disbursement this Period 959.10
City Austin State TX Zip Code 78701-3720	Category/Type	
Purpose of Disbursement Lodging	Candidate Name	Transaction ID : B5C65B9A0032048169D2 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Wells Fargo Business Card		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2015
Mailing Address PO Box 54349		Amount of Each Disbursement this Period 1729.29
City Los Angeles State CA Zip Code 90054-0349	Category/Type	
Purpose of Disbursement Credit card payment - see below	Candidate Name	Transaction ID : B4093E9A7A5834E89BAD
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. La Jolla Groves		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2014
Mailing Address 4801 N University Ave		Amount of Each Disbursement this Period 549.16
City Provo State UT Zip Code 84604-5573	Category/Type	
Purpose of Disbursement Meals	Candidate Name	Transaction ID : BBC5562BD08A9410FAF9 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1729.29
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 66 OF 69	
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Highland Hideaway		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address 11251 N Sunset Dr		Amount of Each Disbursement this Period 133.00
City Highland	State UT Zip Code 84003-3861	
Purpose of Disbursement Storage Unit	Candidate Name	Transaction ID : BA0246CF0BD464220958
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. BT Ticket		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 694 W Foothill Blvd		Amount of Each Disbursement this Period 600.00
City Monrovia	State CA Zip Code 91016-2024	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : B8B6B17E4C1D148ECBEA
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Godaddy.com		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 14455 N Hayden Rd Ste 226		Amount of Each Disbursement this Period 382.82
City Scottsdale	State AZ Zip Code 85260-6993	
Purpose of Disbursement Internet	Candidate Name	Transaction ID : BC2DAA8107A3B4944BC1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 67 OF 69	
	<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 JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. Wells Fargo Business Card		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2015
Mailing Address PO Box 54349		Amount of Each Disbursement this Period 154.01 Transaction ID : B780AA750137A4DB882B
City Los Angeles	State CA Zip Code 90054-0349	
Purpose of Disbursement Credit card payment	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: 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	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
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	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	154.01
TOTAL This Period (last page this line number only).....	116006.63

**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 68 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. National Assoc of Real Estate Investment Trusts, Inc. PAC		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 1875 I Street, NW, Suite 600		Amount of Each Disbursement this Period 1000.00 Transaction ID : B17223252B21646499D0
City Washington State DC Zip Code 20006-5413	Purpose of Disbursement Refund: Reissued refund check	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. National Assoc of Real Estate Investment Trusts, Inc. PAC		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 1875 I Street, NW, Suite 600		Amount of Each Disbursement this Period -1000.00 Transaction ID : B7D72BCC6F583407F8A5
City Washington State DC Zip Code 20006-5413	Purpose of Disbursement Refund: Cancel check that never cleared bank	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" 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	
Candidate Name	Category/Type	
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).....	0.00
TOTAL This Period (last page this line number only).....	0.00

**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)		PAGE 69 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

Full Name (Last, First, Middle Initial) A. National Republican Congressional Comm.		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 320 First St, SE		Amount of Each Disbursement this Period 15000.00 Transaction ID : B283C7A690A9749B0957
City Washington State DC Zip Code 20003-1838	Purpose of Disbursement Contribution	
Candidate Name National Republican Congressional Comm.	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: 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	
Candidate Name	Category/Type	
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	
Candidate Name	Category/Type	
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).....	15000.00
TOTAL This Period (last page this line number only).....	15000.00