

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
 Check if different than previously reported. (ACC) ALPINE UT 84004

2. **FEC IDENTIFICATION NUMBER** C C00431684 CITY STATE ZIP CODE STATE DISTRICT
3. IS THIS REPORT NEW (N) OR AMENDED (A) 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 M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
11 / 25 / 2014 through 12 / 31 / 2014

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 M M / D D / Y Y Y Y
01 / 30 / 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.

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)).... | 32910.00 | 32910.00 |
| (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))..... | 32910.00 | 32910.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 50976.74 | 57871.27 |
| (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))..... | 50976.74 | 57871.27 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 309377.68 | |
| 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)..... | 7250.00 | 7250.00 |
| (ii) Unitemized..... | 160.00 | 160.00 |
| (iii) TOTAL of contributions from individuals ▶ | 7410.00 | 7410.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 25500.00 | 25500.00 |
| (d) The Candidate..... | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 32910.00 | 32910.00 |
| 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)..... ▶ | 32910.00 | 32910.00 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 50976.74 | 57871.27 |
| 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 | 0.00 | 2500.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 50976.74 | 60371.27 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 327444.42 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 32910.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 360354.42 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 50976.74 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 309377.68 |

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

Form/Schedule: F3N
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 33 |
| | <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 | |

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)
Thomas H Carpenter

Mailing Address 1422 A St SE

City Washington State DC Zip Code 20003-1523

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

Name of Employer Wexler Walker Occupation Senior VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2014

Transaction ID : A1582806DD14947FF88C

Amount of Each Receipt this Period
 Contribution 500.00

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

Mailing Address 817 N Lincoln St

City Arlington State VA Zip Code 22201-2312

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

Name of Employer Knight Capitol Consultants Occupation Founder

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 30 / 2014

Transaction ID : A58CF6551458640F5B6F

Amount of Each Receipt this Period
 Contribution 500.00

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

Mailing Address 4052 Seminary Rd

City Alexandria State VA Zip Code 22304-1646

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

Name of Employer Williams & Jensen, Plcc Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 09 / 2014

Transaction ID : AC9BBD38272D54E169C5

Amount of Each Receipt this Period
 Contribution 500.00

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

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

1500.00

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 33 |
| | <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. Spencer Stokes | | Date of Receipt M M / D D / Y Y Y Y 12 / 18 / 2014 | |
| Mailing Address 4259 Skyline Dr | | Transaction ID : A801D7A1DF776447ABBB | |
| City Ogden | State UT | Zip Code 84403-3253 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period Contribution 500.00 | |
| Name of Employer Stokes Strategies | Occupation Government Relations | | |
| 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) B. George G. Olsen | | Date of Receipt M M / D D / Y Y Y Y 12 / 18 / 2014 | |
| Mailing Address 701 8th St, NW | | Transaction ID : A6A48582B69B345DE98F | |
| City Washington | State DC | Zip Code 20001-3854 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period Contribution 500.00 | |
| Name of Employer Williams & Jensen, Plcc | Occupation Attorney | | |
| 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. Michael F Musante | | Date of Receipt M M / D D / Y Y Y Y 12 / 18 / 2014 | |
| Mailing Address 808 Constitution Ave NE | | Transaction ID : A2A64AC02F3134F988D2 | |
| City Washington | State DC | Zip Code 20002-6659 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period Contribution 500.00 | |
| Name of Employer Director of Gov Affairs | Occupation Focus DC | | |
| 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)..... | 1500.00 |
| TOTAL This Period (last page this line number only)..... | 1500.00 |

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 33 |
| | <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. Kooifun Ooi | | Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2014 | |
| Mailing Address 6445 Hitt Ave | | Transaction ID : A948BC4964C184FFD917 | |
| City Mc Lean | State VA | Zip Code 22101-4700 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 | |
| Name of Employer Homemaker | Occupation Homemaker | | |
| 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. Romano Romani | | Date of Receipt M M / D D / Y Y Y Y 12 / 18 / 2014 | |
| Mailing Address 11124 Arroyo Dr | | Transaction ID : A7A7CC19601C7494884B | |
| City Rockville | State MD | Zip Code 20852-3602 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 | |
| Name of Employer Parry Romani DeConcini & Symms | Occupation Attorney | | |
| 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. Edward Long | | Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2014 | |
| Mailing Address 430 N Jackson St | | Transaction ID : ADDE3EF6A5C12480C9C5 | |
| City Arlington | State VA | Zip Code 22201-1720 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 | |
| Name of Employer Van Scoyoc Assoc | Occupation Vice President | | |
| 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)..... | 2500.00 |
| TOTAL This Period (last page this line number only)..... | 2500.00 |

**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 9 OF 33 |
| | <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)
Jack W. Martin

Mailing Address 12602 Lake Normandy Ln

City State Zip Code
Fairfax VA 22030-7251

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

Name of Employer Occupation
Walker, Martin & Hatch Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 31 2014

Transaction ID : A53C933E9DF284FF38A8

Amount of Each Receipt this Period
500.00
Contribution

B. Full Name (Last, First, Middle Initial)
Edward O Fritts

Mailing Address 4661 N Dittmar Rd

City State Zip Code
Arlington VA 22207-4351

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

Name of Employer Occupation
The Fritts Group Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 18 2014

Transaction ID : AFAE8CBC368CF4CC78D9

Amount of Each Receipt this Period
500.00
Contribution

C. Full Name (Last, First, Middle Initial)
Arthur B. Sackler

Mailing Address 6024 Wilson Ln

City State Zip Code
Bethesda MD 20817-3130

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

Name of Employer Occupation
Sackler Policy Services Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 18 2014

Transaction ID : AEE9F6328A03D46C297D

Amount of Each Receipt this Period
500.00
Contribution

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 10 OF 33
(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)
Jane Drinkwalter

Mailing Address 26 Carina

City Irvine State CA Zip Code 92603-5711

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

Name of Employer Vitainer Labs Occupation VP Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : A3A57E98E2246410F824

Amount of Each Receipt this Period
 Contribution 250.00

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 M / D 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 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).....

250.00

7250.00

**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 33 |
| | <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

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2014

Transaction ID : AF036B2F3AC604396B73

Amount of Each Receipt this Period
 Contribution 1000.00

B. CRN PAC - Council Responsible Nutrition

Full Name (Last, First, Middle Initial)
Mailing Address 1828 'L' St, NW, Ste 900

| | | |
|------------|-------|------------|
| City | State | Zip Code |
| Washington | DC | 20036-5114 |

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

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2014

Transaction ID : A5E4BA1F3FB344514BCD

Amount of Each Receipt this Period
 Contribution 1000.00

C. Steptoe & Johnson PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1330 Connecticut Ave NW

| | | |
|------------|-------|------------|
| City | State | Zip Code |
| Washington | DC | 20036-1704 |

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
 12 / 18 / 2014

Transaction ID : A41F10BC0791244E19F2

Amount of Each Receipt this Period
 Contribution 1000.00

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

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

3000.00

**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 33 |
| | <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)
International Paper PAC

Mailing Address 1101 Pennsylvania Ave, NW, Ste 200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00034405**

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
 12 / 18 / 2014

Transaction ID : A25136E6045AE46C5AD2

Amount of Each Receipt this Period
 Contribution 1000.00

B. 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

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 30 / 2014

Transaction ID : A7C58054B21334E169D3

Amount of Each Receipt this Period
 Contribution 1000.00

C. Full Name (Last, First, Middle Initial)
Natural Products Association PAC

Mailing Address 2115 E. 4th Street, Ste 200

City Santa Ana State CA Zip Code 92705

FEC ID number of contributing federal political committee. **C C00297739**

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
 12 / 30 / 2014

Transaction ID : A8D20EC3B6D9040F196C

Amount of Each Receipt this Period
 Contribution 2500.00

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
Envelope Manufacturers Assoc PAC

Mailing Address 300 N Washington St Suite 500

City State Zip Code
 Alexandria VA 22314-2535

FEC ID number of contributing federal political committee. **C C00301192**

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
 12 18 2014

Transaction ID : AA67C980519E241568BF

Amount of Each Receipt this Period
 Contribution 1000.00

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

Mailing Address 120 Monument Cir

City State Zip Code
 Indianapolis IN 46204-4906

FEC ID number of contributing federal political committee. **C C00197228**

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
 12 31 2014

Transaction ID : A5361A475BA8F488F921

Amount of Each Receipt this Period
 Contribution 5000.00

C. Full Name (Last, First, Middle Initial)
Eli Lilly and Co PAC

Mailing Address Lilly Corporate Center

City State Zip Code
 Indianapolis IN 46285-0001

FEC ID number of contributing federal political committee. **C C00082792**

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
 12 31 2014

Transaction ID : AA9F728248A924023B0D

Amount of Each Receipt this Period
 Contribution 1000.00

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 14 OF 33 |
| | <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

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2014

Transaction ID : A7F1BE0504C704053BAF

Amount of Each Receipt this Period
 1000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
DLA Piper PAC

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

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : AF43BB56FDDFD4D29823

Amount of Each Receipt this Period
 1000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Food Marketing Institute PAC

Mailing Address 2345 Crystal Dr, Suite 800

City Arlington State VA Zip Code 22202-4813

FEC ID number of contributing federal political committee. **C** C00014555

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
 12 / 18 / 2014

Transaction ID : A213B8D39BC954DC5B84

Amount of Each Receipt this Period
 1000.00
 Contribution

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

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

3000.00

**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 33 |
| | <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)
Napus PAC For Postmasters

Mailing Address 6 Herbert St

City Alexandria State VA Zip Code 22305-2600

FEC ID number of contributing federal political committee. **C** C00100404

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
 12 / 31 / 2014

Transaction ID : AC199DDEFC3324CFA939

Amount of Each Receipt this Period
 Contribution 2000.00

B. Full Name (Last, First, Middle Initial)
L-3 Communications Corp. PAC

Mailing Address 600 Third Ave

City New York State NY Zip Code 10016

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

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
 12 / 18 / 2014

Transaction ID : AF60FE977DAF541B1BA7

Amount of Each Receipt this Period
 Contribution 1000.00

C. Full Name (Last, First, Middle Initial)
Direct Voice The PAC of Direct Marketing

Mailing Address 1615 L St, NW, Ste 1100

City Washington State DC Zip Code 20036-5624

FEC ID number of contributing federal political committee. **C** C00235309

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
 12 / 18 / 2014

Transaction ID : AF462C81612F54E9389F

Amount of Each Receipt this Period
 Contribution 1000.00

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: (check only one) | PAGE 16 OF 33 |
| | <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)
Arch PAC

Mailing Address **One City Place Dr**

City **Saint Louis** State **MO** Zip Code **63141**

FEC ID number of contributing federal political committee. **C C00167668**

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
12 / 04 / 2014

Transaction ID : AA4AFDADDA31C4579A3B

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

B. Full Name (Last, First, Middle Initial)
Magazine Publishers of America Political

Mailing Address **1211 Connecticut Ave NW #610**

City **Washington** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00035774**

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
12 / 30 / 2014

Transaction ID : AEB6B706C76D54604860

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

C. Full Name (Last, First, Middle Initial)
American Forest & Paper Assoc PAC

Mailing Address **1101 K St NW, Suite 700**

City **Washington** State **DC** Zip Code **20005-4210**

FEC ID number of contributing federal political committee. **C C00029348**

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
12 / 18 / 2014

Transaction ID : A355688D702074834825

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

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 17 OF 33
(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)
National Community Pharmacists Assoc PAC

Mailing Address 100 Daingerfield Rd

City Alexandria State VA Zip Code 22314-6302

FEC ID number of contributing federal political committee. **C** C00030809

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
12 / 31 / 2014

Transaction ID : AE138DEE97A8142EAB5B

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

25500.00

**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 18 OF 33 | | | |
| | <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. Daryl Acumen | | | Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2014 | | |
| Mailing Address 3818 W Morgan Blvd | | | Amount of Each Disbursement this Period 1000.00 | | |
| City Cedar Hills | State UT | Zip Code 84062-8809 | Transaction ID : BC21839F4027F4BCEA88 | | |
| Purpose of Disbursement Consultant | | Category/ Type | | | |
| Candidate Name | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. The Road Home | | | Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2014 | | |
| Mailing Address 210 S Rio Grande St | | | Amount of Each Disbursement this Period 500.00 | | |
| City Salt Lake City | State UT | Zip Code 84101-1104 | Transaction ID : B7BF8D70D4B524A9D80B | | |
| Purpose of Disbursement Donation | | 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. E.M. Rahal & Company | | | Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2014 | | |
| Mailing Address 4101 Cathedral Avenue, Northwest Suite 707 | | | Amount of Each Disbursement this Period 1555.71 | | |
| City Washington | State DC | Zip Code 20016-3598 | Transaction ID : B89D18900263043D6A59 | | |
| 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: | | | | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3055.71 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 19 OF 33 | |
| | <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. Aristotle | | Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014 |
| Mailing Address 205 Pennsylvania Ave SE | | Amount of Each Disbursement this Period 2100.00 Transaction ID : B404AFBB79DB241FF81B |
| 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: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. LJ Properties | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2014 |
| Mailing Address 874 Crescent Dr | | Amount of Each Disbursement this Period 3152.84 Transaction ID : B28847677CA3542C491B |
| City Mapleton State UT Zip Code 84664-5614 | Purpose of Disbursement Campaign consulting, 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: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Salt Lake County Republican party | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2014 |
| Mailing Address PO Box 719 | | Amount of Each Disbursement this Period 3500.00 Transaction ID : BA88B1788CAFD47FBA6B |
| City Salt Lake City State UT Zip Code 84110-0719 | Purpose of Disbursement Contribution | |
| Candidate Name Salt Lake 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)..... | 8752.84 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 OF 33 | | |
| | <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. Hawkins Cloward & Simister | | Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2014 |
| Mailing Address PO Box 971810 Ste 1 | | Amount of Each Disbursement this Period 4500.00 Transaction ID : BA5F45287FBCC4807924 |
| 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) B. Capitol Hill Club | | Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2014 |
| Mailing Address 300 1st St SE | | Amount of Each Disbursement this Period 926.90 Transaction ID : BFE84959AB83B41A1A49 |
| City Washington | State DC Zip Code 20003-1801 | |
| Purpose of Disbursement Events | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Mckenzie Miller | | Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2014 |
| Mailing Address 575 W 600 N | | Amount of Each Disbursement this Period 475.00 Transaction ID : BEDAAB27C909E4875BD4 |
| City Alpine | State UT Zip Code 84004-1392 | |
| Purpose of Disbursement Event - Tending | | 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)..... | 5901.90 |
| 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 21 OF 33 | |
| | <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. Hawkins Cloward & Simister | | Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2014 |
| Mailing Address PO Box 971810 Ste 1 | | Amount of Each Disbursement this Period 2500.00 Transaction ID : B92F12F35AD9345AB9A8 |
| 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) B. Capitol Hill Club | | Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2014 |
| Mailing Address 300 1st St SE | | Amount of Each Disbursement this Period 1430.90 Transaction ID : B79C7823A05CC4B61810 |
| City Washington | State DC Zip Code 20003-1801 | |
| Purpose of Disbursement Meals and dues | | 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. Reid Johns Design | | Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2014 |
| Mailing Address 2002 Crescent Dr | | Amount of Each Disbursement this Period 150.00 Transaction ID : BB4DF7599952941D4A97 |
| City Mapleton | State UT Zip Code 84664-4615 | |
| Purpose of Disbursement Advertising | | 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)..... | 4080.90 |
| 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 22 OF 33 | | | |
| | <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. Mcneil Printing | | Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2014 |
| Mailing Address 1189 S 1480 W | | Amount of Each Disbursement this Period 2324.47 Transaction ID : BBDC076DF10B14EBAA3D |
| City Orem State UT Zip Code 84058-4907 | Purpose of Disbursement Mailing Candidate Name Category/Type | |
| Office Sought: House Senate President State: District: | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Mcneil Printing | | Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2014 |
| Mailing Address 1189 S 1480 W | | Amount of Each Disbursement this Period 1191.80 Transaction ID : BA8D464FFCBE04C7EB11 |
| City Orem State UT Zip Code 84058-4907 | Purpose of Disbursement Mailing Candidate Name Category/Type | |
| Office Sought: House Senate President State: District: | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Mcneil Printing | | Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2014 |
| Mailing Address 1189 S 1480 W | | Amount of Each Disbursement this Period 854.80 Transaction ID : B9C6E6C7B7F3C455F8B8 |
| City Orem State UT Zip Code 84058-4907 | Purpose of Disbursement Envelopes Candidate Name Category/Type | |
| Office Sought: House Senate President State: District: | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4371.07 |
| 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 23 OF 33 | |
| | <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. E.M. Rahal & Company | | Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2014 |
| Mailing Address 4101 Cathedral Avenue, Northwest Suite 707 | | Amount of Each Disbursement this Period 1987.26 Transaction ID : B0E301C3CC8404F71A38 |
| 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: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Daryl Acumen | | Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2014 |
| Mailing Address 3818 W Morgan Blvd | | Amount of Each Disbursement this Period 1000.00 Transaction ID : BD92C089C07ED4B1C8EF |
| City Cedar Hills State UT Zip Code 84062-8809 | Purpose of Disbursement 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) C. Avenue Events Llc | | Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2014 |
| Mailing Address 710 Mount Vernon Ave # B | | Amount of Each Disbursement this Period 1273.06 Transaction ID : BFEBE04B45E4448549DA |
| City Alexandria State VA Zip Code 22301-1702 | 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)..... | 4260.32 |
| 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 24 OF 33 | | | |
| | <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. Kan Enterprises | | Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2014 |
| Mailing Address 513 S 470 W | | Amount of Each Disbursement this Period 2246.36 Transaction ID : B424EA286C1864833A29 |
| City Spanish Fork | State UT Zip Code 84660-4926 | |
| 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: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Jason Chaffetz | | Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2014 |
| Mailing Address 315 Westfield Cir | | Amount of Each Disbursement this Period 3430.40 Transaction ID : BFC39D4E892D7438EB58 |
| 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) C. Delta Airlines | | Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014 |
| Mailing Address 201 N 2200 W | | Amount of Each Disbursement this Period 1636.20 Transaction ID : BAF6A358C89649F7AAC [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: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5676.76 |
| 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 25 OF 33 | |
| | <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 11 / 18 / 2014 |
| Mailing Address 201 N 2200 W | | Amount of Each Disbursement this Period 1672.20 |
| City Salt Lake City | State UT | |
| Zip Code 84116-2933 | Purpose of Disbursement Travel | Transaction ID : BA7A84E752F934FCFB23 |
| 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. Jason Chaffetz | | Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2014 |
| Mailing Address 315 Westfield Cir | | Amount of Each Disbursement this Period 9218.20 |
| City Alpine | State UT | |
| Zip Code 84004-1594 | Purpose of Disbursement Reimbursement...see below | Transaction ID : BF4F313F8F05440DA978 |
| 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. Delta Airlines | | Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014 |
| Mailing Address 201 N 2200 W | | Amount of Each Disbursement this Period 1236.00 |
| City Salt Lake City | State UT | |
| Zip Code 84116-2933 | Purpose of Disbursement Travel | Transaction ID : BEB3C61C455CE4F5EADF |
| 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: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 9218.20 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 26 OF 33 | |
| | <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 11 / 18 / 2014 |
| Mailing Address 201 N 2200 W | | Amount of Each Disbursement this Period 1450.70 |
| City Salt Lake City | State UT | |
| Zip Code 84116-2933 | Purpose of Disbursement Travel | Transaction ID : B3C89001E90E94CFEB26 |
| 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. George Washington's Mount Vernon | | Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014 |
| Mailing Address PO Box 110 | | Amount of Each Disbursement this Period 250.00 |
| City Mount Vernon | State VA | |
| Zip Code 22121-0110 | Purpose of Disbursement Tour | Transaction ID : B7995E6AE8656482689C |
| 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. The Congressional Institute | | Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014 |
| Mailing Address 1001 N Fairfax St Ste 410 | | Amount of Each Disbursement this Period 1127.00 |
| City Alexandria | State VA | |
| Zip Code 22314-1587 | Purpose of Disbursement Congressional Institute | Transaction ID : BD5ABB58F595346C388D |
| 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: | | |

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| 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 27 OF 33 | |
| | <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 12 / 01 / 2014 |
| Mailing Address Longworth House Office Building | | Amount of Each Disbursement this Period 126.00 |
| City Washington | State DC Zip Code 20003 | |
| Purpose of Disbursement Office Supplies | Candidate Name | Transaction ID : B39C2D2789B744674A22 |
| 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. Capitol Hill Club | | Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014 |
| Mailing Address 300 1st St SE | | Amount of Each Disbursement this Period 492.96 |
| City Washington | State DC Zip Code 20003-1801 | |
| Purpose of Disbursement Meals | Candidate Name | Transaction ID : BCDBDBF4EAFD64012AE0 |
| 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. Hyatt Regency On Capitol Hill | | Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2014 |
| Mailing Address 400 New Jersey Ave NW | | Amount of Each Disbursement this Period 847.80 |
| City Washington | State DC Zip Code 20001-2002 | |
| Purpose of Disbursement Lodging | Candidate Name | Transaction ID : B23E9EE013E9E4C27A8B |
| 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] |

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| 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 28 OF 33 | | |
| | <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. Willard Intercontinental | | Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2014 |
| Mailing Address 1401 Pennsylvania Ave, NW | | Amount of Each Disbursement this Period 800.75 |
| City Washington State DC Zip Code 20004-1047 | Purpose of Disbursement Lodging | |
| Candidate Name | Category/Type | Transaction ID : BB6853E5540C94C9A9A1 [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. SLC International Airport | | Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2014 |
| Mailing Address | | Amount of Each Disbursement this Period 203.00 |
| City State Zip Code 0000 | Purpose of Disbursement Parking | |
| Candidate Name | Category/Type | Transaction ID : B5BB1BB1FE88649068FE [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. Amazon.com | | Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2014 |
| Mailing Address 1516 2nd Ave | | Amount of Each Disbursement this Period 164.98 |
| City Seattle State WA Zip Code 98101-1543 | Purpose of Disbursement Photo equipment | |
| Candidate Name | Category/Type | Transaction ID : B752FE577052F48B7ACB [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 29 OF 33 | |
| | <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 12 / 29 / 2014 |
| Mailing Address PO Box 54349 | | Amount of Each Disbursement this Period 596.32 Transaction ID : BEFBC9DD249664C41A3B |
| 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. Federal Express | | Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2014 |
| Mailing Address | | Amount of Each Disbursement this Period 97.07 Transaction ID : BA717034C79C3493CAA3 [MEMO ITEM] |
| City | State | |
| Zip Code | Purpose of Disbursement Shipping | 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. Federal Express | | Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2014 |
| Mailing Address | | Amount of Each Disbursement this Period 11.48 Transaction ID : BF4A71A587E384561B87 [MEMO ITEM] |
| City | State | |
| Zip Code | Purpose of Disbursement Shipping | 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: | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 596.32 |
| 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 30 OF 33 | |
| | <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 12 / 12 / 2014 |
| Mailing Address PO Box 54349 | | Amount of Each Disbursement this Period 9.80 |
| City Los Angeles | State CA | |
| Zip Code 90054-0349 | Purpose of Disbursement Finance charge | Transaction ID : B539D2DC702A9440DA43 |
| 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. Wells Fargo Business Card | | Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2014 |
| Mailing Address PO Box 54349 | | Amount of Each Disbursement this Period 39.00 |
| City Los Angeles | State CA | |
| Zip Code 90054-0349 | Purpose of Disbursement Bank charge | Transaction ID : B01ADDB0B93E940C7BB9 |
| 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. Wells Fargo Business Card | | Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2014 |
| Mailing Address PO Box 54349 | | Amount of Each Disbursement this Period 860.16 |
| City Los Angeles | State CA | |
| Zip Code 90054-0349 | Purpose of Disbursement Credit card payment - see below | Transaction ID : BD9079FDA1B484BC5AE6 |
| 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 860.16 |
| 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 31 OF 33 | |
| | <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 12 / 09 / 2014 |
| Mailing Address 315 Westfield Cir | | Amount of Each Disbursement this Period 3285.59 Transaction ID : B0ABE2BB0448C47418D0 |
| 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. Hyatt Regency On Capitol Hill | | Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014 |
| Mailing Address 400 New Jersey Ave NW | | Amount of Each Disbursement this Period 519.60 Transaction ID : B49C810C4D786448FAAC [MEMO ITEM] |
| City Washington | State DC Zip Code 20001-2002 | |
| Purpose of Disbursement Lodging | | 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. Costco | | Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2014 |
| Mailing Address 198 N 1200 E | | Amount of Each Disbursement this Period 981.89 Transaction ID : BA28DBC5151074C56AC1 [MEMO ITEM] |
| City Lehi | State UT Zip Code 84043-2294 | |
| Purpose of Disbursement Photographs | | 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 3285.59 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 32 OF 33 | |
| | <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 11 / 21 / 2014 |
| Mailing Address Longworth House Office Building | | Amount of Each Disbursement this Period 261.00 |
| City Washington | State DC | |
| Zip Code 20003 | Purpose of Disbursement Constituent Gifts | Transaction ID : BE71A30EBA9D9411C985 |
| 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. Amazon.com | | Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2014 |
| Mailing Address 1516 2nd Ave | | Amount of Each Disbursement this Period 583.70 |
| City Seattle | State WA | |
| Zip Code 98101-1543 | Purpose of Disbursement Books | Transaction ID : B44AE89A1B4BD4F4CB05 |
| 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. Costco | | Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2014 |
| Mailing Address 198 N 1200 E | | Amount of Each Disbursement this Period 102.01 |
| City Lehi | State UT | |
| Zip Code 84043-2294 | Purpose of Disbursement Constituent gift | Transaction ID : B29AB9A8FE217430CBED |
| 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 33 OF 33 | |
| | <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 12 / 29 / 2014 |
| Mailing Address PO Box 54349 | | Amount of Each Disbursement this Period 638.93 Transaction ID : B31AFEB99F99D4271994 |
| 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. Sign Factory | | Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014 |
| Mailing Address 8919 National Blvd | | Amount of Each Disbursement this Period 600.00 Transaction ID : BAC1BFE95BB6245079D6 [MEMO ITEM] |
| City Los Angeles | State CA | |
| Zip Code 90034-3307 | Purpose of Disbursement Signs | 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. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State | |
| Zip Code | Purpose of Disbursement | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 638.93 |
| TOTAL This Period (last page this line number only)..... | 50698.70 |