



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**FRIENDS OF MIKE LEE INC.**

Report Covering the Period: From: <sup>M M / D D / Y Y Y Y</sup> 07 01 2012 To: <sup>M M / D D / Y Y Y Y</sup> 09 30 2012

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	25975.00	493214.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	2400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	25975.00	490814.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	30790.92	617665.17
(b) Total Offsets to Operating Expenditures (from Line 14) .....	5218.58	25002.46
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	25572.34	592662.71
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<b>34198.24</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>41700.85</b>	

**For further information contact:**

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

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

13020194558

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

**FRIENDS OF MIKE LEE INC.**

Report Covering the Period: From: <sup>M M / D D / Y Y Y Y</sup> 07 01 2012 To: <sup>M M / D D / Y Y Y Y</sup> 09 30 2012

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	11975.00	288620.00
(ii) Unitemized .....	0.00	38605.00
(iii) TOTAL of contributions from individuals .....	11975.00	327225.00
(b) Political Party Committees .....	0.00	1000.00
(c) Other Political Committees (such as PACs) .....	14000.00	164989.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	25975.00	493214.00
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.) .....		
	5218.58	25002.46
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....		
	0.00	4.85
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) .....	31193.58	518221.31

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	30790.92	617665.17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	2400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	2400.00
21. OTHER DISBURSEMENTS .....	0.00	9600.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	30790.92	629665.17

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	33795.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	31193.58
25. SUBTOTAL (add Line 23 and Line 24).....	64989.16
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	30790.92
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	34198.24

13020194560

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

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

FOR LINE NUMBER: (check only one)	PAGE 5 OF 34
<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 MIKE LEE INC.**

Full Name (Last, First, Middle Initial) <b>C. Kate Lambrew Hull</b>			Date of Receipt M M / D D / Y Y Y Y 09 28 2012		
Mailing Address 409 Jackson Place			<b>Transaction ID : SA11AI.44749</b>		
City Alexandria	State VA	Zip Code 22302	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. <b>C</b>			Receipt , , 1000.00		
Name of Employer Fierce, Isakowitz & Blalock		Occupation Senior Vice President	Receipt , , 1000.00		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date , , .	Receipt , , 1000.00		

Full Name (Last, First, Middle Initial) <b>Frederick S. Humphries Jr.</b>			Date of Receipt M M / D D / Y Y Y Y 09 28 2012		
Mailing Address 4510 Reservoir Road NW			<b>Transaction ID : SA11AI.44757</b>		
City Washington	State DC	Zip Code 20007	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. <b>C</b>			Receipt , , 2500.00		
Name of Employer Best Efforts		Occupation Best Efforts	Receipt , , 2500.00		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date , , .	Receipt , , 2500.00		

Full Name (Last, First, Middle Initial) <b>Mark V. Hurd</b>			Date of Receipt M M / D D / Y Y Y Y 09 28 2012		
Mailing Address 127 Tuscaloosa Ave.			<b>Transaction ID : SA11AI.44755</b>		
City Atherton	State CA	Zip Code 94027	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. <b>C</b>			Receipt , , 5000.00		
Name of Employer Best Efforts		Occupation Best Efforts	Excessive contribution - Reattribution letter sent		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date , , .	Receipt , , 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	, , 8500.00
<b>TOTAL</b> This Period (last page this line number only).....	, , .

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>Michael E. Kassan</b>			Date of Receipt M M / D D / Y Y Y Y 09 20 2012		
Mailing Address 10727 Wilshire Blvd. #1705			<b>Transaction ID : SA11AI.44769</b>		
City Los Angeles	State CA	Zip Code 90024	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. <b>C</b>			Receipt , , 2000.00		
Name of Employer Best Efforts		Occupation Best Efforts	Receipt , , 2000.00		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date , , 2000.00			

Full Name (Last, First, Middle Initial) <b>Chris Nichols</b>			Date of Receipt M M / D D / Y Y Y Y 09 20 2012		
Mailing Address 574 South State Street			<b>Transaction ID : SA11AI.44778</b>		
City Orem	State UT	Zip Code 84058	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. <b>C</b>			Earmarked Contribution- See Below , , 475.00		
Name of Employer Prudential		Occupation Realtor	Earmarked Contribution- See Below , , 475.00		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date , , 475.00			

Full Name (Last, First, Middle Initial) <b>VOTESANE PAC</b>			Date of Receipt M M / D D / Y Y Y Y 09 20 2012		
Mailing Address PO BOX 2713			<b>Transaction ID : SA11AI.44778.0</b>		
City ALEXANDRIA	State VA	Zip Code 22301	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. <b>C C00484535</b>			Conduit for Above , , 475.00		
Name of Employer		Occupation	<b>[MEMO ITEM]</b>		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date , , 475.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	, , 2475.00
<b>TOTAL</b> This Period (last page this line number only).....	, , .

12020194562

**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 34
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Kate A. O'Sullivan</b>		Date of Receipt M M / D D / Y Y Y Y 09 28 2012
Mailing Address 880 Castro Street		Transaction ID : SA11AI.44759
City San Francisco	State CA	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
Name of Employer Best Efforts	Occupation Best Efforts	Receipt , , 1000.00
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date  , , 1000.00	

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	, , 1000.00
<b>TOTAL</b> This Period (last page this line number only).....	, , 11975.00

12020194563

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

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

FOR LINE NUMBER: PAGE 8 OF 34  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN MOTORCYCLIST POLITICAL ACTION COMMITTEE**

Mailing Address 13515 YARMOUTH DRIVE

City State Zip Code  
PICKERINGTON OH 43147

FEC ID number of contributing federal political committee. **C** C00120238

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
09 20 2012

Transaction ID : SA11C.44781

Amount of Each Receipt this Period  
Receipt , , 500.00

**B.** Full Name (Last, First, Middle Initial)  
**BURGER KING FRANCHISEE PAC**

Mailing Address 1701 BARRETT LAKES BLVD. NW  
SUITE 180

City State Zip Code  
KENNESAW GA 30144

FEC ID number of contributing federal political committee. **C** C00329425

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
09 28 2012

Transaction ID : SA11C.44763

Amount of Each Receipt this Period  
Receipt , , 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**CTIA - THE WIRELESS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1400 16TH STREET NW  
SUITE 600

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00262295

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  
09 20 2012

Transaction ID : SA11C.44774

Amount of Each Receipt this Period  
Receipt , , 1000.00  
Receipt - designated primary or to the next election for federal office per AO 2009-15

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

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

13020194567

**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 34  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

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

Mailing Address **333 108TH AVE NE**

City **BELLEVUE** State **WA** Zip Code **98004**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

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

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
M M / D D / Y Y Y Y  
09 28 2012

Transaction ID : **SA11C.44751**

Amount of Each Receipt this Period  
Receipt , , 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**GLOVER PARK PAC, INC.**

Mailing Address **700 13TH STREET, NW  
SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00466094**

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  
09 20 2012

Transaction ID : **SA11C.44772**

Amount of Each Receipt this Period  
Receipt - designated primary or to the next election for federal office per AO 2009-15  
 , , 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**KPMG PARTNERS/PRINCIPALS & EMPLOYEES PAC**

Mailing Address **1801 K STREET, NW**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00280222**

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  
09 20 2012

Transaction ID : **SA11C.44765**

Amount of Each Receipt this Period  
Receipt - designated primary or to the next election for federal office per AO 2009-15  
 , , 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... , , 5000.00

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

13020194565

**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 34  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**SABRE HOLDINGS CORP. POLITICAL ACTION COMMITTEE**

Mailing Address 1250 CONNECTICUT AVENUE NW  
SUITE 825

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00325811

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  
09 20 2012

Transaction ID : SA11C.44771

Amount of Each Receipt this Period  
1500.00

Receipt - designated primary or to the next election for federal office per AO 2009-15

**B.** Full Name (Last, First, Middle Initial)  
**SIDLEY AUSTIN LLP GOOD GOVERNMENT FUND**

Mailing Address 787 Seventh Ave

City State Zip Code  
New York NY 10019

FEC ID number of contributing federal political committee. **C** C00351270

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 20 2012

Transaction ID : SA11C.44767

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**TECHNOLOGY NETWORK (TECHNET) FEDERAL PAC**

Mailing Address 700 13TH STREET, NW, SUITE 600

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00328369

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  
09 28 2012

Transaction ID : SA11C.44753

Amount of Each Receipt this Period  
1000.00

Receipt - designated primary or to the next election for federal office per AO 2009-15

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

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

3500.00

13020194566

**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 34
	<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 MIKE LEE INC.**

Full Name (Last, First, Middle Initial) <b>UNIVERSAL MUSIC GROUP POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 09 28 2012
Mailing Address <b>2220 COLORADO AVENUE</b>		<b>Transaction ID : SA11C.44746</b>
City State Zip Code <b>SANTA MONICA CA 90404</b>	Amount of Each Receipt this Period Receipt , , 2000.00	
FEC ID number of contributing federal political committee. <b>C C00392464</b>		Amount of Each Receipt this Period Receipt , , 2000.00
Name of Employer Occupation	Election Cycle-to-Date , , 2000.00	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	, , 2000.00
<b>TOTAL</b> This Period (last page this line number only).....	, , 14000.00

13020194567

**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 34	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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

Full Name (Last, First, Middle Initial) <b>CONSTITUTIONAL CONSERVATIVES FUND</b>			Date of Receipt M M / D D / Y Y Y Y 09 20 2012	
Mailing Address 228 S WASHINGTON ST STE 115			<b>Transaction ID : SA14.44784</b>	
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22314</b>	Amount of Each Receipt this Period 4011.28	
FEC ID number of contributing federal political committee. <b>C C00497362</b>			Travel reimbursement	
Name of Employer		Occupation		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date	14014.40	

Full Name (Last, First, Middle Initial) <b>Delta Air</b>			Date of Receipt M M / D D / Y Y Y Y 07 30 2012	
Mailing Address 776 North Terminal Drive			<b>Transaction ID : SA14.45047</b>	
City <b>Salt lake City</b>	State <b>UT</b>	Zip Code <b>84116</b>	Amount of Each Receipt this Period 1010.00	
FEC ID number of contributing federal political committee. <b>C</b>			Airline travel refund	
Name of Employer		Occupation		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date	2419.80	

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	, ,	5021.28
<b>TOTAL</b> This Period (last page this line number only).....	, ,	5021.28

13020194568

**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)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS OF MIKE LEE INC.**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 776 North Terminal Drive

Date of Disbursement

M M / D D / Y Y Y Y  
07 26 2012

City State Zip Code  
Salt Lake City UT 84122

Amount of Each Disbursement this Period

Purpose of Disbursement  
Travel - Airfare

1079.80  
Transaction ID : SB17.44987

Candidate Name  
**FRIENDS OF MIKE LEE INC.**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) Convention

State: UT District:

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address P.O. Box 360001

Date of Disbursement

M M / D D / Y Y Y Y  
07 10 2012

City State Zip Code  
Ft. Lauderdale FL 33336

Amount of Each Disbursement this Period

Purpose of Disbursement  
Merchant Account Fee

7.95  
Transaction ID : SB17.44971

Candidate Name  
**FRIENDS OF MIKE LEE INC.**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) Convention

State: UT District:

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address P.O. Box 360001

Date of Disbursement

M M / D D / Y Y Y Y  
08 03 2012

City State Zip Code  
Ft. Lauderdale FL 33336

Amount of Each Disbursement this Period

Purpose of Disbursement  
Merchant Account Fee

7.95  
Transaction ID : SB17.45005

Candidate Name  
**FRIENDS OF MIKE LEE INC.**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) Convention

State: UT District:

**SUBTOTAL** of Disbursements This Page (optional) ..... 1095.70

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

13020194569

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. American Express**

Date of Disbursement

M M / D D / Y Y Y Y  
09 04 2012

Mailing Address P.O. Box 360001

City State Zip Code  
Ft. Lauderdale FL 33336

Amount of Each Disbursement this Period

Purpose of Disbursement  
Merchant Account Fee

, , 7.95

Transaction ID : SB17.45022

Candidate Name  
**FRIENDS OF MIKE LEE INC.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) Convention

State: UT District:

**B. AT&T**

Date of Disbursement

M M / D D / Y Y Y Y  
07 16 2012

Mailing Address P.O. Box 6463

City State Zip Code  
Carol Stream IL 60197

Amount of Each Disbursement this Period

Purpose of Disbursement  
Telephone Expense

, , 128.92

Transaction ID : SB17.44981

Candidate Name  
**FRIENDS OF MIKE LEE INC.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) Convention

State: UT District:

**C. AT&T**

Date of Disbursement

M M / D D / Y Y Y Y  
08 14 2012

Mailing Address P.O. Box 6463

City State Zip Code  
Carol Stream IL 60197

Amount of Each Disbursement this Period

Purpose of Disbursement  
Telephone, Telecommunications

, , 128.56

Transaction ID : SB17.45012

Candidate Name  
**FRIENDS OF MIKE LEE INC.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) Convention

State: UT District:

**SUBTOTAL** of Disbursements This Page (optional)..... , , 265.43

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

12020194570

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 34
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period  128.56 Transaction ID : SB17.45034
City Carol Stream	State IL	
Purpose of Disbursement Telephone Expense		Category/ Type
Candidate Name FRIENDS OF MIKE LEE INC.		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT	District:	

Full Name (Last, First, Middle Initial) <b>B. BUDGET RENT A CAR</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 641 North 3800 West		Amount of Each Disbursement this Period  233.14 Transaction ID : SB17.44995
City Salt Lake City	State UT	
Purpose of Disbursement Travel - Car Rental		Category/ Type
Candidate Name FRIENDS OF MIKE LEE INC.		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT	District:	

Full Name (Last, First, Middle Initial) <b>c. Cafe Rio</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 4301 Fairfax Rd.		Amount of Each Disbursement this Period  245.33 Transaction ID : SB17.45038
City Falls Church	State VA	
Purpose of Disbursement Meeting with constituents & donors		Category/ Type
Candidate Name FRIENDS OF MIKE LEE INC.		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	607.03
<b>TOTAL</b> This Period (last page this line number only).....	

13020194571

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 34
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19a <input type="checkbox"/> 19b	<input type="checkbox"/> 20a <input type="checkbox"/> 20b <input type="checkbox"/> 20c <input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2012
Mailing Address PO BOX 3006		Amount of Each Disbursement this Period  255.55 Transaction ID : SB17.44972
City Southeastern	State PA	
Zip Code 19398	Purpose of Disbursement Internet service	Category/ Type
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: UT District:	

Full Name (Last, First, Middle Initial) <b>B. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012
Mailing Address PO BOX 3006		Amount of Each Disbursement this Period  253.55 Transaction ID : SB17.45029
City Southeastern	State PA	
Zip Code 19398	Purpose of Disbursement Internet Service	Category/ Type
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: UT District:	

Full Name (Last, First, Middle Initial) <b>c. Dallas Victory Park</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 3090 Olive Street, #300		Amount of Each Disbursement this Period  864.09 Transaction ID : SB17.44997
City Dallas	State TX	
Zip Code 75219	Purpose of Disbursement Meeting with constituents & donors	Category/ Type
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	State: UT District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1373.19
<b>TOTAL</b> This Period (last page this line number only).....	

13020194572

**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 17 OF 34

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

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NAME OF COMMITTEE (In Full)

**FRIENDS OF MIKE LEE INC.**

Full Name (Last, First, Middle Initial)

**A. Daniel's Broiler**

Mailing Address 10500 NE 8th

Date of Disbursement

M M / D D / Y Y Y Y  
09 10 2012

City Bellevue State WA Zip Code 98004

Amount of Each Disbursement this Period

Purpose of Disbursement Meeting with constituents & donors

934.23

Candidate Name FRIENDS OF MIKE LEE INC.

Category/  
Type

Transaction ID : SB17.45027

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) Convention

State: UT District:

**B. Delta Air**

Mailing Address 776 North Terminal Drive

Date of Disbursement

M M / D D / Y Y Y Y  
07 10 2012

City Salt lake City State UT Zip Code 84116

Amount of Each Disbursement this Period

Purpose of Disbursement Travel - Airfare

1122.10

Candidate Name FRIENDS OF MIKE LEE INC.

Category/  
Type

Transaction ID : SB17.44973

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) Convention

State: UT District:

**C. Delta Air**

Mailing Address 776 North Terminal Drive

Date of Disbursement

M M / D D / Y Y Y Y  
07 25 2012

City Salt lake City State UT Zip Code 84116

Amount of Each Disbursement this Period

Purpose of Disbursement Travel - Airfare

1796.70

Candidate Name FRIENDS OF MIKE LEE INC.

Category/  
Type

Transaction ID : SB17.44986

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) Convention

State: UT District:

**SUBTOTAL** of Disbursements This Page (optional)..... 3853.03

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

13020194573

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Delta Air</b>		Date of Disbursement M M / D D / Y Y Y Y 07 30 2012
Mailing Address 776 North Terminal Drive		Amount of Each Disbursement this Period  290.60 Transaction ID : SB17.44996
City Salt lake City	State UT	
Zip Code 84116		Category/ Type
Purpose of Disbursement Travel - Airfare		
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: UT District:	

Full Name (Last, First, Middle Initial) <b>B. Delta Air</b>		Date of Disbursement M M / D D / Y Y Y Y 08 09 2012
Mailing Address 776 North Terminal Drive		Amount of Each Disbursement this Period  3006.60 Transaction ID : SB17.45009
City Salt lake City	State UT	
Zip Code 84116		Category/ Type
Purpose of Disbursement Travel - Airfare		
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: UT District:	

Full Name (Last, First, Middle Initial) <b>C. Delta Air</b>		Date of Disbursement M M / D D / Y Y Y Y 08 20 2012
Mailing Address 776 North Terminal Drive		Amount of Each Disbursement this Period  431.10 Transaction ID : SB17.45013
City Salt lake City	State UT	
Zip Code 84116		Category/ Type
Purpose of Disbursement Travel - Airfare		
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: UT District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3728.30
<b>TOTAL</b> This Period (last page this line number only).....	

1202019457A

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Delta Air</b>		Date of Disbursement M M / D D / Y Y Y Y 08 27 2012
Mailing Address 776 North Terminal Drive		Amount of Each Disbursement this Period  477.50 Transaction ID : SB17.45017
City Salt lake City	State UT	
Zip Code 84116		Category/ Type
Purpose of Disbursement Travel - Airfare		
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: UT District:	

Full Name (Last, First, Middle Initial) <b>B. Delta Air</b>		Date of Disbursement M M / D D / Y Y Y Y 09 17 2012
Mailing Address 776 North Terminal Drive		Amount of Each Disbursement this Period  1332.60 Transaction ID : SB17.45035
City Salt lake City	State UT	
Zip Code 84116		Category/ Type
Purpose of Disbursement Travel - Airfare		
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: UT District:	

Full Name (Last, First, Middle Initial) <b>c. Emily Bennion</b>		Date of Disbursement M M / D D / Y Y Y Y 09 26 2012
Mailing Address 2100 Bengal Blvd #I-102		Amount of Each Disbursement this Period  1536.00 Transaction ID : SB17.45046
City Cottonwood Heights	State UT	
Zip Code 84121		Category/ Type
Purpose of Disbursement Travel Reimbursement		
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: UT District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3346.10
<b>TOTAL</b> This Period (last page this line number only) .....	

12020194575

**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 34

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

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NAME OF COMMITTEE (In Full)

**FRIENDS OF MIKE LEE INC.**

Full Name (Last, First, Middle Initial)

**A. Gilbert & Stewart**

Mailing Address P.O. Box 1387

Date of Disbursement

M M / D D / Y Y Y Y  
08 03 2012

City State Zip Code  
Provo UT 84603

Amount of Each Disbursement this Period

1772.81

Purpose of Disbursement  
Accounting & Reporting Fees

Transaction ID : SB17.45045

Candidate Name  
**FRIENDS OF MIKE LEE INC.**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) Convention

State: UT District:

Full Name (Last, First, Middle Initial)

**B. GILBERT AND STEWART CPA'S**

Mailing Address 190 WEST 800 NORTH STE 100

Date of Disbursement

M M / D D / Y Y Y Y  
08 03 2012

City State Zip Code  
PROVO UT 84601

Amount of Each Disbursement this Period

4072.65

Purpose of Disbursement  
Debt repayment

Transaction ID : SB17.45051

Candidate Name  
**FRIENDS OF MIKE LEE INC.**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) Convention

State: UT District:

Full Name (Last, First, Middle Initial)

**C. GILBERT AND STEWART CPA'S**

Mailing Address 190 WEST 800 NORTH STE 100

Date of Disbursement

M M / D D / Y Y Y Y  
08 03 2012

City State Zip Code  
PROVO UT 84601

Amount of Each Disbursement this Period

1562.60

Purpose of Disbursement  
Debt repayment

Transaction ID : SB17.45052

Candidate Name  
**FRIENDS OF MIKE LEE INC.**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) Convention

State: UT District:

**SUBTOTAL** of Disbursements This Page (optional) ..... 7408.06

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

13020194576

**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 34

17     18     19a     19b  
20a    20b    20c    21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF MIKE LEE INC.**

Full Name (Last, First, Middle Initial)

**A. Highland Hideaway Storage**

Date of Disbursement

M M / D D / Y Y Y Y  
07      09      2012

Mailing Address 11251 N SUNSET DR

City State Zip Code  
Highland UT 84003

Amount of Each Disbursement this Period

Purpose of Disbursement  
Rent, Parking, Utilities

300.00

Transaction ID : SB17.45044

Candidate Name

**FRIENDS OF MIKE LEE INC.**

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For: 2016

Primary     General  
 Other (specify) Convention

State: UT District:

Full Name (Last, First, Middle Initial)

**B. Hilton**

Date of Disbursement

M M / D D / Y Y Y Y  
09      04      2012

Mailing Address 2225 North Lois Ave.

City State Zip Code  
Tampa FL 33607

Amount of Each Disbursement this Period

Purpose of Disbursement  
National convention travel - hotel

1736.00

Transaction ID : SB17.45023

Candidate Name

**FRIENDS OF MIKE LEE INC.**

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For: 2016

Primary     General  
 Other (specify) Convention

State: UT District:

Full Name (Last, First, Middle Initial)

**C. Mailchimp.Com**

Date of Disbursement

M M / D D / Y Y Y Y  
07      30      2012

Mailing Address 512 Means Street, Suite 404

City State Zip Code  
Atlanta GA 30318

Amount of Each Disbursement this Period

Purpose of Disbursement  
Website hosting

240.00

Transaction ID : SB17.44999

Candidate Name

**FRIENDS OF MIKE LEE INC.**

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For: 2016

Primary     General  
 Other (specify) Convention

State: UT District:

**SUBTOTAL** of Disbursements This Page (optional)....., , 2276.00

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

13020194577

**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 34			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Mailchimp.Com</b>		Date of Disbursement M M / D D / Y Y Y Y 08 31 2012
Mailing Address 512 Means Street, Suite 404		Amount of Each Disbursement this Period  240.00 Transaction ID : SB17.45021
City Atlanta State GA Zip Code 30318	Purpose of Disbursement Website hosting	
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT District:		

Full Name (Last, First, Middle Initial) <b>B. Paypal</b>		Date of Disbursement M M / D D / Y Y Y Y 07 10 2012
Mailing Address 2211 N FIRST STREET		Amount of Each Disbursement this Period  71.95 Transaction ID : SB17.44977
City SAN JOSE State CA Zip Code 95131	Purpose of Disbursement Merchant Account Fee	
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT District:		

Full Name (Last, First, Middle Initial) <b>c. Potbelly Sandwich Works</b>		Date of Disbursement M M / D D / Y Y Y Y 09 24 2012
Mailing Address 1701 Pennsylvania Ave., NW		Amount of Each Disbursement this Period  16.94 Transaction ID : SB17.45041
City Washington State DC Zip Code 20002	Purpose of Disbursement Meeting with constituents & donors	
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	328.89
<b>TOTAL</b> This Period (last page this line number only).....	

12020194578

**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 34
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Seventh Hill Pizza</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 327 7th Street, SE		Amount of Each Disbursement this Period  290.27 Transaction ID : SB17.45042
City Washington	State DC	
Purpose of Disbursement Meeting with constituents & donors		
Candidate Name FRIENDS OF MIKE LEE INC.		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT	District:	

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2012
Mailing Address P.O. Box 22807		Amount of Each Disbursement this Period  396.10 Transaction ID : SB17.44988
City Salt lake City	State UT	
Purpose of Disbursement Travel - Airfare		
Candidate Name FRIENDS OF MIKE LEE INC.		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT	District:	

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2012
Mailing Address P.O. Box 22807		Amount of Each Disbursement this Period  5.00 Transaction ID : SB17.44991
City Salt lake City	State UT	
Purpose of Disbursement Travel - Airfare		
Candidate Name FRIENDS OF MIKE LEE INC.		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	691.37
<b>TOTAL</b> This Period (last page this line number only).....	

13020194579

**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 34
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19a <input type="checkbox"/> 19b <input type="checkbox"/> 20a <input type="checkbox"/> 20b <input type="checkbox"/> 20c <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 07 30 2012
Mailing Address P.O. Box 22807		Amount of Each Disbursement this Period  181.30 Transaction ID : SB17.44992
City Salt lake City	State UT	
Purpose of Disbursement Travel - Airfare		Category/ Type
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT	District:	

Full Name (Last, First, Middle Initial) <b>B. Sprint</b>		Date of Disbursement M M / D D / Y Y Y Y 08 06 2012
Mailing Address 6391 Sprint Parkway		Amount of Each Disbursement this Period  254.18 Transaction ID : SB17.45008
City Overland Park	State KS	
Purpose of Disbursement Telephone Expense		Category/ Type
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT	District:	

Full Name (Last, First, Middle Initial) <b>C. THE ROSE SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 07 20 2012
Mailing Address 1910 East 10600 South		Amount of Each Disbursement this Period  222.31 Transaction ID : SB17.44982
City Sandy	State UT	
Purpose of Disbursement Flowers for constituents		Category/ Type
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	657.79
<b>TOTAL</b> This Period (last page this line number only).....	

13020194580

**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 34			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19a <input type="checkbox"/> 19b <input type="checkbox"/> 20a <input type="checkbox"/> 20b <input type="checkbox"/> 20c <input type="checkbox"/> 21				

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

Full Name (Last, First, Middle Initial) <b>A. THE ROSE SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 08 02 2012
Mailing Address 1910 East 10600 South		Amount of Each Disbursement this Period 120.80 Transaction ID : SB17.45003
City Sandy	State UT	
Zip Code 84092		Category/ Type
Purpose of Disbursement Gifts for constituents		
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: UT District:	

Full Name (Last, First, Middle Initial) <b>B. THE ROSE SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 08 22 2012
Mailing Address 1910 East 10600 South		Amount of Each Disbursement this Period 124.35 Transaction ID : SB17.45014
City Sandy	State UT	
Zip Code 84092		Category/ Type
Purpose of Disbursement Flowers to constituents		
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: UT District:	

Full Name (Last, First, Middle Initial) <b>c. Transfirst LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 10 2012
Mailing Address 3131 South Vaughn Way, Suite 350 Suite 350		Amount of Each Disbursement this Period 100.75 Transaction ID : SB17.45010
City Aurora	State CO	
Zip Code 80014		Category/ Type
Purpose of Disbursement Merchant Account Fee		
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: UT District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	345.90
<b>TOTAL</b> This Period (last page this line number only).....	.

12020194591

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A. Transfirst LLC</b> Full Name (Last, First, Middle Initial) Mailing Address 3131 South Vaughn Way, Suite 350 Suite 350 City Aurora State CO Zip Code 80014 Purpose of Disbursement Merchant Account Fee Candidate Name <b>FRIENDS OF MIKE LEE INC.</b> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Date of Disbursement M M / D D / Y Y Y Y 09 10 2012 Amount of Each Disbursement this Period , , 71.95 Transaction ID : <b>SB17.45026</b>
<b>B. US SENATE GIFT SHOP</b> Full Name (Last, First, Middle Initial) Mailing Address 4885 MacArthur Blvd. City Washington State DC Zip Code 20007 Purpose of Disbursement Gifts for constituents Candidate Name <b>FRIENDS OF MIKE LEE INC.</b> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Date of Disbursement M M / D D / Y Y Y Y 07 10 2012 Amount of Each Disbursement this Period , , 66.00 Transaction ID : <b>SB17.44976</b>
<b>C. US SENATE GIFT SHOP</b> Full Name (Last, First, Middle Initial) Mailing Address 4885 MacArthur Blvd. City Washington State DC Zip Code 20007 Purpose of Disbursement Gifts for constituents Candidate Name <b>FRIENDS OF MIKE LEE INC.</b> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Date of Disbursement M M / D D / Y Y Y Y 07 20 2012 Amount of Each Disbursement this Period , , 102.40 Transaction ID : <b>SB17.44983</b>

**SUBTOTAL** of Disbursements This Page (optional)..... , , 240.35  
**TOTAL** This Period (last page this line number only)..... , , .

13020194582

**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 34
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. US SENATE GIFT SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 08 02 2012
Mailing Address 4885 MacArthur Blvd.		Amount of Each Disbursement this Period  43.75 Transaction ID : SB17.45004
City Washington	State DC	
Zip Code 20007	Purpose of Disbursement Gifts for constituents	Category/ Type
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	State: UT District:	

Full Name (Last, First, Middle Initial) <b>B. US SENATE GIFT SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 08 13 2012
Mailing Address 4885 MacArthur Blvd.		Amount of Each Disbursement this Period  1039.95 Transaction ID : SB17.45011
City Washington	State DC	
Zip Code 20007	Purpose of Disbursement Gifts for constituents	Category/ Type
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	State: UT District:	

Full Name (Last, First, Middle Initial) <b>C. US SENATE GIFT SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 09 12 2012
Mailing Address 4885 MacArthur Blvd.		Amount of Each Disbursement this Period  25.40 Transaction ID : SB17.45030
City Washington	State DC	
Zip Code 20007	Purpose of Disbursement Gifts for constituents	Category/ Type
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	State: UT District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1109.10
<b>TOTAL</b> This Period (last page this line number only).....	

12020104582

**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 34			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. US SENATE GIFT SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2012
Mailing Address 4885 MacArthur Blvd.		Amount of Each Disbursement this Period 775.00 Transaction ID : SB17.45033
City Washington	State DC	
Zip Code 20007	Purpose of Disbursement Gifts for constituents	Category/ Type
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	State: UT District:	

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address Post Office Box 105378		Amount of Each Disbursement this Period 31.77 Transaction ID : SB17.44980
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Telephone Expense	Category/ Type
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	State: UT District:	

Full Name (Last, First, Middle Initial) <b>c. Woomi Kyoto Sushi</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2012
Mailing Address 201 Massachusetts Ave., NE		Amount of Each Disbursement this Period 65.16 Transaction ID : SB17.44984
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Meeting with constituents & donors	Category/ Type
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	State: UT District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	871.93
<b>TOTAL</b> This Period (last page this line number only) .....	

13020194584

**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 34			
	<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 MIKE LEE INC.**

Full Name (Last, First, Middle Initial) <b>A. Woomi Kyoto Sushi</b>		Date of Disbursement M M / D D / Y Y Y Y 09 24 2012
Mailing Address 201 Massachusetts Ave., NE		Amount of Each Disbursement this Period  240.04 Transaction ID : SB17.45043
City Washington State DC Zip Code 20002	Purpose of Disbursement Meeting with constituents & donors	
Candidate Name <b>FRIENDS OF MIKE LEE INC.</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT District:		

Full Name (Last, First, Middle Initial) <b>B.</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) <b>C.</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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	, , .	240.04
<b>TOTAL</b> This Period (last page this line number only).....	, , .	28438.21

13020194585

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 30 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**FRIENDS OF MIKE LEE INC.**

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

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

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

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>GILBERT AND STEWART CPA'S</b>	Nature of Debt (Purpose): ACCOUNTING FEES
Mailing Address 190 WEST 800 NORTH STE 100	
City State Zip Code PROVO UT 84601	

Outstanding Balance Beginning This Period	Transaction ID : SD10.44494	
, , 4072.65		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, , 0.00	, , 4072.65	, , 0.00

1) SUBTOTALS This Period This Page (optional) .....	9798.91
2) TOTALS This Period (last page this line number only) .....	.
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	.
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	.

13020194586

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 31 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>GILBERT AND STEWART CPA'S</b>	Nature of Debt (Purpose): ACCOUNTING FEES
Mailing Address 190 WEST 800 NORTH STE 100	
City State Zip Code PROVO UT 84601	

Outstanding Balance Beginning This Period		Transaction ID : SD10.44740
, , 1562.60		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, , 0.00	, , 1562.60	, , 0.00

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

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MIKE LEE</b>	Nature of Debt (Purpose): LOAN INTEREST
Mailing Address 917 QUAIL HOLLOW CIRCLE	
City State Zip Code ALPINE UT 84004	

Outstanding Balance Beginning This Period		Transaction ID : SD10.37158
, , 2460.54		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, , 0.00	, , 0.00	, , 2460.54

1) SUBTOTALS This Period This Page (optional) .....	, , 5352.41
2) TOTALS This Period (last page this line number only) .....	, , .
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	, , .
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	, , .

13020194587

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 32 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MIKE LEE</b>	Nature of Debt (Purpose): <b>LOAN INTEREST</b>
Mailing Address <b>917 QUAIL HOLLOW CIRCLE</b>	
City <b>ALPINE</b> State <b>UT</b> Zip Code <b>84004</b>	

Outstanding Balance Beginning This Period		<b>Transaction ID : SD10.37159</b>
, , 780.61		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, , 0.00	, , 0.00	, , 780.61

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MIKE LEE</b>	Nature of Debt (Purpose): <b>Loan interest</b>
Mailing Address <b>917 QUAIL HOLLOW CIRCLE</b>	
City <b>ALPINE</b> State <b>UT</b> Zip Code <b>84004</b>	

Outstanding Balance Beginning This Period		<b>Transaction ID : SD10.45058</b>
, , 0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, , 874.25	, , 0.00	, , 874.25

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

Outstanding Balance Beginning This Period		<b>Transaction ID : SD10.45055</b>
, , 0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, , 3792.50	, , 0.00	, , 3792.50

<b>1) SUBTOTALS</b> This Period This Page (optional) .....	5447.36
<b>2) TOTALS</b> This Period (last page this line number only) .....	.
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	.
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	.

8857610708

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 33 OF 34
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PARR BROWN GEE &amp; LOVELESS</b>	Nature of Debt (Purpose): <b>ATTORNEY FEES</b>
Mailing Address <b>PO BOX 11019</b>	
City State Zip Code <b>SALT LAKE CITY UT 84147</b>	

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.43978</b>	
, , 2050.25		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, , 0.00	, , 0.00	, , 2050.25

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

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.44496</b>	
, , 309.95		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, , 0.00	, , 0.00	, , 309.95

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PARR BROWN GEE &amp; LOVELESS</b>	Nature of Debt (Purpose): <b>Attorney fees</b>
Mailing Address <b>PO BOX 11019</b>	
City State Zip Code <b>SALT LAKE CITY UT 84147</b>	

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.45062</b>	
, , 0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, , 163.30	, , 0.00	, , 163.30

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	, , 2523.50
2) <b>TOTALS</b> This Period (last page this line number only) .....	, , .
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	, , .
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	, , .

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**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 34 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SPENCER STOKES</b>		Nature of Debt (Purpose): Expense reimbursement	
Mailing Address 4259 SKYLINE DRIVE			
City	State	Zip Code	
OGDEN	UT	84403	
Outstanding Balance Beginning This Period		Transaction ID : SD10.45059	
, , 0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
, , 1928.67	, , 0.00	, , 1928.67	

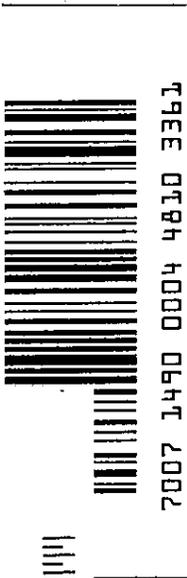
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>TERRA ECLIPSE</b>		Nature of Debt (Purpose): POLITICAL CONSULTING	
Mailing Address 9043 SOQUEL DRIVE			
City	State	Zip Code	
APTOS	CA	95003	
Outstanding Balance Beginning This Period		Transaction ID : SD10.44219	
, , 6150.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
, , 0.00	, , 0.00	, , 6150.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>TERRA ECLIPSE</b>		Nature of Debt (Purpose): Political consulting	
Mailing Address 9043 SOQUEL DRIVE			
City	State	Zip Code	
APTOS	CA	95003	
Outstanding Balance Beginning This Period		Transaction ID : SD10.45061	
, , 0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
, , 10500.00	, , 0.00	, , 10500.00	

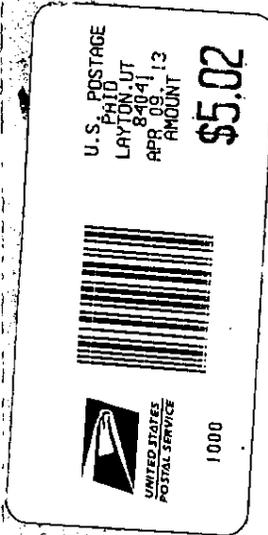
1) SUBTOTALS This Period This Page (optional) .....	▶	, , 18578.67
2) TOTALS This Period (last page this line number only) .....	▶	, , 41700.85
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	, , 0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		, , 41700.85

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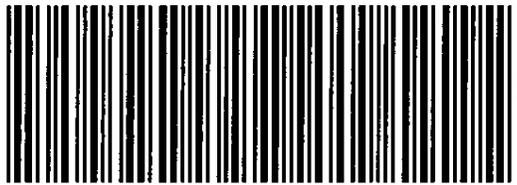
PREPARER

**DH**

DATE PREPARED

**4-16-13**

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