

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)

55 N Merchant St, #1488

Check if different than previously reported. (ACC)

American Fork

UT

84003-7059

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00431684

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

UT

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on / / in the State of

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Garfield, Bruce, , ,

Signature of Treasurer Garfield, Bruce, , ,

[Electronically Filed]

Date

/ /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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))....	0.00	184888.70
(b) Total Contribution Refunds (from Line 20(d))	0.00	13000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	171888.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2666.70	416305.72
(b) Total Offsets to Operating Expenditures (from Line 14).....	1199.36	22345.36
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	1467.34	393960.36
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.00	
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 05/2016)

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).....	0.00	58400.00
(ii) Unitemized.....	0.00	24468.70
(iii) TOTAL of contributions from individuals ▶	0.00	82868.70
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	102020.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	184888.70
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	5400.00
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.)	1199.36	22345.36
15. OTHER RECEIPTS (Dividends, Interest, etc.)	2611.81	57501.81
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	3811.17	270135.87

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 9

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2666.70	416305.72
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	267488.83	294088.83
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	3200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	9800.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	13000.00
21. OTHER DISBURSEMENTS	0.00	23700.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	270155.53	747094.55

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	266344.36
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3811.17
25. SUBTOTAL (add Line 23 and Line 24).....	270155.53
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	270155.53
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

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 5 OF 9	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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)
Highland Hideaway

Mailing Address 11251 N Sunset Dr

City Highland	State UT	Zip Code 84003-3861
------------------	-------------	------------------------

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

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 858.00

Date of Receipt
 / / 01 / 30 / 2018

Transaction ID : A4438248E95E64745A8D

Amount of Each Receipt this Period
 , , 354.00

Memo Item
Refund - rent

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

Mailing Address PO Box 660317

City Dallas	State TX	Zip Code 75266-0317
----------------	-------------	------------------------

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

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 845.36

Date of Receipt
 / / 02 / 28 / 2018

Transaction ID : A3F7CFD9929534912BAA

Amount of Each Receipt this Period
 , , 845.36

Memo Item
Refund - insurance

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
 / /

Amount of Each Receipt this Period
 , ,

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value=""/> , <input type="text" value=""/> , <input type="text" value=""/> 1199.36
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/> , <input type="text" value=""/> , <input type="text" value=""/> 1199.36

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF JASON CHAFFETZ

A. Full Name (Last, First, Middle Initial)
Chaffetz, Jason, , ,

Mailing Address 315 Westfield Cir

City Alpine	State UT	Zip Code 84004-1594
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FEC ID number of contributing federal political committee. **C**

Name of Employer USA	Occupation Congressman
-------------------------	---------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2611.81

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2018

Transaction ID : A4D550C4D4B01416CA82

Amount of Each Receipt this Period
 _____ 2611.81

Memo Item
 Purchased campaign equipment

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

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 2611.81
TOTAL This Period (last page this line number only)..... ▶	_____ 2611.81

**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 7 OF 9	
	<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 01 / 17 / 2018
Mailing Address 205 Pennsylvania Ave SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-1164
Purpose of Disbursement Software	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 2100.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BFF08E8ACC4A442C9A8C
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2018
Mailing Address PO Box 947		FEC Identification Number C
City American Fork	State UT	Zip Code 84003-0947
Purpose of Disbursement Merchant fees	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 68.90	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B72E1C96CB3BB4C409EF
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Hawkins		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2018
Mailing Address PO Box 971810 Ste 1		FEC Identification Number C
City Orem	State UT	Zip Code 84097-1810
Purpose of Disbursement Accounting fees	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 300.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B241D1080871E449FB75
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2468.90
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 8 OF 9			
	<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. Paypal		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018
Mailing Address 2211 N 1st St		FEC Identification Number C
City San Jose	State CA	Zip Code 95131-2021
Purpose of Disbursement Merchant fees		Amount of Each Disbursement this Period 60.00
Candidate Name	Category/ Type	Transaction ID : B8BB605EDC2B044DCBE3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018
Mailing Address PO Box 947		FEC Identification Number C
City American Fork	State UT	Zip Code 84003-0947
Purpose of Disbursement Merchant fees		Amount of Each Disbursement this Period 68.90
Candidate Name	Category/ Type	Transaction ID : B27F6813A358F4BE6BE8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018
Mailing Address PO Box 947		FEC Identification Number C
City American Fork	State UT	Zip Code 84003-0947
Purpose of Disbursement Merchant fees		Amount of Each Disbursement this Period 68.90
Candidate Name	Category/ Type	Transaction ID : BD5A5FB02B3944D1B91B
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	197.80
TOTAL This Period (last page this line number only).....▶	2666.70

**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 9 OF 9
	<input type="checkbox"/> 17 20a <input checked="" 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. Beehive PAC		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018
Mailing Address 315 S Westfield Cir		FEC Identification Number C C00491183
City Alpine	State UT	
Purpose of Disbursement Transfer: Transfer funds - close account		Transaction ID : BCBAEC785950347FE864
Candidate Name Beehive PAC		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Beehive Victory Fund, LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2018
Mailing Address 55 N Merchant St #1488		FEC Identification Number C
City American Fork	State UT	
Purpose of Disbursement Transfer: Transfer funds		Transaction ID : BF340175A19AA434B961
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	
Purpose of Disbursement		Transaction ID : _____
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	267488.83
TOTAL This Period (last page this line number only).....▶	267488.83