

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) Friends of Jason Chaffetz

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

ADDRESS (number and street) 175 S. West Temple, Suite 650 Salt Lake City UT 84101

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00431684 CITY STATE ZIP CODE STATE DISTRICT

3. IS THIS REPORT NEW OR AMENDED

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)

- (c) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 10 01 2007 through 12 31 2007

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 Corie Chan

Signature of Treasurer Electronically Filed by Corie Chan Date 04 02 2008

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

Table with 10 columns and 1 row, containing 'Office Use Only' and 'FEC FORM 3 (Revised 02/2003)'

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Friends of Jason Chaffetz

Report Covering the Period:

From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

To:

| | |
|---|---|
| M | M |
| 1 | 2 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| <hr/> | | |
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e))..... | 20275.00 | 65375.15 |
| (b) Total Contribution Refunds (from Line 20(d))..... | 0.00 | 0.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 20275.00 | 65375.15 |
| <hr/> | | |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17)..... | 12579.02 | 22333.04 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 12579.02 | 22333.04 |
| <hr/> | | |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 43042.11 | |
| <hr/> | | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| <hr/> | | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Friends of Jason Chaffetz

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To:

| | |
|---|---|
| M | M |
| 1 | 2 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

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).....

18275.00

62375.15

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL of contributions

18275.00

62375.15

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

2000.00

3000.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

20275.00

65375.15

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

20275.00

65375.15

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 17. OPERATING EXPENDITURES..... | 12579.02 | 22333.04 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES..... | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of all Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees..... | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS..... | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 12579.02 | 22333.04 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 35346.13 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)..... | 20275.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 55621.13 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 12579.02 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 43042.11 |

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)

| | | |
|---|--------------------|---|
| Name of Candidate Jason Chaffetz | | Candidate ID Number H8UT03089 |
| Name of Principal Campaign Committee Friends of Jason Chaffetz | | Committee ID Number C C00431684 |
| Committee Address 175 S. West Temple, Suite 650 | | |
| City Salt Lake City | State UT | ZIP 84101- |
| Report Covering Period (check one) <input type="checkbox"/> through June 30, or <input checked="" type="checkbox"/> through December 31 of the year preceding the year of the general election | | |
| | Primary | General |
| 1. Gross receipts of authorized committees | 63375.15 | 2000.00 |
| 2. Aggregate amount of contributions from personal funds of the candidate | 0.00 | 0.00 |
| 3. Gross receipts minus the candidate's personal contributions | 63375.15 | 2000.00 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 25
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

A. Full Name (Last, First, Middle Initial)
Dell Brown

Mailing Address 673 E 1725 N

City State Zip Code
Orem UT 84097

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

Name of Employer Occupation
Self Employed Management Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 500.00

Transaction ID: 71003.C59

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 10417 Oak Cir

City State Zip Code
American Fork UT 84003

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

Name of Employer Occupation
Avanti Business Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 2300.00

Transaction ID: 80114.C79

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 163 West 81st St

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
Clifford Chance USLLP Partner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 500.00

Transaction ID: 80114.C81

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **3300.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 25
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

A.

Full Name (Last, First, Middle Initial)
Tom Christensen

Mailing Address P. O. Box 35

City State Zip Code
Annabella UT 84711

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
10 / 18 / 2007

Transaction ID: 80114.C61

Amount of Each Receipt this Period
50.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Timothy R. Clark

Mailing Address 215 N. Matterhorn Dr

City State Zip Code
Alpine UT 84004-1584

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

Name of Employer Information Requested Occupation Information Requested
T. R. Clark Associates President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
12 / 26 / 2007

Transaction ID: 80114.C88

Amount of Each Receipt this Period
100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Julie Crowell

Mailing Address 1616 North 200 West

City State Zip Code
Centerville UT 84014

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

Name of Employer Information Requested Occupation Information Requested
N/A Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
12 / 26 / 2007

Transaction ID: 80114.C87

Amount of Each Receipt this Period
2300.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **2450.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 25
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

A. Full Name (Last, First, Middle Initial)
Tracy R. Crowell

Mailing Address 1616 North 200 West

City State Zip Code
Centerville UT 84014

FEC ID number of contributing federal political committee. C

Name of Employer: Crowell Advertising Occupation: President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt MM / DD / YYYY
12 / 26 / 2007

Transaction ID: 80114.C86

Amount of Each Receipt this Period 2300.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 11324 Red Canyon Ct

City State Zip Code
South Jordan UT 84095

FEC ID number of contributing federal political committee. C

Name of Employer: Driggs Search International Occupation: President & CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt MM / DD / YYYY
11 / 26 / 2007

Transaction ID: 80114.C78

Amount of Each Receipt this Period 100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3176 Andes Dr.

City State Zip Code
Port Neches TX 77651

FEC ID number of contributing federal political committee. C

Name of Employer: The Medical Center of Southeast Texas Occupation: Hospital Administration

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 50.00

Date of Receipt MM / DD / YYYY
10 / 03 / 2007

Transaction ID: 80114.C63

Amount of Each Receipt this Period 50.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2450.00

TOTAL This Period (last page this line number only)

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 25 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

| | | | |
|---|---|------------------------------------|--|
| A. | Full Name (Last, First, Middle Initial) Dale L. Fillmore | | Date of Receipt MM / DD / YYYY 11 / 05 / 2007 |
| | Mailing Address 231 Sequoia Circle | | Transaction ID: 80114.C67 |
| | City Alpine | State UT | Zip Code 84004-1893 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| | Name of Employer Stampin Up | Occupation President | Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 250.00 | |

| | | | |
|---|---|---|--|
| B. | Full Name (Last, First, Middle Initial) Bruce Garfield | | Date of Receipt MM / DD / YYYY 11 / 19 / 2007 |
| | Mailing Address 336 West 4650 North | | Transaction ID: 80114.C73 |
| | City Provo | State UT | Zip Code 84604-5529 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| | Name of Employer Self Employed | Occupation Certified Public Accountant | Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 500.00 | |

| | | | |
|---|---|------------------------------------|--|
| C. | Full Name (Last, First, Middle Initial) W. David Hemingway | | Date of Receipt MM / DD / YYYY 12 / 26 / 2007 |
| | Mailing Address 1212 Canyon Oak Wy | | Transaction ID: 80114.C85 |
| | City Salt Lake City | State UT | Zip Code 84103 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 400.00 |
| | Name of Employer Zions Bank | Occupation Vice President | Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 400.00 | |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1150.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 25

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

A.

Full Name (Last, First, Middle Initial)
Andrew Howard

Mailing Address 3131 Bannock Dr

City State Zip Code
Provo UT 84604

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

Name of Employer Occupation
American Bank of Commerce Vice President

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: 80114.C71

Amount of Each Receipt this Period

500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Melissa Johnson

Mailing Address 5155 W. Wood Shade Ct.

City State Zip Code
West Jordan UT 84084

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

Name of Employer Occupation
West Jordan City Council Council

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 50.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 80114.C90

Amount of Each Receipt this Period

50.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Betty O. Lewis

Mailing Address 678 East 3100 North

City State Zip Code
Provo UT 84604

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 100.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: 80114.C84

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

650.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 25

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

A.

Full Name (Last, First, Middle Initial)
Gary J. Maxwell

Mailing Address 4285 W. Sandalwood Dr

City State Zip Code
Pleasant Grove UT 84062

FEC ID number of contributing federal political committee. C

Name of Employer Gary J. Maxwell, LLC Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt MM / DD / YYYY
11 / 20 / 2007

Transaction ID: 80114.C74

Amount of Each Receipt this Period 200.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Ken Melby

Mailing Address 4725 S. Holladay Blvd, #230

City State Zip Code
Salt Lake City UT 84117

FEC ID number of contributing federal political committee. C

Name of Employer Kasey Enterprises Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 100.00

Date of Receipt MM / DD / YYYY
11 / 05 / 2007

Transaction ID: 80114.C66

Amount of Each Receipt this Period 100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Craig H. Miller

Mailing Address 575 West 600 North

City State Zip Code
Alpine UT 84004-1392

FEC ID number of contributing federal political committee. C

Name of Employer Church of Jesus Christ of Latt Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 100.00

Date of Receipt MM / DD / YYYY
11 / 07 / 2007

Transaction ID: 80114.C68

Amount of Each Receipt this Period 100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 400.00

TOTAL This Period (last page this line number only)

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 / 25 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

| | | | |
|---|--|------------------------------------|---|
| A. | Full Name (Last, First, Middle Initial) Kenneth Porter | | Date of Receipt |
| | Mailing Address 2740 North 3000 West | | <input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2007"/> |
| | City | State | Zip Code |
| | Delta | UT | 84624 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer Information Requested | | Occupation Information Requested | Transaction ID: 80114.C62 |
| Receipt For: 2008 | | Election Cycle-to-Date ▼ | |
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General | <input type="text" value="50.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | | Amount of Each Receipt this Period |
| | | | <input type="text" value="50.00"/> |
| | | | Receipt |
| | | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

| | | | |
|---|--|--------------------------------------|---|
| B. | Full Name (Last, First, Middle Initial) Jack Ryser | | Date of Receipt |
| | Mailing Address 3518 W. Caribou Cir | | <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2007"/> |
| | City | State | Zip Code |
| | South Jordan | UT | 84095-3348 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer Self Employed | | Occupation Advertising | Transaction ID: 80114.C80 |
| Receipt For: 2008 | | Election Cycle-to-Date ▼ | |
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General | <input type="text" value="2300.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | | Amount of Each Receipt this Period |
| | | | <input type="text" value="2300.00"/> |
| | | | In-Kind |
| | | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | | | Note: Creative services |

| | | | |
|---|--|-------------------------------------|---|
| C. | Full Name (Last, First, Middle Initial) Jennifer L. Ryser | | Date of Receipt |
| | Mailing Address 3518 W. Caribou Cir | | <input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2007"/> |
| | City | State | Zip Code |
| | South Jordan | UT | 84095 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer N/A | | Occupation Homemaker | Transaction ID: 80114.C89 |
| Receipt For: 2008 | | Election Cycle-to-Date ▼ | |
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General | <input type="text" value="500.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | | Amount of Each Receipt this Period |
| | | | <input type="text" value="500.00"/> |
| | | | Receipt |
| | | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="2850.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

A. Full Name (Last, First, Middle Initial)
James Seely

Mailing Address 376 N. Matterhorn Dr

City State Zip Code
Alpine UT 84004

FEC ID number of contributing federal political committee. C

Name of Employer NextPage Occupation Sales

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 125.00

Date of Receipt MM / DD / YYYY
12 / 03 / 2007

Transaction ID: 80114.C82

Amount of Each Receipt this Period 125.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5305 S. 44th Pl.

City State Zip Code
Rogers AR 72758

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 100.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2007

Transaction ID: 80114.C91

Amount of Each Receipt this Period 100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 13562 Bridle Pointe Cv

City State Zip Code
Draper UT 84020

FEC ID number of contributing federal political committee. C

Name of Employer Utah National Guard Occupation Sgt. Major

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 50.00

Date of Receipt MM / DD / YYYY
10 / 20 / 2007

Transaction ID: 80114.C65

Amount of Each Receipt this Period 50.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 25
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

A. Full Name (Last, First, Middle Initial)
Scot H. Stewart

Mailing Address 3149 W. Mandarin Ct

City State Zip Code
Grand Junction CO 81504

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

Name of Employer Occupation
Vistar Media Solutions Audio/Video Specialist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: 80114.C70

Amount of Each Receipt this Period
2300.00

In-Kind
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Note: Video Work

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

Mailing Address 4174 Bountiful Blvd

City State Zip Code
Bountiful UT 84010-5843

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

Name of Employer Occupation
Intelligent Beauty CSO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 50.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: 80114.C72

Amount of Each Receipt this Period
50.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 94 North 1200 East

City State Zip Code
Lindon UT 84042

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

Name of Employer Occupation
Shaklee Corp. Marketing Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: 80114.C64

Amount of Each Receipt this Period
100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2450.00**

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

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

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

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

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

A.

Full Name (Last, First, Middle Initial)
Jenny Zwick

Mailing Address 112 Beach St, #8

City Boston State MA Zip Code 02111

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1900.00

Date of Receipt 11 / 21 / 2007

Transaction ID: 80114.C76

Amount of Each Receipt this Period 1900.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Jenny Zwick

Mailing Address 112 Beach St, #8

City Boston State MA Zip Code 02111

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 12 / 03 / 2007

Transaction ID: 80114.C83

Amount of Each Receipt this Period 400.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2300.00

TOTAL This Period (last page this line number only) ► 18275.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 25
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

A.

Full Name (Last, First, Middle Initial)
Zions Bancorporation PAC

Mailing Address Head Office, One Main St

City State Zip Code
Salt Lake City UT 84111

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 7

Transaction ID: 80114.C69

Amount of Each Receipt this Period
2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2000.00 |
| TOTAL This Period (last page this line number only) | ▶ | 2000.00 |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

A.

Full Name (Last, First, Middle Initial)
CBIZ

Transaction ID: 80114.E24
Date of Disbursement

Mailing Address 175 S. West Temple, Suite 650

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 0 | 3 | | 2 | 0 | 7 | |

City State Zip Code
Salt Lake City UT 84101-

Amount of Each Disbursement this Period

| |
|--------|
| 967.23 |
|--------|

Purpose of Disbursement
Accounting

| |
|-------------------|
| Category/ Type |
|-------------------|

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

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

ACCOUNTING

State: District:

B.

Full Name (Last, First, Middle Initial)
CBIZ

Transaction ID: 80114.E25
Date of Disbursement

Mailing Address 175 S. West Temple, Suite 650

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | | 1 | 2 | | 2 | 0 | 7 | |

City State Zip Code
Salt Lake City UT 84101-

Amount of Each Disbursement this Period

| |
|---------|
| 1773.41 |
|---------|

Purpose of Disbursement
Accounting

| |
|-------------------|
| Category/ Type |
|-------------------|

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

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

ACCOUNTING

State: District:

C.

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

Transaction ID: 80114.E26
Date of Disbursement

Mailing Address 315 Westfield Cir

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 3 | | 2 | 0 | 7 | |

City State Zip Code
Alpine UT 84004-

Amount of Each Disbursement this Period

| |
|---------|
| 1479.96 |
|---------|

Purpose of Disbursement
Reimbursement see below

| |
|-------------------|
| Category/ Type |
|-------------------|

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

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

REIMBURSEMENT SEE BELOW

State: District:

SUBTOTAL of Disbursements This Page (optional)

| |
|---------|
| 4220.60 |
|---------|

TOTAL This Period (last page this line number only)

| |
|--|
| |
|--|

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

| | |
|--|--|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) FedEx Kinkos</p> <p>Mailing Address 10291 S State St</p> <p>City Sandy State UT Zip Code 84070-4116</p> <p>Purpose of Disbursement Printing/Copies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 80114.E48 Date of Disbursement: 10 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 273.80</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: PRINTING/COPIES</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) FedEx Kinkos</p> <p>Mailing Address 10291 S State St</p> <p>City Sandy State UT Zip Code 84070-4116</p> <p>Purpose of Disbursement Printing/Copies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 80114.E49 Date of Disbursement: 10 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 57.57</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: PRINTING/COPIES</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) U.S. Postal Service</p> <p>Mailing Address</p> <p>City Salt Lake City State UT Zip Code 84199-9811</p> <p>Purpose of Disbursement Postage for campaign mailer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 80114.E47 Date of Disbursement: 09 / 29 / 2007</p> <p>Amount of Each Disbursement this Period 411.79</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: POSTAGE FOR CAMPAIGN MAILER</p> |

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 25

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

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) U.S. Postal Service | Transaction ID: 80114.E46 Date of Disbursement 11 / 28 / 2007 |
| | Mailing Address | Amount of Each Disbursement this Period 175.00 |
| | City: Salt Lake City State: UT Zip Code: 84199-9811 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: BULK MAILING PERMIT |
| | Purpose of Disbursement: Bulk mailing permit Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|---|---|
| B. | Full Name (Last, First, Middle Initial) Newspaper Agency Company, LLC | Transaction ID: 80114.E31 Date of Disbursement 10 / 03 / 2007 |
| | Mailing Address: P. O. Box 704005 | Amount of Each Disbursement this Period 58.56 |
| | City: Salt Lake City State: UT Zip Code: 84170-4005 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SUBSCRIPTION |
| | Purpose of Disbursement: Subscription Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|---|---|
| C. | Full Name (Last, First, Middle Initial) Newspaper Agency Company, LLC | Transaction ID: 80114.E32 Date of Disbursement 12 / 19 / 2007 |
| | Mailing Address: P. O. Box 704005 | Amount of Each Disbursement this Period 183.04 |
| | City: Salt Lake City State: UT Zip Code: 84170-4005 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SUBSCRIPTION |
| | Purpose of Disbursement: Subscription Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional) ▶

241.60

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 25

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

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

A. Full Name (Last, First, Middle Initial)
Parr, Waddoups, Brown, Gee & Loveless

Mailing Address PO Box 11019

City State Zip Code
Salt Lake City UT 84147-

Purpose of Disbursement
Legal fees-document filing

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80114.E33

Date of Disbursement

11 / 12 / 2007

Amount of Each Disbursement this Period

250.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

LEGAL FEES-DOCUMENT FILING

B. Full Name (Last, First, Middle Initial)
Parr, Waddoups, Brown, Gee & Loveless

Mailing Address PO Box 11019

City State Zip Code
Salt Lake City UT 84147-

Purpose of Disbursement
Legal fees-document filing

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80114.E34

Date of Disbursement

11 / 21 / 2007

Amount of Each Disbursement this Period

59.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

LEGAL FEES-DOCUMENT FILING

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

Mailing Address

City State Zip Code

Purpose of Disbursement
Merchant account fees

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80114.E36

Date of Disbursement

10 / 20 / 2007

Amount of Each Disbursement this Period

65.60

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MERCHANT ACCOUNT FEES

SUBTOTAL of Disbursements This Page (optional) ▶

374.60

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) Paypal PayPal Mailing Address City State Zip Code Purpose of Disbursement Merchant account fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 80114.E37 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 7 |
| | Amount of Each Disbursement this Period 70.80 |
| | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | MERCHANT ACCOUNT FEES |
| | Category/Type |

| | |
|---|---|
| B. Full Name (Last, First, Middle Initial) Paypal PayPal Mailing Address City State Zip Code Purpose of Disbursement Merchant account fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 80114.E38 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7 |
| | Amount of Each Disbursement this Period 15.83 |
| | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | MERCHANT ACCOUNT FEES |
| | Category/Type |

| | |
|---|---|
| C. Full Name (Last, First, Middle Initial) Paypal PayPal Mailing Address City State Zip Code Purpose of Disbursement Merchant account fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 80114.E39 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 7 |
| | Amount of Each Disbursement this Period 4.95 |
| | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | MERCHANT ACCOUNT FEES |
| | Category/Type |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 91.58 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) Reflections Press</p> <p>Mailing Address 582 South 1100 West</p> <p>City Woods Cross State UT Zip Code 84087-</p> <p>Purpose of Disbursement Campaign brochure printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 80114.E40</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="541.02"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CAMPAIGN BROCHURE PRINTING</p> |
| <p>B. Full Name (Last, First, Middle Initial) Reflections Press</p> <p>Mailing Address 582 South 1100 West</p> <p>City Woods Cross State UT Zip Code 84087-</p> <p>Purpose of Disbursement Campaign brochure printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 80114.E41</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="741.24"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CAMPAIGN BROCHURE PRINTING</p> |
| <p>C. Full Name (Last, First, Middle Initial) Reflections Press</p> <p>Mailing Address 582 South 1100 West</p> <p>City Woods Cross State UT Zip Code 84087-</p> <p>Purpose of Disbursement Christmas card printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 80114.E42</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1304.63"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CHRISTMAS CARD PRINTING</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

2586.89

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) Jack Ryser | Transaction ID: 80114.C80IK Date of Disbursement 11 / 28 / 2007 |
| | Mailing Address 3518 W. Caribou Cir | Amount of Each Disbursement this Period 2300.00 |
| | City South Jordan State UT Zip Code 84095-3348 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Note: Creative services | IN KIND: NOTE: CREATIVE SERVICES |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial) Jennifer Scott | Transaction ID: 80114.E27 Date of Disbursement 10 / 22 / 2007 |
| | Mailing Address 1486 Fox Pointe Dr | Amount of Each Disbursement this Period 86.34 |
| | City West Jordan State UT Zip Code 84088- | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Reimbursement see below | REIMBURSEMENT SEE BELOW |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial) T-Mobile | Transaction ID: 80114.E43 Date of Disbursement 10 / 01 / 2007 |
| | Mailing Address P.O. Box 660252 | Amount of Each Disbursement this Period 86.34 |
| | City Dallas State TX Zip Code 75266-0252 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Phone | [MEMO ITEM] MEMO: PHONE |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) | ▶ | 2386.34 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 24 / 25

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

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) Jennifer Scott Mailing Address 1486 Fox Pointe Dr City West Jordan State UT Zip Code 84088- Purpose of Disbursement Reimbursement see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 80114.E28 Date of Disbursement 11 / 21 / 2007 Amount of Each Disbursement this Period 85.46 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 REIMBURSEMENT SEE BELOW |
| B. | Full Name (Last, First, Middle Initial) T-Mobile Mailing Address P.O. Box 660252 City Dallas State TX Zip Code 75266-0252 Purpose of Disbursement Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 80114.E44 Date of Disbursement 11 / 01 / 2007 Amount of Each Disbursement this Period 85.46 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: PHONE |
| C. | Full Name (Last, First, Middle Initial) Jennifer Scott Mailing Address 1486 Fox Pointe Dr City West Jordan State UT Zip Code 84088- Purpose of Disbursement Reimbursement see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 80114.E29 Date of Disbursement 12 / 31 / 2007 Amount of Each Disbursement this Period 201.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 REIMBURSEMENT SEE BELOW |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 287.41 |
| TOTAL This Period (last page this line number only) ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 25 / 25

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

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NAME OF COMMITTEE (In Full)
Friends of Jason Chaffetz

| | |
|--|---|
| <p>A. Full Name (Last, First, Middle Initial) T-Mobile</p> <p>Mailing Address P.O. Box 660252</p> <p>City Dallas State TX Zip Code 75266-0252</p> <p>Purpose of Disbursement Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 80114.E45 Date of Disbursement 12 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 201.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: PHONE</p> |
| <p>B. Full Name (Last, First, Middle Initial) Scot H. Stewart</p> <p>Mailing Address 3149 W. Mandarin Ct</p> <p>City Grand Junction State CO Zip Code 81504-</p> <p>Purpose of Disbursement Note: Video Work</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 80114.C70IK Date of Disbursement 11 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 2300.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>IN KIND: NOTE: VIDEO WORK</p> |
| <p>C. Full Name (Last, First, Middle Initial) Kit Wilkins</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement Creative services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 80114.E30 Date of Disbursement 10 / 18 / 2007</p> <p>Amount of Each Disbursement this Period 90.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CREATIVE SERVICES</p> |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) | 2390.00 |
| TOTAL This Period (last page this line number only) | 12579.02 |