

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Friends of Jason Chaffetz

ADDRESS (number and street) 175 S. West Temple, Suite 650
 Check if different than previously reported. (ACC)
Salt Lake City UT 84101

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

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [] [] [] in the State of []
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [] [] [] in the State of []

5. Covering Period 01 01 2008 through 03 31 2008

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 15 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.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Friends of Jason Chaffetz

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	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)).....	25234.14	90609.29
(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)).....	25234.14	90609.29
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	25416.35	47749.39
(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)).....	25416.35	47749.39
8. Cash on Hand at Close of Reporting Period (from Line 27).....	42859.90	
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

Write or Type Committee Name
Friends of Jason Chaffetz

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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).....

22095.00

84470.15

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL of contributions

22095.00

84470.15

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

0.00

3000.00

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

3139.14

3139.14

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

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

25234.14

90609.29

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)..... ▶

25234.14

90609.29

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	25416.35	47749.39
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) ▶	25416.35	47749.39

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	43042.11
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	25234.14
25. SUBTOTAL (add Line 23 and Line 24).....	68276.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	25416.35
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	42859.90

**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 / 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

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) Joseph Broadbent		Date of Receipt MM / DD / YYYY 03 / 26 / 2008
	Mailing Address 12547 South 1745 East		Transaction ID: 80402.C128
	City Draper	State UT	Zip Code 84020
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer OMNI Brokerage, Inc.	Occupation Registered Representative	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 ▼ 200.00		

B.	Full Name (Last, First, Middle Initial) Kathleen Bryson		Date of Receipt MM / DD / YYYY 02 / 14 / 2008
	Mailing Address 3800 Sherwood Dr		Transaction ID: 80322.C95
	City Provo	State UT	Zip Code 84604
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer N/A	Occupation Homemaker	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 ▼ 2300.00		

C.	Full Name (Last, First, Middle Initial) Alex Chaffetz		Date of Receipt MM / DD / YYYY 03 / 10 / 2008
	Mailing Address P. O. Box 2123		Transaction ID: 80322.C104
	City Grand Junction	State CO	Zip Code 81502
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Rock Chalk Media, LLC	Occupation Managing Partner	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 ▼ 2500.00		

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
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 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)
Alex Chaffetz
Mailing Address P. O. Box 2123
City State Zip Code
Grand Junction CO 81502
FEC ID number of contributing federal political committee. **C**
Name of Employer Rock Chalk Media, LLC Occupation Managing Partner
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00
Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2008
Transaction ID: 80322.C105
Amount of Each Receipt this Period
-200.00
Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
REATTRIBUTION TO SPOUSE

B. Full Name (Last, First, Middle Initial)
Christy Chaffetz
Mailing Address P. O. Box 2123
City State Zip Code
Grand Junction CO 81502
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) ▼ 1700.00
Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2008
Transaction ID: 80322.C106
Amount of Each Receipt this Period
200.00
Reattribution Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

C. Full Name (Last, First, Middle Initial)
David W. Checketts
Mailing Address 27 Father Peters Ln
City State Zip Code
New Canaan CT 06840
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Entrepreneur
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y Y
03 / 03 / 2008
Transaction ID: 80322.C100
Amount of Each Receipt this Period
500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **500.00**
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 7 / 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) Dennis Crandall		Date of Receipt MM / DD / YYYY 03 / 11 / 2008
	Mailing Address 3825 E. Minton Circle		Transaction ID: 80322.C114
	City Mesa	State AZ	Zip Code 85215
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00
	Name of Employer Sonoran Spine Center	Occupation Spine Surgeon	Reattribution Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] REATTRIBUTION FROM SPOUSE
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 700.00		

B.	Full Name (Last, First, Middle Initial) Laura Crandall		Date of Receipt MM / DD / YYYY 03 / 11 / 2008
	Mailing Address 3825 E. Minton Circle		Transaction ID: 80322.C112
	City Mesa	State AZ	Zip Code 85215
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
	Name of Employer N/A	Occupation Homemaker	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 ▼ 3000.00		

C.	Full Name (Last, First, Middle Initial) Laura Crandall		Date of Receipt MM / DD / YYYY 03 / 11 / 2008
	Mailing Address 3825 E. Minton Circle		Transaction ID: 80322.C113
	City Mesa	State AZ	Zip Code 85215
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -700.00
	Name of Employer N/A	Occupation Homemaker	Reattribution Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] REATTRIBUTED TO SPOUSE
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		

SUBTOTAL of Receipts This Page (optional)	2000.00
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)

<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)
Shelli Gardner

Mailing Address 610 W. Westfield Rd

City State Zip Code
Alpine UT 84004

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Stampin Up Chief Executive Officer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
03 / 05 / 2008

Transaction ID: 80322.C101

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)
Jennifer Gubler

Mailing Address 832 Meadow Ln

City State Zip Code
Alpine UT 84004

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self Employed Commercial Property Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 75.00

Date of Receipt MM / DD / YYYY
02 / 26 / 2008

Transaction ID: 80322.C98

Amount of Each Receipt this Period
75.00

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

C.

Full Name (Last, First, Middle Initial)
Joan D. Johnson

Mailing Address 2448 E. Fairview Cir

City State Zip Code
Mesa AZ 85204

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
N/A Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 130.00

Date of Receipt MM / DD / YYYY
03 / 31 / 2008

Transaction ID: 80402.C127

Amount of Each Receipt this Period
30.00

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

SUBTOTAL of Receipts This Page (optional) 605.00

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) David T. Lisonbee		Date of Receipt MM / DD / YYYY 03 / 25 / 2008
	Mailing Address 304 East 1600 North		Transaction ID: 80402.C118
	City Orem	State UT	Zip Code 84057
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer 4 Life Research	Occupation Businessman	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 ▼ 2300.00
---	-------------------------------------

B.	Full Name (Last, First, Middle Initial) Karen D. Lundgren		Date of Receipt MM / DD / YYYY 02 / 20 / 2008
	Mailing Address 4307 Daisy Dr		Transaction ID: 80322.C97
	City Morgan	State UT	Zip Code 84050
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer Information Requested	Occupation Information Requested	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 ▼ 50.00
---	-----------------------------------

C.	Full Name (Last, First, Middle Initial) Clinton McKinlay		Date of Receipt MM / DD / YYYY 01 / 23 / 2008
	Mailing Address 3526 via Esperanza Wy		Transaction ID: 80123.C92
	City South Jordan	State UT	Zip Code 84095-8147
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer Direct Selling Industry	Occupation Executive	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 ▼ 300.00
---	------------------------------------

SUBTOTAL of Receipts This Page (optional)	▶	2550.00
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)
Clinton McKinlay

Mailing Address 3526 via Esperanza Wy

City State Zip Code
South Jordan UT 84095-8147

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

Name of Employer Direct Selling Industry Occupation Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1050.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2008

Transaction ID: 80322.C109

Amount of Each Receipt this Period
750.00

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

B.

Full Name (Last, First, Middle Initial)
Clinton McKinlay

Mailing Address 3526 via Esperanza Wy

City State Zip Code
South Jordan UT 84095-8147

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

Name of Employer Direct Selling Industry Occupation Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1800.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2008

Transaction ID: 80322.C108

Amount of Each Receipt this Period
750.00

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

C.

Full Name (Last, First, Middle Initial)
Ryan D. Nelsen

Mailing Address 721 South 720 West

City State Zip Code
Provo UT 84601

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

Name of Employer Self Employed Occupation Marketing Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
MM / DD / YYYY
02 / 19 / 2008

Transaction ID: 80322.C96

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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)
Barbara R. Neville

Mailing Address 2832 West 7268 South

City State Zip Code
West Jordan UT 84084

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: 80402.C123

Amount of Each Receipt this Period
10.00

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

B.

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

Mailing Address 768 Meadow Ln

City State Zip Code
Alpine UT 84004-1527

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 11 / 2008

Transaction ID: 80322.C111

Amount of Each Receipt this Period
500.00

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

C.

Full Name (Last, First, Middle Initial)
Kevin OConnor

Mailing Address 145 Monarch Bay Dr

City State Zip Code
Dana Point CA 92629-3446

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

Name of Employer MDM, Inc. Occupation Architect

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 06 / 2008

Transaction ID: 80322.C103

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) ► **560.00**

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"/> 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) Ron A. Raddon		Date of Receipt MM / DD / YYYY 03 / 19 / 2008
	Mailing Address 1111 Draper Pkwy, Ste 101		Transaction ID: 80402.C119
	City Draper	State UT	Zip Code 84020-9145
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer Self Employed	Occupation Real Estate Developer	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 ▼ 2300.00	

B.	Full Name (Last, First, Middle Initial) Scott Riddle		Date of Receipt MM / DD / YYYY 03 / 05 / 2008
	Mailing Address 694 South Eagle Wy		Transaction ID: 80402.C120
	City Kaysville	State UT	Zip Code 84037
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer Reflections Press	Occupation Owner	In-Kind <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 ▼ 2300.00	Note: Creative printing service

C.	Full Name (Last, First, Middle Initial) Robert Sawyer		Date of Receipt MM / DD / YYYY 03 / 10 / 2008
	Mailing Address 496 East 1150 North		Transaction ID: 80322.C110
	City Springville	State UT	Zip Code 84663
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Information Requested	Occupation Information Requested	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 ▼ 20.00	

SUBTOTAL of Receipts This Page (optional)	▶	4620.00
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 13 / 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

<p>A. Full Name (Last, First, Middle Initial) Laurie Seron</p> <p>Mailing Address 1855 Fieldcrest Ln</p> <p>City State Zip Code Salt Lake City UT 84117</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Seron Foods, Inc. Occupation President</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 25.00</p>	<p>Date of Receipt 03 / 27 / 2008</p> <p>Transaction ID: 80402.C122</p> <p>Amount of Each Receipt this Period 25.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Henry Sittner</p> <p>Mailing Address 7139 Pindell School Rd</p> <p>City State Zip Code Fulton MD 20759</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Information Requested Occupation Information Requested</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 35.00</p>	<p>Date of Receipt 03 / 10 / 2008</p> <p>Transaction ID: 80322.C102</p> <p>Amount of Each Receipt this Period 35.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> <p>Note: Pay pal</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) James E. Slade</p> <p>Mailing Address 134 West 725 North</p> <p>City State Zip Code Lindon UT 84042</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Utah National Guard Occupation Officer</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 100.00</p>	<p>Date of Receipt 03 / 17 / 2008</p> <p>Transaction ID: 80322.C115</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	160.00
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)
Michael D. Smith

Mailing Address 9222 South 6200 West

City State Zip Code
Payson UT 84651-9772

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
02 / 29 / 2008

Transaction ID: 80322.C99

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
Grant T. Stucki

Mailing Address 215 N. Country Manor Ln

City State Zip Code
Alpine UT 84004-1787

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
02 / 15 / 2008

Transaction ID: 80322.C94

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 2654 Daybreaker Dr.

City State Zip Code
Park City UT 84098

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
03 / 21 / 2008

Transaction ID: 80326.C117

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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)
Richard Votaw
Mailing Address 13132 E. Lakeland Rd
City Santa Fe Springs State CA Zip Code 90670
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
2300.00
Date of Receipt 01 / 28 / 2008
Transaction ID: 80322.C93
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)
Chris L. Wall
Mailing Address P. O. Box 656
City Oakley State UT Zip Code 84055
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) ▼
1250.00
Date of Receipt 03 / 28 / 2008
Transaction ID: 80402.C126
Amount of Each Receipt this Period 1250.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Trent Wall
Mailing Address P. O. Box 656
City Oakley State UT Zip Code 84055
FEC ID number of contributing federal political committee. **C**
Name of Employer Wall Machinery, Inc. Occupation President
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
1250.00
Date of Receipt 03 / 28 / 2008
Transaction ID: 80402.C124
Amount of Each Receipt this Period 1250.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **4800.00**
TOTAL This Period (last page this line number only) ▶ **22095.00**

**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)
Jason Chaffetz

Mailing Address 315 Westfield Cir

City State Zip Code
Alpine UT 84004

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

Name of Employer Maxtera Inc. Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1467.60

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2008

Transaction ID: 80322.C116

Amount of Each Receipt this Period
1467.60

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

Note: Travel expenses

B.

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

Mailing Address 315 Westfield Cir

City State Zip Code
Alpine UT 84004

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

Name of Employer Maxtera Inc. Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3139.14

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2008

Transaction ID: 80402.C121

Amount of Each Receipt this Period
1671.54

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

Note: Trifold mailer/Reflection

SUBTOTAL of Receipts This Page (optional)	3139.14
TOTAL This Period (last page this line number only)	3139.14

**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 / 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) CBIZ	Transaction ID: 80322.E50 Date of Disbursement 01 / 09 / 2008
	Mailing Address 175 S. West Temple, Suite 650	Amount of Each Disbursement this Period 1362.56
	City Salt Lake City State UT Zip Code 84101-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Accounting Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type ACCOUNTING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) CBIZ	Transaction ID: 80322.E51 Date of Disbursement 02 / 13 / 2008
	Mailing Address 175 S. West Temple, Suite 650	Amount of Each Disbursement this Period 691.64
	City Salt Lake City State UT Zip Code 84101-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Accounting Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type ACCOUNTING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Jason Chaffetz	Transaction ID: 80322.C1161K Date of Disbursement 03 / 17 / 2008
	Mailing Address 315 Westfield Cir	Amount of Each Disbursement this Period 1467.60
	City Alpine State UT Zip Code 84004-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Note: Travel expenses Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type IN KIND: NOTE: TRAVEL EXPENSES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	3521.80
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<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) Jason Chaffetz	Transaction ID: 80402.C121IK Date of Disbursement 03 / 24 / 2008
	Mailing Address 315 Westfield Cir	Amount of Each Disbursement this Period 1671.54
	City Alpine State UT Zip Code 84004-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Note: Trifold mailer/Reflection Candidate Name	Category/Type
	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) ▼
		IN KIND: NOTE: TRIFOLD MAILER/REFLECTION

B.	Full Name (Last, First, Middle Initial) Crowell Advertising and Marketing	Transaction ID: 80322.E54 Date of Disbursement 01 / 30 / 2008
	Mailing Address 12 South 400 West, Suite 200	Amount of Each Disbursement this Period 7500.00
	City Salt Lake City State UT Zip Code 84101-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Campaign Marketing and event Candidate Name	Category/Type
	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) ▼
		CAMPAIGN MARKETING AND EVENT

C.	Full Name (Last, First, Middle Initial) Deidre Henderson	Transaction ID: 80322.E55 Date of Disbursement 03 / 17 / 2008
	Mailing Address 462 West Rivercross Road	Amount of Each Disbursement this Period 192.42
	City Spanish Fork State UT Zip Code 84660-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement see below Candidate Name	Category/Type
	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) ▼
		REIMBURSEMENT SEE BELOW

SUBTOTAL of Disbursements This Page (optional)	▶	9363.96
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) U.S. Postal Service	Transaction ID: 80322.E56 Date of Disbursement 03 / 15 / 2008
	Mailing Address	Amount of Each Disbursement this Period 192.42
	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
	Purpose of Disbursement: Postage Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: POSTAGE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) InthePaint	Transaction ID: 80322.E59 Date of Disbursement 02 / 07 / 2008
	Mailing Address: 1260 W 1650 N	Amount of Each Disbursement this Period 989.80
	City: Springville State: UT Zip Code: 84663-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement: Campaign T-shirts Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	CAMPAIGN T-SHIRTS
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Kellie Nelson	Transaction ID: 80322.E63 Date of Disbursement 03 / 17 / 2008
	Mailing Address: 513 South 470 West	Amount of Each Disbursement this Period 182.00
	City: Spanish Fork State: UT Zip Code: 84660-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement: Reimbursement see below Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	REIMBURSEMENT SEE BELOW
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	1171.80
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<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: 80322.E64 Date of Disbursement MM / DD / YYYY 03 / 16 / 2008
	Mailing Address	Amount of Each Disbursement this Period 182.00
	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: POSTAGE
	Purpose of Disbursement: Postage 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) Office of the Lt. Governor	Transaction ID: 80322.E65 Date of Disbursement MM / DD / YYYY 02 / 18 / 2008
	Mailing Address: State Capitol Complex	Amount of Each Disbursement this Period 413.00
	City: Salt Lake City State: UT Zip Code: 84114-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CANDIDATE FILING FEE
	Purpose of Disbursement: Candidate filing fee 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) Paypal PayPal	Transaction ID: 80402.E72 Date of Disbursement MM / DD / YYYY 03 / 10 / 2008
	Mailing Address	Amount of Each Disbursement this Period 27.18
	City: State: Zip Code:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 MERCHANT ACCOUNT FEES
	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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

440.18

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 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) 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: 80402.E71 Date of Disbursement 03 / 26 / 2008 Amount of Each Disbursement this Period 14.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 MERCHANT ACCOUNT FEES
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: 80402.E73 Date of Disbursement 03 / 27 / 2008 Amount of Each Disbursement this Period 6.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 MERCHANT ACCOUNT FEES
C.	Full Name (Last, First, Middle Initial) Reflections Press Mailing Address 582 South 1100 West City State Zip Code Woods Cross UT 84087- Purpose of Disbursement Christmas card printing 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: 80322.E66 Date of Disbursement 01 / 09 / 2008 Amount of Each Disbursement this Period 400.78 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CHRISTMAS CARD PRINTING

SUBTOTAL of Disbursements This Page (optional) ▶

421.68

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 printing envelopes print</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: 80322.E68 Date of Disbursement 02 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 4912.90</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CAMPAIGN PRINTING ENVELOPES PRINT</p>
<p>B. Full Name (Last, First, Middle Initial) Renaissance Signs, Inc.</p> <p>Mailing Address 1816 Indiana Ave</p> <p>City Salt Lake City State UT Zip Code 84104-</p> <p>Purpose of Disbursement Campaign signs</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: 80322.E69 Date of Disbursement 01 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 1912.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CAMPAIGN SIGNS</p>
<p>C. Full Name (Last, First, Middle Initial) Scott Riddle</p> <p>Mailing Address 694 South Eagle Wy</p> <p>City Kaysville State UT Zip Code 84037-</p> <p>Purpose of Disbursement Note:Creative printing service</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: 80402.C1201K Date of Disbursement 03 / 05 / 2008</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:CREATIVE PRINTING SERVICE</p>

SUBTOTAL of Disbursements This Page (optional)	9125.40
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) Jennifer Scott	Transaction ID: 80322.E60 Date of Disbursement 02 / 13 / 2008
	Mailing Address 1486 Fox Pointe Dr	Amount of Each Disbursement this Period 85.17
	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 Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	REIMBURSEMENT SEE BELOW
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) T-Mobile	Transaction ID: 80322.E62 Date of Disbursement 01 / 01 / 2008
	Mailing Address P.O. Box 660252	Amount of Each Disbursement this Period 85.17
	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 Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: PHONE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Jennifer Scott	Transaction ID: 80322.E61 Date of Disbursement 03 / 17 / 2008
	Mailing Address 1486 Fox Pointe Dr	Amount of Each Disbursement this Period 194.24
	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 Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	REIMBURSEMENT SEE BELOW
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	279.41
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)

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<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) T-Mobile	Transaction ID: 80402.E74 Date of Disbursement 02 / 29 / 2008
	Mailing Address P.O. Box 660252	Amount of Each Disbursement this Period 85.79
	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	
	Candidate Name	Category/Type
	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) ▼
		[MEMO ITEM] MEMO: PHONE

B.	Full Name (Last, First, Middle Initial) Connie Smith	Transaction ID: 80322.E52 Date of Disbursement 02 / 07 / 2008
	Mailing Address 1212 S. Avalon Dr.	Amount of Each Disbursement this Period 309.65
	City Springville State UT Zip Code 84663-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement-supplies and travel	
	Candidate Name	Category/Type
	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) ▼
		REIMBURSEMENT-SUPPLIES AND TRAVEL

C.	Full Name (Last, First, Middle Initial) Connie Smith	Transaction ID: 80322.E53 Date of Disbursement 03 / 17 / 2008
	Mailing Address 1212 S. Avalon Dr.	Amount of Each Disbursement this Period 61.01
	City Springville State UT Zip Code 84663-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement for supplies	
	Candidate Name	Category/Type
	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) ▼
		REIMBURSEMENT FOR SUPPLIES

SUBTOTAL of Disbursements This Page (optional)	370.66
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)

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<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) Dell Smith</p> <p>Mailing Address 1212 Avalon Dr.</p> <p>City Springville State UT Zip Code 84663-</p> <p>Purpose of Disbursement Reimbursement see below</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: 80322.E57</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="221.46"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>REIMBURSEMENT SEE BELOW</p>
<p>B.</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</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: 80322.E58</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="156.00"/></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</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Utah County Republican Party</p> <p>Mailing Address c/o Marian Monnahan PO Box 531</p> <p>City Provo State UT Zip Code 84603-</p> <p>Purpose of Disbursement Lincoln day dinner</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: 80322.E70</p> <p>Date of Disbursement</p> <p><input type="text" value="01"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>LINCOLN DAY DINNER</p>

SUBTOTAL of Disbursements This Page (optional) ▶

721.46

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

25416.35