

**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 66 OF 631
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) MR. JOHN Z. KUKRAL			Date of Receipt M M D D Y Y 04 23 2016		
A. Mailing Address 575 5TH AVENUE			Transaction ID : SA11A.50862		
City NEW YORK	State NY	Zip Code 10017-2422	Amount of Each Receipt this Period -2700.00		
FEC ID number of contributing federal political committee. IC			Memo Item CONTRIBUTION REDESIGNATION TO GENERAL		
Name of Employer INFORMATION REQUESTED PER BEST EFF		Occupation INFORMATION REQUESTED PER BEST EFF			
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) CONVENTION		Election Cycle-to-Date 8100.00			

Full Name (Last, First, Middle Initial) MR. JOHN Z. KUKRAL			Date of Receipt M M D D Y Y 06 21 2016		
B. Mailing Address 575 5TH AVENUE			Transaction ID : SA11A.50863		
City NEW YORK	State NY	Zip Code 10017-2422	Amount of Each Receipt this Period 2700.00		
FEC ID number of contributing federal political committee. C			Memo Item CONTRIBUTION REDESIGNATION FROM CONVENTION		
Name of Employer INFORMATION REQUESTED PER BEST EFF		Occupation INFORMATION REQUESTED PER BEST EFF			
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 8100.00			

Full Name (Last, First, Middle Initial) ROBERT LAMBERT			Date of Receipt M M D D Y Y 04 05 2016		
C. Mailing Address 819 STORMY CREEK RD			Transaction ID : SA11A.48339		
City SANDY	State UT	Zip Code 84094-5300	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			Memo Item CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) CONVENTION		Election Cycle-to-Date 225.00			

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

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