

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

ADDRESS (number and street) 1900 K Street NW Suite 700 Washington DC 20006-1135 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00084491 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [ ] AMENDED (A)

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) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2) [X] May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 04 01 2018 through 04 30 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Cresanti, Robert, , Mr., CFE Type or Print Name of Treasurer

Signature of Treasurer Cresanti, Robert, , Mr., CFE [Electronically Filed] Date 05 18 2018

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		411028.40
(b) Cash on Hand at Beginning of Reporting Period.....	333409.59	
(c) Total Receipts (from Line 19) .....	27358.76	239244.36
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	360768.35	650272.76
7. Total Disbursements (from Line 31).....	68169.30	357673.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	292599.05	292599.05
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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 3X (Rev. 05/2016)

Write or Type Committee Name

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Report Covering the Period: From: M M / D D / Y Y Y Y Y 04 / 01 / 2018 To: M M / D D / Y Y Y Y Y 04 / 30 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	22000.74	219773.89
(ii) Unitemized .....	358.02	1970.47
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	22358.76	221744.36
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	12500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	22358.76	234244.36
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	27358.76	239244.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	27358.76	239244.36

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1919.30	9923.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1919.30	9923.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	65000.00	314000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	1250.00	33750.00
(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 28(a), (b), and (c)).....	1250.00	33750.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	68169.30	357673.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	68169.30	357673.71

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	22358.76	234244.36
34. Total Contribution Refunds (from Line 28(d)) .....	1250.00	33750.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21108.76	200494.36
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1919.30	9923.71
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1919.30	9923.71

: 97 `A -G79 @C B9CI G`H9LH`F9 @ H98 `HC `5 `F9DCFH`G7 <98I @ `CF `H9A -N5 HCB

Form/Schedule: F3XN  
Transaction ID :

A check was issued in error to Hurd for Congress for \$2,500 to the 2018 General Election. This created an excessive contribution from this committee to Hurd for Congress. A refund is being requested and will be reflected on the next FEC report. A refund is also being requested for the Coffman for Congress contribution and will be reflected on the next FEC report.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

**A. Dwyer-Owens, Dina, , Mrs., CFE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1015 Joy Dr

City Waco	State TX	Zip Code 76708-9770
--------------	-------------	------------------------

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

Name of Employer (for Individual) Dwyer Group	Occupation (for Individual) Co-Chair
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2018

**Transaction ID : AC099DA436FEA491FA25**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. Rotondo, Mike, , Mr., CFE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1117 Perimeter Ctr  
Ste W200

City Atlanta	State GA	Zip Code 30338-5465
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Tropical Smoothie Cafe	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2018

**Transaction ID : AA906BB1E75384A5D9DA**

Amount of Each Receipt this Period  
1250.00

Memo Item

**C. Monson, Catherine, , Ms., CFE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2542 Highlander Way

City Carrollton	State TX	Zip Code 75006-3312
--------------------	-------------	------------------------

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

Name of Employer (for Individual) FASTSIGNS International	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2018

**Transaction ID : A9C116EACE9C44F55954**

Amount of Each Receipt this Period  
1250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

**A. Olea, Angela, , Ms.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7330 E Earll Dr  
 Ste E  
 City Scottsdale State AZ Zip Code 85251-7221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Assisted Living Locators Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **365.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2018  
**Transaction ID : AB3BD691576F44418805**  
 Amount of Each Receipt this Period  
**365.00**  
 Memo Item

**B. Allsman, David, , Mr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21 S 21st St  
 City Philadelphia State PA Zip Code 19103-3148  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FisherZucker LLC Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **365.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 04 / 2018  
**Transaction ID : A08439C10FFA24A6A972**  
 Amount of Each Receipt this Period  
**365.00**  
 Memo Item

**C. Doyle, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 29938 Shadow Creek Dr  
 City Westlake State OH Zip Code 44145-7801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FASTSIGNS International, Inc Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **365.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 06 / 2018  
**Transaction ID : A2F1387757D68421DA8D**  
 Amount of Each Receipt this Period  
**365.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1095.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

**A. Kane, Dawn, , Ms.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 800 Washington Ave N  
 Ste 205  
 City Minneapolis State MN Zip Code 55401-1148  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hot Dish Advertising Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 04 / 09 / 2018  
**Transaction ID : A43E8EE38AAEB470ABC7**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item

**B. Mazero, Joyce, G., Ms.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2950 N Harwood St  
 Ste 2100  
 City Dallas State TX Zip Code 75201-1623  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Polsinelli Occupation (for Individual) Shareholder  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 04 / 10 / 2018  
**Transaction ID : A2DD3A9B1C60B4680ACB**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item

**C. Lee, Raymond, C., Mr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 655 Mariners Island Blvd  
 Ste 303  
 City San Mateo State CA Zip Code 94404-1061  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vanguard Cleaning Systems, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 11 / 2018  
**Transaction ID : ADF8ADD41C0944706917**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

**A. Johnson, R. Earl, , Mr., CFE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4551 Cox Rd  
Ste 310

City Glen Allen State VA Zip Code 23060-6740

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

Name of Employer (for Individual) LeafSpring School Occupation (for Individual) Founder

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
04 / 11 / 2018  
**Transaction ID : A4C6FCF93546A497FB72**

Amount of Each Receipt this Period  
1250.00

Memo Item

**B. Cresanti, Robert, , Mr., CFE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1900 K St NW  
Ste 700

City Washington State DC Zip Code 20006-1135

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

Name of Employer (for Individual) International Franchise Association Occupation (for Individual) President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
04 / 11 / 2018  
**Transaction ID : A41F1E6E2AB384BEB8A5**

Amount of Each Receipt this Period  
1250.00

Memo Item

**C. Mormino, Daniel, , Mr., CFE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6263 N Scottsdale Rd  
Ste 143

City Scottsdale State AZ Zip Code 85250-5411

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

Name of Employer (for Individual) INFINITI HR Occupation (for Individual) Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
04 / 11 / 2018  
**Transaction ID : A1D6900C8ECC147EBBED**

Amount of Each Receipt this Period  
1250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

**A. Johnson, Gail, W, Ms., CFE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4551 Cox Rd  
 Ste 310  
 City Glen Allen State VA Zip Code 23060-6740  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LeafSpring School Occupation (for Individual) Founder & Chairman  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 2500.00

Date of Receipt 04 / 11 / 2018  
**Transaction ID : A0C18753883F641168CF**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item

**B. Edwards, William, , Mr., CFE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 504 Cancha  
 Ste 300  
 City Newport Beach State CA Zip Code 92660-3508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Edwards Global Services Occupation (for Individual) Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 2500.00

Date of Receipt 04 / 11 / 2018  
**Transaction ID : AE78F565E3EC24E42ACF**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item

**C. Bevis, Jeff, , Mr., CFE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7870 E Kemper Rd  
 Ste 440  
 City Cincinnati State OH Zip Code 45249-1675  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FirstLight HomeCare Occupation (for Individual) Co-Founder & CEO  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 04 / 12 / 2018  
**Transaction ID : AE75125989F1543A4846**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Farage, Erica, , ,</b>			Date of Receipt MM / DD / YYYY 04 / 26 / 2018
Mailing Address 1900 K St NW Ste 700			Transaction ID : <b>AF9AE5E34109E4438806</b>
City Washington	State DC	Zip Code 20006-1135	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 208.34
Name of Employer (for Individual) International Franchise Association		Occupation (for Individual) Senior Director, Political Affairs, Gr	<input type="checkbox"/> Memo Item Payroll Deduction: \$104.17/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Heitman, Mary, , Ms.,</b>			Date of Receipt MM / DD / YYYY 04 / 26 / 2018
Mailing Address 1900 K St NW Ste 700			Transaction ID : <b>ADC8E1853E83A428A920</b>
City Washington	State DC	Zip Code 20006-1135	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 83.34
Name of Employer (for Individual) International Franchise Association		Occupation (for Individual) EVP, Franchise Education and Research	<input type="checkbox"/> Memo Item Payroll Deduction: \$41.67/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Beall, Suzanne, , Ms.,</b>			Date of Receipt MM / DD / YYYY 04 / 26 / 2018
Mailing Address 1900 K St NW Ste 700			Transaction ID : <b>A59E9EE3C685D49608AB</b>
City Washington	State DC	Zip Code 20006-1135	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 416.66
Name of Employer (for Individual) International Franchise Association		Occupation (for Individual) Vice President, Government Relations &	<input type="checkbox"/> Memo Item Payroll Deduction: \$208.33/Bi-Weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1666.64		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	708.34
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

**A. Dailey, Beth, , Ms.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1900 K St NW  
Ste 700

City Washington State DC Zip Code 20006-1135

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

Name of Employer (for Individual) International Franchise Association Occupation (for Individual) VP, Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
760.90

Date of Receipt  
04 / 26 / 2018  
**Transaction ID : AD745044200EA421D957**

Amount of Each Receipt this Period  
217.40

Memo Item  
Payroll Deduction: \$108.70/Bi-Weekly

**B. Mann, Henry, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1610 Republic Rd

City Huntingdon Valley State PA Zip Code 19006-1808

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

Name of Employer (for Individual) ELEDLights Occupation (for Individual) President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
04 / 17 / 2018  
**Transaction ID : A883B82A2BA0A4E189C4**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. Moran-Goodrich, Barbara, , Ms., CFE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4444 147th St

City Midlothian State IL Zip Code 60445-2644

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

Name of Employer (for Individual) Moran Family of Brands Occupation (for Individual) CEO & Co-Founder

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
04 / 18 / 2018  
**Transaction ID : AEBE40D7C18A04EAA8D6**

Amount of Each Receipt this Period  
1250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1967.40

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

**A. Blue, Debra, , Ms.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3404 Petticoat Ln  
 City Fuquay Varina State NC Zip Code 27526-3402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Moon Estate Sales Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2018  
**Transaction ID : A84527E67606642DAA07**  
 Amount of Each Receipt this Period  
 365.00  
 Memo Item

**B. McKee, Lynette, , Ms., CFE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 343 Ashford Ct  
 City Heathrow State FL Zip Code 32746-4337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) McKeeCo Services, LLC Occupation (for Individual) CEO and Managing Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2018  
**Transaction ID : A998FD6F092C84BBA936**  
 Amount of Each Receipt this Period  
 365.00  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	730.00
<b>TOTAL</b> This Period (last page this line number only).....▶	22000.74

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 29
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Stivers For Congress</b>		Date of Receipt
Mailing Address 217 Third Street, SE		<input type="text"/> M M M / <input type="text"/> D D D / <input type="text"/> Y Y Y Y Y Y
City	State	Transaction ID : <b>A7EF7E0BB7A524447A9E</b>
Washington	DC	Amount of Each Receipt this Period
	Zip Code	<input type="text"/> 5000.00
	20003-1904	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/> C00441352	Refund of Contribution
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: 2018	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text"/> 5000.00	
<input type="checkbox"/> Other (specify) ▼		

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text"/> 5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/> 5000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 7810 Old Branch Ave

City  
Clinton

State  
MD

Zip Code  
20735-1607

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : BFC96E681F**

Amount of Each Disbursement this Period

[ ] 16.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CampaignContribution.com**

Mailing Address 201 Pennsylvania Ave SE

City  
Washington

State  
DC

Zip Code  
20003-1107

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : B6DBB704B0**

Amount of Each Disbursement this Period

[ ] 1903.30

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

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

[ ] 1919.30

[ ] 1919.30



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. COFFMAN FOR CONGRESS 2018**

Mailing Address 4000 Massachusetts Ave NW, #1434  
c/o Anne Brady

City Washington State DC Zip Code 20016-5116

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Coffman, Mike, Rep, Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: CO District: 06

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 06 / 2018

FEC Identification Number

**C** C00629287  
**Transaction ID : B025526D76f**  
Amount of Each Disbursement this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Comstock For Congress**

Mailing Address 499 South Capitol Street, SW Ste 4  
c/o Gula Graham

City Washington State DC Zip Code 20003-4027

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Comstock, Barbara, J., Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: VA District: 10

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2018

FEC Identification Number

**C** C00554261  
**Transaction ID : B6FB1225B8I**  
Amount of Each Disbursement this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Andy Barr For Congress, Inc.**

Mailing Address 3410 Alabama Ave

City Alexandria State VA Zip Code 22305-1736

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Barr, Andy, , Rep., IV**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: KY District: 06

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2018

FEC Identification Number

**C** C00467571  
**Transaction ID : B257F7D804**  
Amount of Each Disbursement this Period  
1000.00

Memo Item

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

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

7000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Cramer For Senate**

Mailing Address 499 South Capitol Street, SW Ste 4

City  
Washington

State  
DC

Zip Code  
20003-4027

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Cramer, Kevin, J., Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: ND District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	8

FEC Identification Number

**C** C00504704

**Transaction ID : B2DE0D0B6E**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Price For Congress**

Mailing Address PO Box 1986

City  
Raleigh

State  
NC

Zip Code  
27602

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Price, David, E., Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: NC District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	8

FEC Identification Number

**C** C00195628

**Transaction ID : B04085B0DC!**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends Of Dave Brat Inc.**

Mailing Address PO Box 5094

City  
Glen Allen

State  
VA

Zip Code  
23058

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Brat, Dave, A., Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: VA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	8

FEC Identification Number

**C** C00554949

**Transaction ID : BC0C51A5F:**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Steve Chabot for Congress**

Mailing Address 617 E Custis Avenue

City Alexandria State VA Zip Code 22301-1296

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Chabot, Steve, J., Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: OH District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2018

FEC Identification Number

**C** C00301838

**Transaction ID : BF26C43206f**

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Walden For Congress, Inc.**

Mailing Address 213 Ashby Street

City Alexandria State VA Zip Code 22305-2902

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Walden, Greg, P., Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: OR District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2018

FEC Identification Number

**C** C00333427

**Transaction ID : B2730F496EF**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Donovan For Congress**

Mailing Address 104 Hume Ave

City Alexandria State VA Zip Code 22301-1015

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Donovan, Daniel, M., Rep., Jr.**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NY District: 11

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2018

FEC Identification Number

**C** C00571869

**Transaction ID : BA726961A6**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

9000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. NORMA TORRES FOR CONGRESS**

Mailing Address 219 Pennsylvania Ave SE, 3rd Floor

City  
Washington

State  
DC

Zip Code  
20003-1107

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Torres, Norma, , Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: CA District: 35

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	8

FEC Identification Number

**C** C00557652

**Transaction ID : B81CB39BDE**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Rick Scott for Florida**

Mailing Address PO Box 3791

City  
Tallahassee

State  
FL

Zip Code  
32315-3791

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Scott, Rick, , Gov.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: FL District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	8

FEC Identification Number

**C** C00676965

**Transaction ID : B79CA8361F!**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Rick W. Allen For Congress**

Mailing Address P.O. Box 338

City  
Augusta

State  
GA

Zip Code  
30903

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Allen, Rick, W., Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: GA District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	8

FEC Identification Number

**C** C00504019

**Transaction ID : BC6A3D857C**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

5000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. BEATTY FOR CONGRESS**

Mailing Address 499 South Capitol Street SW, Suite

City  
Washington

State  
DC

Zip Code  
20003-4028

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Beatty, Joyce, , Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: OH District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	1	8

FEC Identification Number

**C** C00507368

**Transaction ID : B6D4CC96A/**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ALMA ADAMS FOR CONGRESS**

Mailing Address 1289 Fordham Blvd, Suite 197  
c/o Sue Jackson

City  
Chapel Hill

State  
NC

Zip Code  
27514-6110

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Adams, Alma, Shealey, Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: NC District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	1	8

FEC Identification Number

**C** C00546358

**Transaction ID : BF72CE978B/**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Poliquin For Congress**

Mailing Address 499 South Capitol Street, SW Ste 4

City  
Washington

State  
DC

Zip Code  
20003-4027

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Poliquin, Bruce, L., Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: ME District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	8

FEC Identification Number

**C** C00518654

**Transaction ID : B39A9D8801**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Jaime Herrera For Congress**

Mailing Address PO Box 1614

City Ridgefield State WA Zip Code 98642

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Herrera Beutler, Jaime, L., Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: WA District: 03

Date of Disbursement

MM / DD / YYYY  
04 / 16 / 2018

FEC Identification Number

C C00472704  
**Transaction ID : B1B0CF7764**  
Amount of Each Disbursement this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Walorski For Congress Inc**

Mailing Address 499 South Capitol St., SW Suite 420

City Washington State DC Zip Code 20003-4027

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Walorski, Jackie, Swihart, Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: IN District: 02

Date of Disbursement

MM / DD / YYYY  
04 / 24 / 2018

FEC Identification Number

C C00468579  
**Transaction ID : B537BE84E8**  
Amount of Each Disbursement this Period  
1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. TED BUDD FOR CONGRESS**

Mailing Address PO BOX 97127

City RALEIGH State NC Zip Code 27624

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Budd, Ted, P., Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: NC District: 13

Date of Disbursement

MM / DD / YYYY  
04 / 24 / 2018

FEC Identification Number

C C00614776  
**Transaction ID : B18CC40FB**  
Amount of Each Disbursement this Period  
1000.00

Memo Item

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

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

3500.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Trey For Congress**

Mailing Address 499 South Capitol Street SW, Suite

City  
Washington

State  
DC

Zip Code  
20003-4027

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Hollingsworth, Trey, , Rep., III**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: IN District: 09

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 24 / 2018

FEC Identification Number

**C** C00590463

**Transaction ID : B78E6344FEI**

Amount of Each Disbursement this Period

1500.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Martha Roby For Congress**

Mailing Address 1006 Pendleton St  
c/o Townsend Group

City  
Alexandria

State  
VA

Zip Code  
22314-1837

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Roby, Martha, , Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: AL District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 24 / 2018

FEC Identification Number

**C** C00462143

**Transaction ID : BB86DDA693**

Amount of Each Disbursement this Period

1500.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**C. MEADOWS FOR CONGRESS**

Mailing Address PO Box 368

City  
Falls Church

State  
VA

Zip Code  
22040-0368

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Meadows, Mark, R., Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: NC District: 11

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 24 / 2018

FEC Identification Number

**C** C00503094

**Transaction ID : B1CCDD834;**

Amount of Each Disbursement this Period

4000.00
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Memo Item

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

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

7000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Friends Of Dave Brat Inc.**

Mailing Address PO Box 5094

City  
Glen Allen

State  
VA

Zip Code  
23058

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Brat, Dave, A., Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: VA District: 07

Date of Disbursement

MM / DD / YYYY  
04 / 16 / 2018

FEC Identification Number

**C** C00554949

**Transaction ID : BF1AE6B40D**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Buddy Carter For Congress**

Mailing Address 824 South Milledge Avenue, Suite 1

City  
Athens

State  
GA

Zip Code  
30605-1332

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Carter, Buddy, , Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: GA District: 01

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2018

FEC Identification Number

**C** C00543967

**Transaction ID : B2CF2232E4I**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. TOM GARRETT FOR CONGRESS**

Mailing Address 403 First St SE

City  
Washington

State  
DC

Zip Code  
20003-1827

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Garrett, Thomas, A., Rep., Jr.**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: VA District: 05

Date of Disbursement

MM / DD / YYYY  
04 / 16 / 2018

FEC Identification Number

**C** C00607101

**Transaction ID : BA7A19FBE;**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3500.00

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



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

**A. HIMES FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 857 POST ROAD, #312

City FAIRFIELD State CT Zip Code 06824

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Himes, Jim, , Rep.,**

Office Sought:  House  Senate  President  
State: CT District: 04

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
04 / 16 / 2018

FEC Identification Number  
**C** C00434191  
**Transaction ID : BD8016DB0D**

Amount of Each Disbursement this Period  
1000.00

Memo Item

**B. Don Bacon For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address 217 Third Street SE

City Washington State DC Zip Code 20003-1904

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Bacon, Don, , ,**

Office Sought:  House  Senate  President  
State: NE District: 02

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
04 / 24 / 2018

FEC Identification Number  
**C** C00575167  
**Transaction ID : BFFF8A024E1**

Amount of Each Disbursement this Period  
5000.00

Memo Item

**C. TIM RYAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 75214

City Washington State DC Zip Code 20013-0214

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Ryan, Timothy, J, Rep.,**

Office Sought:  House  Senate  President  
State: OH District: 13

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
04 / 24 / 2018

FEC Identification Number  
**C** C00373464  
**Transaction ID : B71B34034D**

Amount of Each Disbursement this Period  
1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Form A: Walters For Congress. Includes fields for Name, Address, City (Washington), State (DC), Zip Code (20003-0239), Purpose of Disbursement, Candidate Name (Walters, Mimi, Rep.), Office Sought (House), Disbursement For (2018), Primary/General, State (CA), District (45), Date of Disbursement (04/20/2018), FEC Identification Number (C00546853), Transaction ID (BF07DC2C30), Amount (1500.00).

Form B: Hurd For Congress. Includes fields for Name, Address, City (Washington), State (DC), Zip Code (20003-2705), Purpose of Disbursement, Candidate Name (Hurd, Will, Rep.), Office Sought (House), Disbursement For (2018), Primary/General, State (TX), District (23), Date of Disbursement (04/16/2018), FEC Identification Number (C00545467), Transaction ID (BAD539D8F5), Amount (2500.00).

Form C: Handel for Congress, Inc. Includes fields for Name, Address, City (Washington), State (DC), Zip Code (20003-4066), Purpose of Disbursement, Candidate Name (Handel, Karen, C., Rep.), Office Sought (House), Disbursement For (2018), Primary/General, State (GA), District (06), Date of Disbursement (04/24/2018), FEC Identification Number (C00633362), Transaction ID (B8F4E50234), Amount (2000.00).

SUBTOTAL of Disbursements This Page (optional) 6000.00
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. George Holding For Congress</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2018
Mailing Address c/o Red River Co PO Box 15239		FEC Identification Number C C00499236 <b>Transaction ID : B14797E25Ff</b>
City Washington	State DC	Zip Code 20003-0239
Purpose of Disbursement Contribution to Committee		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>Holding, George, E.B., Rep.,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 02	

Full Name (Last, First, Middle Initial) <b>B. MAKE IT WORK</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2018
Mailing Address 200 East Jefferson Street		FEC Identification Number C C00552539 <b>Transaction ID : B4BB65C546f</b>
City Falls Church	State VA	Zip Code 22046-3531
Purpose of Disbursement Contribution to Committee		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>MAKE IT WORK</b>		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. BUILDING AMERICA'S REPUBLICAN REPRESENTATION PAC</b>		Date of Disbursement MM / DD / YYYY 04 / 16 / 2018
Mailing Address 3410 Alabama Avenue		FEC Identification Number C C00572271 <b>Transaction ID : B7E1E88B8C</b>
City Alexandria	State VA	Zip Code 22305-1736
Purpose of Disbursement Contribution to Committee		Amount of Each Disbursement this Period 3000.00
Candidate Name <b>BUILDING AMERICA'S REPUBLICAN REPRESENTATION PAC</b>		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

**A. TEAM MARSHALL**

Full Name (Last, First, Middle Initial)

Mailing Address 3410 Alabama Ave

City Alexandria State VA Zip Code 22305-1736

Purpose of Disbursement Contribution to Committee

Candidate Name **TEAM MARSHALL**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 16 / 2018

FEC Identification Number: C00632950

Transaction ID : B3BBA4EA6f

Amount of Each Disbursement this Period: 2500.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	65000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

**A. Farid, Tariq, , Mr., CFE**

Full Name (Last, First, Middle Initial)

Mailing Address 95 Barnes Rd

City Wallingford State CT Zip Code 06492-1800

Purpose of Disbursement Refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 24 / 2018

FEC Identification Number: C

Transaction ID : B824CCE297

Amount of Each Disbursement this Period: 1250.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1250.00