

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
National Franchisee Association PAC (NFA-PAC)

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	Y	Y	Y	Y	2	0	1	1		52964.91
Y	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	57968.50									
(c) Total Receipts (from Line 19)	7004.04	12258.15								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	64972.54	65223.06								
7. Total Disbursements (from Line 31)	11291.31	11541.83								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	53681.23	53681.23								
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									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
National Franchisee Association PAC (NFA-PAC)

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	1

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)	7000.00	12250.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	7000.00	12250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	7000.00	12250.00
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	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	4.04	8.15
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 Transfer (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))	7004.04	12258.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7004.04	12258.15

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	291.31	541.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	291.31	541.83
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	11000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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	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 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	11291.31	11541.83
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11291.31	11541.83

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	7000.00	12250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7000.00	12250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	291.31	541.83
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	291.31	541.83

**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 6 / 13
	<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	

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)
National Franchisee Association PAC (NFA-PAC)

A.	Full Name (Last, First, Middle Initial) Michael DeRosa		Date of Receipt
	Mailing Address 211 McKinley Ave		<input type="text" value="02"/> / <input type="text" value="07"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Eau Claire	WI	54701-4813
	FEC ID number of contributing federal political committee. C		Transaction ID: 10315.C1433
Name of Employer Coaches Fast Food Inc.		Occupation Franchisee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
		<input type="text" value="1000.00"/>	Receipt

B.	Full Name (Last, First, Middle Initial) Ben Jarratt		Date of Receipt
	Mailing Address P.O. Box 650728		<input type="text" value="02"/> / <input type="text" value="07"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Sterling	VA	20165-0728
	FEC ID number of contributing federal political committee. C		Transaction ID: 10315.C1432
Name of Employer Northern Virginia Group, Inc.		Occupation Franchisee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
		<input type="text" value="1000.00"/>	Receipt

C.	Full Name (Last, First, Middle Initial) Edith Middleton		Date of Receipt
	Mailing Address 1902 Tara Place		<input type="text" value="02"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Dalton	GA	30720
	FEC ID number of contributing federal political committee. C		Transaction ID: 10315.C1436
Name of Employer Middleton & Middleton		Occupation Franchisee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="500.00"/>
		<input type="text" value="500.00"/>	Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 7 / 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Ed Northrop

Mailing Address 2203 Trowbridge Road

City Albany State GA Zip Code 31707

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

Name of Employer EDN, Inc. Occupation Franchisee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 02 / 07 / 2011
Transaction ID: 10315.C1431
 Amount of Each Receipt this Period: 2500.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Eric Oppenheim

Mailing Address 1017 Curtis Pl.

City Gastonia State NC Zip Code 28052

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

Name of Employer Republic Foods Occupation Franchisee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 02 / 16 / 2011
Transaction ID: 10315.C1435
 Amount of Each Receipt this Period: 500.00
 Receipt

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

Mailing Address 963 Bethel Rd

City Douglas State GA Zip Code 31535-4821

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

Name of Employer Nearly Famous, Inc. Occupation Franchise Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 02 / 07 / 2011
Transaction ID: 10315.C1430
 Amount of Each Receipt this Period: 1000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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:		PAGE 8 / 13	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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)
National Franchisee Association PAC (NFA-PAC)

A.	Full Name (Last, First, Middle Initial) Michael White		Date of Receipt																					
	Mailing Address PO Box 987		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	1		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	2		1	1		2	0	1	1														
	City	State	Zip Code		Transaction ID: 10315.C1434																			
	Statesville	NC	28687-0987																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer MIKAW Corp		Occupation Franchisee		<input type="text" value="500.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		Receipt																				
		<input type="text" value="500.00"/>																						

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="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)

PAGE 9 / 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) SunTrust Bank <hr/> Mailing Address 1184 Ernest W Barrett Pkwy NW <hr/> City Kennesaw State GA Zip Code 30144-4534 <hr/> Purpose of Disbursement Bank Service Charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10315.E926 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 1 1
	Amount of Each Disbursement this Period 257.26 <hr/> BANK SERVICE CHARGE
B. Full Name (Last, First, Middle Initial) SunTrust Bank <hr/> Mailing Address 1184 Ernest W Barrett Pkwy NW <hr/> City Kennesaw State GA Zip Code 30144-4534 <hr/> Purpose of Disbursement Analysis Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10315.E928 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 1 1
	Amount of Each Disbursement this Period 5.00 <hr/> ANALYSIS FEE

SUBTOTAL of Disbursements This Page (optional) ►

262.26

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

262.26

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)

PAGE 10 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Marsha Blackburn for Congress <hr/> Mailing Address P.O. Box 3750 <hr/> City Brentwood State TN Zip Code 37024- <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name MARSHA MRS. BLACKBURN <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 07 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10218.E920 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00
	Category/ Type DIRECT CONTRIBUTION
	Category/ Type DIRECT CONTRIBUTION
B. Full Name (Last, First, Middle Initial) Boren for Congress <hr/> Mailing Address P.O. Box 1924 <hr/> City Muskogee State OK Zip Code 74402-1924 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name DAVID DANIEL BOREN <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 02 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10218.E914 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type DIRECT CONTRIBUTION
	Category/ Type DIRECT CONTRIBUTION
C. Full Name (Last, First, Middle Initial) John Campbell for Congress <hr/> Mailing Address 4590 MacArthur Blvd Suite 500 <hr/> City Newport Beach State CA Zip Code 92660- <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name JOHN BT CAMPBELL, III <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 48 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10218.E919 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00
	Category/ Type DIRECT CONTRIBUTION
	Category/ Type DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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"/> 24	<input type="checkbox"/> 25	<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)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Cantor for Congress <hr/> Mailing Address PO Box 17813 <hr/> City Richmond State VA Zip Code 23226-7813 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name ERIC CANTOR <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 07 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10218.E915 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 2500.00
	Category/ Type DIRECT CONTRIBUTION
	Category/ Type
B. Full Name (Last, First, Middle Initial) Duffy for Congress <hr/> Mailing Address PO Box 538 <hr/> City Wausau State WI Zip Code 54402- <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name SEAN P DUFFY <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 07 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10218.E924 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type DIRECT CONTRIBUTION
	Category/ Type
C. Full Name (Last, First, Middle Initial) Chuck Fleischmann for Congress Committee <hr/> Mailing Address PO Box 11091 Suite 1000 <hr/> City Chattanooga State TN Zip Code 37401- <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name CHARLES J FLEISCHMANN <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 03 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10218.E917 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00
	Category/ Type DIRECT CONTRIBUTION
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
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"/> 24	<input type="checkbox"/> 25	<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)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Gingrey for Congress <hr/> Mailing Address P.O. Box U <hr/> City Marietta State GA Zip Code 30060- <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name J. PHILLIP GINGREY <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 11 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10218.E918 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type DIRECT CONTRIBUTION
	Category/ Type
B. Full Name (Last, First, Middle Initial) Duncan D. Hunter for Congress <hr/> Mailing Address 9340 Fuerte Drive Suite 302 <hr/> City La Mesa State CA Zip Code 91941- <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name DUNCAN D. HUNTER <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 52 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10218.E916 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00
	Category/ Type DIRECT CONTRIBUTION
	Category/ Type
C. Full Name (Last, First, Middle Initial) Mike McIntyre for Congress <hr/> Mailing Address PO Box 1 <hr/> City Lumberton State NC Zip Code 28359- <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name MIKE MCINTYRE <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 07 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10218.E921 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type DIRECT CONTRIBUTION
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
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"/> 24	<input type="checkbox"/> 25	<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)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Mulvaney for Congress Mailing Address PO Box 1975 City Lancaster State SC Zip Code 29721- Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name JOHN MICHAEL MULVANEY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10218.E923 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type DIRECT CONTRIBUTION
	Category/ Type DIRECT CONTRIBUTION

B. Full Name (Last, First, Middle Initial) Mike Ross for Congress Committee Mailing Address PO Box 360 City Texarkana State AR Zip Code 71854- Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name MICHAEL AVERY ROSS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 04 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10218.E922 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type DIRECT CONTRIBUTION
	Category/ Type DIRECT CONTRIBUTION

C. Full Name (Last, First, Middle Initial) Tim Scott for Congress Mailing Address 1405 Ashley River Road City Charleston State SC Zip Code 29407- Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name TIMOTHY E SCOTT Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 01 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10218.E925 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00
	Category/ Type DIRECT CONTRIBUTION
	Category/ Type DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	11000.00