

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
National Franchisee Association PAC (NFA-PAC)

ADDRESS (number and street) 1201 Roberts Boulevard, Suite 100  
 Check if different than previously reported. (ACC)  
Kennesaw GA 30144

2. **FEC IDENTIFICATION NUMBER** C00329425  
3. IS THIS REPORT  NEW (N) OR  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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  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 (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 09 01 2008 through 09 30 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Bill Patterson

Signature of Treasurer Electronically Filed by Bill Patterson Date 10 16 2008

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

Office Use Only									
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**FEC FORM 3X**  
(Rev. 12/2004)

**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	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		125609.90
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	152198.15									
(c) Total Receipts (from Line 19) .....	768.53	159161.17								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	152966.68	284771.07								
7. Total Disbursements (from Line 31) .....	52318.95	184123.34								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	100647.73	100647.73								
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**

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

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	500.00	150485.00
(i) Itemized (use Schedule A) .....	0.00	2220.00
(ii) Unitemized .....	500.00	152705.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	5000.00
(c) Other Political Committees (such as PACs) .....	0.00	157705.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	500.00	157705.00
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.) .....	268.53	1456.17
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)) .....	768.53	159161.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	768.53	159161.17

**DETAILED SUMMARY PAGE**

of Disbursements

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.....	818.95	4623.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	818.95	4623.34
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	51500.00	179500.00
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))..	52318.95	184123.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	52318.95	184123.34

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	500.00	157705.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	500.00	157705.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	818.95	4623.34
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	818.95	4623.34

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 19
	(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"/> 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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Tom Cavanaugh		Date of Receipt
	Mailing Address 1108 N. 3rd Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 02 / 2008
	City	State	Zip Code
	Aberdeen	SD	57401
	FEC ID number of contributing federal political committee.		Transaction ID: 80919.C1049
Name of Employer Cav-Cor, 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"/> 250.00
		<input type="text"/> 270.00	Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) Ed & Beth Westfall		Date of Receipt
	Mailing Address 389 Auburn Trivette Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 10 / 2008
	City	State	Zip Code
	Sugar Grove	NC	28679
	FEC ID number of contributing federal political committee.		Transaction ID: 80919.C1101
Name of Employer Ridge Runner Fast Foods, Inc.		Occupation Burger King Franchise Owner	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"/> 250.00
		<input type="text"/> 500.00	Receipt

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

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

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

FOR LINE NUMBER: PAGE 7 / 19  
(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)  
Georgian Bank

Mailing Address 3300 Cumberland Blvd SE

City Atlanta State GA Zip Code 30339-8103

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 271.20

Date of Receipt 09 / 30 / 2008  
**Transaction ID:** 81016.C1106  
 Amount of Each Receipt this Period 268.43  
 Interest Received

**B.** Full Name (Last, First, Middle Initial)  
Wachovia Securities

Mailing Address Cap Department  
One Wachovia Center

City Charlotte State NC Zip Code 28288-1164

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.10

Date of Receipt 09 / 30 / 2008  
**Transaction ID:** 81016.C1105  
 Amount of Each Receipt this Period 0.10  
 Interest Received

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>268.53</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>268.53</b>

# 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"/> 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) NOVA  Mailing Address MSI Merchant Services 890 Mountain Avenue  City New Providence State NJ Zip Code 07974-  Purpose of Disbursement Monthly Merchant Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81016.E646 Date of Disbursement 09 / 02 / 2008  Amount of Each Disbursement this Period 626.81  MONTHLY MERCHANT FEE
B.	Full Name (Last, First, Middle Initial) Clarke American  Mailing Address 3300 Cumberland Blvd SE  City Atlanta State GA Zip Code 30339-8103  Purpose of Disbursement Itemize Check Order Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81016.E649 Date of Disbursement 09 / 04 / 2008  Amount of Each Disbursement this Period 150.14  CHECK ORDER
C.	Full Name (Last, First, Middle Initial) Georgian Bank  Mailing Address 3300 Cumberland Blvd SE  City Atlanta State GA Zip Code 30339-8103  Purpose of Disbursement Itemize Monthly Merchant Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81016.E647 Date of Disbursement 09 / 03 / 2008  Amount of Each Disbursement this Period 20.00  MONTHLY MERCHANT FEE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	796.95
<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)

PAGE 9 / 19

<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)  
Wachovia Securities

Transaction ID: 81016.E645

Date of Disbursement

Mailing Address Cap Department  
One Wachovia Center

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	0	8

City Charlotte State NC Zip Code 28288-1164

Amount of Each Disbursement this Period

22.00
-------

Purpose of Disbursement  
Itemize Bank Service Charge

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

BANK SERVICE CHARGE

State: District:

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

22.00

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

818.95

# 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 / 19

<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)  
Wicker Mississippi Victory Committee

Mailing Address PO Box 4478

City Jackson State MS Zip Code 39296-4478

Purpose of Disbursement  
JOINT FUNDRAISER

Candidate Name  
WICKER MISSISSIPPI VICTORY COMMITTEE

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: District: ANNUAL/OTHER

Transaction ID: 81016.E641  
Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

5000.00

JOINT FUNDRAISER

**B.** Full Name (Last, First, Middle Initial)  
Citizens for Andal

Mailing Address 1625 March Lane Suite 202

City Stockton State CA Zip Code 95207-6424

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name  
DEAN F ANDAL

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: CA District: 11

Transaction ID: 81008.E626  
Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

2500.00

DIRECT CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
Steve Austria for Congress

Mailing Address 2537 Obetz Drive

City Dayton State OH Zip Code 45434-6956

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name  
STEVE C AUSTRIA

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: OH District: 07

Transaction ID: 81008.E638  
Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

2000.00

DIRECT CONTRIBUTION

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

9500.00

**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)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Boren for Congress</p> <p>Mailing Address PO Box 1924</p> <p>City Muskogee State OK Zip Code 74402-1924</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name DAVID D BOREN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81016.E644</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>DIRECT CONTRIBUTION</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bill Cassidy for U.S. Congress</p> <p>Mailing Address 7668 Goodwood Blvd Suite A</p> <p>City Baton Rouge State LA Zip Code 70806-7622</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name WILLIAM CASSIDY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 06</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81008.E623</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>DIRECT CONTRIBUTION</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Chabot for Congress</p> <p>Mailing Address 3339 Harrison Avenue</p> <p>City Cincinnati State OH Zip Code 45211-</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name STEVE CHABOT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81008.E625</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>DIRECT CONTRIBUTION</p>

**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"/> 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)

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Coleman for Senate</p> <p>Mailing Address 680 Transfer Rd Ste A</p> <p>City Saint Paul State MN Zip Code 55114-1487</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name NORM COLEMAN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81008.E618</p> <p>Date of Disbursement 09 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>DIRECT CONTRIBUTION</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Texans for John Cornyn</p> <p>Mailing Address P.O. Box 13026</p> <p>City Alexandria State VA Zip Code 22312-9026</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name JOHN CORNYN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81008.E617</p> <p>Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>DIRECT CONTRIBUTION</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Lincoln Diaz-Balart for Congress</p> <p>Mailing Address 8770 SW 72nd #421</p> <p>City Miami State FL Zip Code 33173-3512</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name LINCOLN DIAZ-BALART</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 21</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81008.E627</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>DIRECT CONTRIBUTION</p>

**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)

<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)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mario Diaz-Balart for Congress</p> <p>Mailing Address 8770 SW 72nd St # 422</p> <p>City Miami State FL Zip Code 33173-3512</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name MARIO DIAZ-BALART</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 25</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81008.E628</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>DIRECT CONTRIBUTION</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) People for English</p> <p>Mailing Address PO Box 1940</p> <p>City Erie State PA Zip Code 16507-0940</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name PHILIP S. ENGLISH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: PA District: 03</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81008.E629</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>DIRECT CONTRIBUTION</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Gard for Congress</p> <p>Mailing Address P.O. Box 277</p> <p>City Green Bay State WI Zip Code 54305-</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name JOHN G GARD</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: WI District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81008.E632</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>DIRECT CONTRIBUTION</p>

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

6500.00

**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)

PAGE 14 / 19

<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) Rick Goddard for Congress  Mailing Address 1302 Watson Blvd  City Warner Robins State GA Zip Code 31093-3436  Purpose of Disbursement DIRECT CONTRIBUTION  Candidate Name RICHARD NEIL GODDARD  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 08  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81008.E637 Date of Disbursement 09 / 30 / 2008	Amount of Each Disbursement this Period 2000.00  DIRECT CONTRIBUTION
B.	Full Name (Last, First, Middle Initial) Andy Harris for Congress  Mailing Address P.O. Box 1527  City Annapolis State MD Zip Code 21404-1527  Purpose of Disbursement DIRECT CONTRIBUTION  Candidate Name ANDREW P HARRIS  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 01  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81008.E622 Date of Disbursement 09 / 30 / 2008	Amount of Each Disbursement this Period 2500.00  DIRECT CONTRIBUTION
C.	Full Name (Last, First, Middle Initial) Lynn Jenkins for Congress  Mailing Address P.O. Box 1441  City Topeka State KS Zip Code 66601-1441  Purpose of Disbursement DIRECT CONTRIBUTION  Candidate Name LYNN JENKINS  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 02  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81008.E633 Date of Disbursement 09 / 30 / 2008	Amount of Each Disbursement this Period 2000.00  DIRECT CONTRIBUTION

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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 15 / 19

<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Jay Love for Congress Committee  Mailing Address P.O. Box 3221  City Montgomery State AL Zip Code 36109-0221  Purpose of Disbursement DIRECT CONTRIBUTION  Candidate Name JAY K LOVE  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81008.E619 Date of Disbursement 09 / 26 / 2008  Amount of Each Disbursement this Period 1000.00  DIRECT CONTRIBUTION
<b>B.</b>	Full Name (Last, First, Middle Initial) Marilyn Musgrave for Congress  Mailing Address 257 Johnstown Center Dr Unit 211  City Loveland State CO Zip Code 80534-7848  Purpose of Disbursement DIRECT CONTRIBUTION  Candidate Name MARILYN MUSGRAVE  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81008.E634 Date of Disbursement 09 / 30 / 2008  Amount of Each Disbursement this Period 2000.00  DIRECT CONTRIBUTION
<b>C.</b>	Full Name (Last, First, Middle Initial) Olson for Congress Committee  Mailing Address PO Box 16381  City Sugar Land State TX Zip Code 77496-6381  Purpose of Disbursement DIRECT CONTRIBUTION  Candidate Name PETER G OLSON  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81008.E635 Date of Disbursement 09 / 30 / 2008  Amount of Each Disbursement this Period 2000.00  DIRECT CONTRIBUTION

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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 16 / 19

<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)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Erik Paulsen for Congress</p> <p>Mailing Address P.O. Box 44369</p> <p>City Eden Prairie State MN Zip Code 55344-1369</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name ERIK PAULSEN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MN District: 03</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81008.E630</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p><b>DIRECT CONTRIBUTION</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) People for Pearce</p> <p>Mailing Address 1005 21st St NW Ste B</p> <p>City Rio Rancho State NM Zip Code 87124-3970</p> <p>Purpose of Disbursement VOIDED CHECK</p> <p>Candidate Name STEVE PEARCE</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NM District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81008.E621</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period -2500.00</p> <p><b>VOIDED CHECK</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Porter for Congress</p> <p>Mailing Address PO Box 26087</p> <p>City Las Vegas State NV Zip Code 89126-0087</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name JON C PORTER, SR</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NV District: 03</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81008.E636</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p><b>DIRECT CONTRIBUTION</b></p>

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

1500.00

**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)

PAGE 17 / 19

<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)

<b>A.</b> Full Name (Last, First, Middle Initial) Bob Schaffer for U.S. Senate <hr/> Mailing Address PO Box 102135 <hr/> City Denver State CO Zip Code 80250-2135 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name ROBERT W SCHAFFER <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81008.E624 Date of Disbursement 09 / 30 / 2008 <hr/> Amount of Each Disbursement this Period 2500.00 <hr/> Category/ Type DIRECT CONTRIBUTION		
	<b>B.</b> Full Name (Last, First, Middle Initial) Pete Sessions for Congress <hr/> Mailing Address 3606 Greenville Ave <hr/> City Dallas State TX Zip Code 75206-5632 <hr/> Purpose of Disbursement VOIDED CHECK <hr/> Candidate Name PETE SESSIONS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 32 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81008.E615 Date of Disbursement 09 / 07 / 2008 <hr/> Amount of Each Disbursement this Period -2000.00 <hr/> Category/ Type VOIDED CHECK	
		<b>C.</b> Full Name (Last, First, Middle Initial) Pete Sessions for Congress <hr/> Mailing Address 3606 Greenville Ave <hr/> City Dallas State TX Zip Code 75206-5632 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name PETE SESSIONS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 32 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81008.E620 Date of Disbursement 09 / 26 / 2008 <hr/> Amount of Each Disbursement this Period 2000.00 <hr/> Category/ Type DIRECT CONTRIBUTION

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

2500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Friends of Gordon Smith  Mailing Address 4949 Meadows Rd Suite 625  City Lake Oswego State OR Zip Code 97035-4285  Purpose of Disbursement DIRECT CONTRIBUTION  Candidate Name GORDON HAROLD SMITH  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81008.E631 Date of Disbursement 09 / 30 / 2008	Amount of Each Disbursement this Period 2500.00  DIRECT CONTRIBUTION
<b>B.</b>	Full Name (Last, First, Middle Initial) Stivers for Congress  Mailing Address 211 S 5th St  City Columbus State OH Zip Code 43215-5203  Purpose of Disbursement DIRECT CONTRIBUTION  Candidate Name STEVE STIVERS  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81008.E639 Date of Disbursement 09 / 30 / 2008	Amount of Each Disbursement this Period 1500.00  DIRECT CONTRIBUTION
<b>C.</b>	Full Name (Last, First, Middle Initial) Stivers for Congress  Mailing Address 211 S 5th St  City Columbus State OH Zip Code 43215-5203  Purpose of Disbursement DIRECT CONTRIBUTION  Candidate Name STEVE STIVERS  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81008.E616 Date of Disbursement 09 / 16 / 2008	Amount of Each Disbursement this Period 1500.00  DIRECT CONTRIBUTION

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

5500.00

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

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

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FOR LINE NUMBER:  
(check only one)

PAGE 19 / 19

<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)  
Team Sununu

Transaction ID: 81008.E640

Date of Disbursement

Mailing Address PO Box 500

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	8

City Rye State NH Zip Code 03870-0500

Amount of Each Disbursement this Period

2500.00
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Purpose of Disbursement  
DIRECT CONTRIBUTION

Category/  
Type

Candidate Name  
JOHN E SUNUNU

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: NH District: 00

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ..... ►

2500.00
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TOTAL This Period (last page this line number only) ..... ►

51500.00
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