



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**BURGER KING Franchisee PAC**

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="2014"/>	<input type="text" value="17304.31"/>	<input type="text" value="17304.31"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="35806.99"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="4500.79"/>	<input type="text" value="32852.23"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="40307.78"/>	<input type="text" value="50156.54"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="-9257.56"/>	<input type="text" value="591.20"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="49565.34"/>	<input type="text" value="49565.34"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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. 06/2004)

Write or Type Committee Name

**BURGER KING Franchisee PAC**

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

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).....	4500.00	32750.00
(ii) Unitemized .....	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4500.00	32850.00
(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) .....	4500.00	32850.00
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.).....	0.79	2.23
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))..... ▶	4500.79	32852.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4500.79	32852.23

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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 .....	242.44	591.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	242.44	591.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-9500.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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) 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)) ..	-9257.56	591.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	-9257.56	591.20

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	4500.00	32850.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4500.00	32850.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	242.44	591.20
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	242.44	591.20

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

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

FOR LINE NUMBER: PAGE 6 OF 11  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**BURGER KING Franchisee PAC**

Full Name (Last, First, Middle Initial)  
**A. Camilla Warren**

Mailing Address 4450 Black Oak Ln

City State Zip Code  
Mason OH 45040-8437

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

Name of Employer Occupation  
Restaurant Assoc of Cincinnati Franchisee

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 11 / 2014  
**Transaction ID : 8412899**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. Claude Warren**

Mailing Address 4450 Black Oak Lane

City State Zip Code  
Mason OH 45040

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

Name of Employer Occupation  
Restaurant Associates of Cincinnati, I Franchisee

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 11 / 2014  
**Transaction ID : 8412901**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 963 Bethel Rd

City State Zip Code  
Douglas GA 31535-4821

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

Name of Employer Occupation  
Nearly Famous, Inc. Franchise Owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 23 / 2014  
**Transaction ID : 8412903**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00

**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 7 OF 11
	<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)  
**BURGER KING Franchisee PAC**

Full Name (Last, First, Middle Initial)  
**A. Kevin J. Haas**

Mailing Address 12453 Ostara Ct

City Fishers State IN Zip Code 46037-8755

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

Name of Employer K & JK Enterprises, Inc. Occupation Franchisee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 23 / 2014  
**Transaction ID : 8412905**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. Bill Patterson**

Mailing Address 1250 Tower Ln.

City Erie State PA Zip Code 16505

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

Name of Employer PEC Management Occupation Franchisee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2014  
**Transaction ID : 8412906**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. Keith Egyed**

Mailing Address 527 Semple Ave

City Emsworth State PA Zip Code 15202-2226

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

Name of Employer PEC Management Occupation Franchisee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2014  
**Transaction ID : 8412908**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<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: PAGE 8 OF 11  
(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
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NAME OF COMMITTEE (In Full)  
**BURGER KING Franchisee PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Glenn Seyfert**

Mailing Address 450 Marnie Lane

City Peshtigo	State WI	Zip Code 54157
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FEC ID number of contributing federal political committee. **C**

Name of Employer PIP Corp	Occupation Franchisee
------------------------------	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 28 / 2014**  
**Transaction ID : 8412909**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>4500.00</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)  
**BURGER KING Franchisee PAC**

Full Name (Last, First, Middle Initial)

**A. SunTrust Bank**

Mailing Address 1184 Ernest W Barrett Pkwy NW

City Kennesaw State GA Zip Code 30144-4534

Purpose of Disbursement  
Bank Service Charge

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 8412856**

Amount of Each Disbursement this Period

Bank Service Charge

Full Name (Last, First, Middle Initial)

**B. SunTrust Bank**

Mailing Address 1184 Ernest W Barrett Pkwy NW

City Kennesaw State GA Zip Code 30144-4534

Purpose of Disbursement  
Stop Payment Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 8412857**

Amount of Each Disbursement this Period

Stop Payment Fee

Full Name (Last, First, Middle Initial)

**C. SunTrust Bank**

Mailing Address 1184 Ernest W Barrett Pkwy NW

City Kennesaw State GA Zip Code 30144-4534

Purpose of Disbursement  
Analysis Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 8412858**

Amount of Each Disbursement this Period

Analysis Fee

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

**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)  
**BURGER KING Franchisee PAC**

Full Name (Last, First, Middle Initial)

**A. Mike Kelly for Congress**

Mailing Address PO Box 476

City Lyndora State PA Zip Code 16045

Purpose of Disbursement  
Stop Payment - Mike Kelly for Congress

Candidate Name  
**George Kelly**

Office Sought:  House  
 Senate  
 President  
State: PA District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 03 / 2014

**Transaction ID : 8340521**

Amount of Each Disbursement this Period

-1000.00

Stop Payment - Mike Kelly for Congress

Full Name (Last, First, Middle Initial)

**B. Friends Of Todd Young, Inc.**

Mailing Address PO Box 1053

City Bloomington State IN Zip Code 47402

Purpose of Disbursement  
Stop Payment - Friends Of Todd Young, Inc.

Candidate Name  
**Rep. Todd Young**

Office Sought:  House  
 Senate  
 President  
State: IN District: 09

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 03 / 2014

**Transaction ID : 8340522**

Amount of Each Disbursement this Period

-1000.00

Stop Payment - Friends Of Todd Young, Inc.

Full Name (Last, First, Middle Initial)

**C. Kurt Schrader For Congress**

Mailing Address PO Box 3314

City Oregon City State OR Zip Code 97045

Purpose of Disbursement  
Stop Payment - Kurt Schrader For Congress

Candidate Name  
**Rep. Kurt Schrader**

Office Sought:  House  
 Senate  
 President  
State: OR District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 03 / 2014

**Transaction ID : 8340523**

Amount of Each Disbursement this Period

-1000.00

Stop Payment - Kurt Schrader For Congress

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

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

-3000.00

-9500.00