

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 03 01 2006 through 03 31 2006

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 William Harloe

Signature of Treasurer Electronically Filed by William Harloe Date 04 10 2006

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

**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	3

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		82325.90
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	82990.29									
(c) Total Receipts (from Line 19)	22851.78	27665.83								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	105842.07	109991.73								
7. Total Disbursements (from Line 31)	4972.52	9122.18								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	100869.55	100869.55								
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

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

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	22750.00	27375.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	22750.00	27375.00
(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)	22750.00	27375.00
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.)	101.78	290.83
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))	22851.78	27665.83
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	22851.78	27665.83

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) 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.....	472.52	622.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	472.52	622.18
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4500.00	8500.00
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))..	4972.52	9122.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	4972.52	9122.18

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)	22750.00	27375.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22750.00	27375.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	472.52	622.18
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	472.52	622.18

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 18
	<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)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Joseph Anghelone

Mailing Address 118 Meirs Rd.

City State Zip Code
Cream Ridge NJ 08514

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

Name of Employer GeorgeTowe Group LP Occupation Franchisee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2006

Transaction ID: 60410.C494

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Richard Brening

Mailing Address 7900 Shelbourne Drive

City State Zip Code
Granite Bay CA 95746

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

Name of Employer Brening Enterprises Occupation Franchise Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 17 / 2006

Transaction ID: 60410.C496

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Al Cipelletti

Mailing Address 269 Barnstaple Drive

City State Zip Code
Daniels WV 25832

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

Name of Employer Aimar Food Corp. Occupation Franchisee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2006

Transaction ID: 60410.C493

Amount of Each Receipt this Period
250.00

Receipt

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 18
	<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)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Joe Clements, Jr.

Mailing Address 5422 South Pointer Court

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer
Clements Management, LLC

Occupation
Franchise Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
03 / 28 / 2006

Transaction ID: 60410.C504

Amount of Each Receipt this Period
1250.00

Receipt

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

Mailing Address 1733 S. Ingalls St.

City State Zip Code
Grand Island NE 68803

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

Name of Employer
Degen Properties, Inc.

Occupation
Franchise Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2006

Transaction ID: 60410.C488

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Gregory Dolphin

Mailing Address 3145 Dean Court
No. 1100

City State Zip Code
Minneapolis MN 55416

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

Name of Employer
Dolphin Fast Food, Inc.

Occupation
Franchise Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2006

Transaction ID: 60410.C489

Amount of Each Receipt this Period
1250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 18
	<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)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Daniel Fitzpatrick

Mailing Address P.O. Box 8124

City State Zip Code
South Bend IN 46660

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

Name of Employer
Quality Dining, Inc.

Occupation
Franchisee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2006

Transaction ID: 60410.C497

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
James Froio

Mailing Address 142 Shaw Farm Road

City State Zip Code
Canyon MA 02021

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

Name of Employer
Froio Management Group, Inc.

Occupation
Franchisee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2006

Transaction ID: 60410.C501

Amount of Each Receipt this Period
2500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Martin Hittinger

Mailing Address 80 Palisade Avenue

City State Zip Code
Cliffside Park NJ 07010

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

Name of Employer
Aimar Food Corp.

Occupation
Burger King Franchise Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2006

Transaction ID: 60410.C491

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	5250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 18
	<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)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Nick Kraft

Mailing Address 5514 Salvia Ct.

City State Zip Code
Golden CO 80403

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

Name of Employer Rob Craft, Inc. Occupation Franchisee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2006

Transaction ID: 60410.C490

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Dava & Laura Laslow

Mailing Address 17900 Boerger Rd.

City State Zip Code
Marysville OH 43040

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

Name of Employer Monarch Restaurant Group, Inc. Occupation Franchisee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2006

Transaction ID: 60410.C492

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Steven Lewis

Mailing Address 1780 Swede Road

City State Zip Code
Blue Bell PA 19422

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

Name of Employer US Restaurants Occupation Franchisee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2006

Transaction ID: 60410.C508

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<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)
Dale Ma

Mailing Address 10720 1/2 Riverside Drive

City N. Hollywood State CA Zip Code 91602

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

Name of Employer National Franchisee Association Occupation Franchise Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 06 / 2006

Transaction ID: 60410.C486

Amount of Each Receipt this Period
 250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Thomas McDonald

Mailing Address 3 Sable Ridge Ct.

City Las Vegas State NV Zip Code 89135

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

Name of Employer Glencoe Management, Inc. Occupation Franchisee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2006

Transaction ID: 60410.C495

Amount of Each Receipt this Period
 1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Stephen Miller

Mailing Address 3 E Water St.

City Chillicothe State OH Zip Code 45601

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

Name of Employer Miller Management Occupation Franchisee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2006

Transaction ID: 60410.C503

Amount of Each Receipt this Period
 1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Ramon Moral		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006	
Mailing Address 9401 W. Calusa Club Drive		Transaction ID: 60410.C507	
City State Zip Code Miami FL 33186		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Ramako Corp.	Occupation Franchise Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Ed Northrop		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2006	
Mailing Address 2203 Trowbridge Road		Transaction ID: 60410.C498	
City State Zip Code Albany GA 31707		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer EDN, Inc.	Occupation Franchisee		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Bill Patterson		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2006	
Mailing Address 1250 Tower Ln.		Transaction ID: 60410.C500	
City State Zip Code Erie PA 16505		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer BKing, LLC	Occupation Franchisee		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 18
	<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)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Stafford Rastall

Mailing Address P.o. Box 680600

City State Zip Code
Fort Payne AL 35968

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

Name of Employer Occupation
Kristie Co. Franchisee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2006

Transaction ID: 60410.C505

Amount of Each Receipt this Period
1250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Gary W. Robison

Mailing Address 6827 Raspberry Run

City State Zip Code
Littleton CO 80125

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

Name of Employer Occupation
Rob-Kraft, Inc. Franchisee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2006

Transaction ID: 60410.C502

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Len Rohde

Mailing Address 324 Alta Vista Ave.

City State Zip Code
Los Altos CA 94022

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

Name of Employer Occupation
Rohde & Associates Franchisee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 06 / 2006

Transaction ID: 60410.C485

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	3250.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 18
	<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)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Alex Salgueiro

Mailing Address 6 Larkspur Lane

City Savannah State GA Zip Code 91411

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

Name of Employer Savannah Restaurants Corp Occupation Franchisee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 27 / 2006

Transaction ID: 60410.C499

Amount of Each Receipt this Period
 1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jim Walther

Mailing Address 34 Broadview Ave.

City Warrenton State VA Zip Code 20186

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

Name of Employer Walco Foods, Inc. Occupation Franchise Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2006

Transaction ID: 60410.C509

Amount of Each Receipt this Period
 500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Ed & Beth Westfall

Mailing Address 389 Auburn Trivette Road

City Sugar Grove State NC Zip Code 28679

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

Name of Employer Ridge Runner Fast Foods, Inc. Occupation Burger King Franchise Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2006

Transaction ID: 60410.C506

Amount of Each Receipt this Period
 500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 18
	(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)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Delano E. (Gene) Wharton

Mailing Address 170 Rosemar Meadows Dr.

City State Zip Code
Vienna WV 26105

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

Name of Employer Delton Restaurants, Inc. Occupation Franchise Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2006

Transaction ID: 60410.C487

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Mike Whitehurst

Mailing Address 953 Wynn Circle

City State Zip Code
Livermore CA 94550

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

Name of Employer Whitehurst Management Company Occupation Burger King Franchise Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 01 / 2006

Transaction ID: 60410.C484

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	750.00
TOTAL This Period (last page this line number only)	▶	22750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 15 / 18	
	(check only one)			
<input 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 checked="" 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)
Wachovia Securities (1st Union Natl B

Mailing Address NC8502
P.O. Box 563966

City State Zip Code
Charlotte NC 28262-3966

FEC ID number of contributing federal political committee.

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
0	3	/	3	1	/	2	0	0	6

Transaction ID: 60410.C510

Amount of Each Receipt this Period

Interest Received

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="101.78"/>
TOTAL This Period (last page this line number only)	<input type="text" value="101.78"/>

**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 / 18

<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)

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: 60410.E309 Date of Disbursement MM / DD / YYYY 03 / 01 / 2006
Mailing Address P.O. Box 2878		Amount of Each Disbursement this Period 4.50
City Omaha State NE Zip Code 68103-2878	Purpose of Disbursement MONTHLY CREDIT CARD 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) ▼	MONTHLY CREDIT CARD FEE

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: 60410.E311 Date of Disbursement MM / DD / YYYY 03 / 06 / 2006
Mailing Address P.O. Box 2878		Amount of Each Disbursement this Period 110.64
City Omaha State NE Zip Code 68103-2878	Purpose of Disbursement CREDIT CARD 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) ▼	CREDIT CARD FEE

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: 60410.E317 Date of Disbursement MM / DD / YYYY 03 / 31 / 2006
Mailing Address P.O. Box 2878		Amount of Each Disbursement this Period 14.75
City Omaha State NE Zip Code 68103-2878	Purpose of Disbursement CREDIT CARD 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) ▼	CREDIT CARD FEE

SUBTOTAL of Disbursements This Page (optional) ▶	129.89
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 18 / 18

<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)

Full Name (Last, First, Middle Initial) A. 13th Colony Leadership PAC		Transaction ID: 60410.E315 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 6
Mailing Address P.O. Box 114		Amount of Each Disbursement this Period 1500.00
City Savannah State GA Zip Code 31402-	Category/ Type DIRECT CONTRIBUTION	
Purpose of Disbursement DIRECT CONTRIBUTION		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: ANNUAL/OTHER		

Full Name (Last, First, Middle Initial) B. Friends of Mark Foley		Transaction ID: 60410.E314 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 6
Mailing Address 1316 Lake Victoria Drive		Amount of Each Disbursement this Period 1000.00
City Lake Worth State FL Zip Code 33461-	Category/ Type DIRECT CONTRIBUTION	
Purpose of Disbursement DIRECT CONTRIBUTION		
Candidate Name MARK FOLEY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 16		

Full Name (Last, First, Middle Initial) C. Deborah Pryce		Transaction ID: 60410.E316 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 145 E. Rich Street		Amount of Each Disbursement this Period 2000.00
City Columbus State OH Zip Code 43215-	Category/ Type DIRECT CONTRIBUTION	
Purpose of Disbursement DIRECT CONTRIBUTION		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶	4500.00