

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

ADDRESS (number and street)

P.O. Box 26366

Check if different
than previously
reported. (ACC)

Alexandria

VA

22313

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00412098

3. IS THIS
REPORTNEW
(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
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ 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)☐ Convention (12C)☒ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M /

D D /

Y Y Y Y Y Y

11

08

2016

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y Y Y

10

01

2016

through

M M /

D D /

Y Y Y Y Y Y

10

19

2016

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

Aley, Ray, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Aley, Ray, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

10

24

2016

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		57572.74
(b) Cash on Hand at Beginning of Reporting Period.....	41578.20	
(c) Total Receipts (from Line 19)	6400.00	88600.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	47978.20	146172.74
7. Total Disbursements (from Line 31).....	1000.00	99194.54
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	46978.20	46978.20
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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	1	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		
(i) Itemized (use Schedule A).....	5600.00	82700.00
(ii) Unitemized	800.00	5900.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6400.00	88600.00
(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)	6400.00	88600.00
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.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	6400.00	88600.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6400.00	88600.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

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	0.00	1694.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	1694.54
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	97500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1000.00	99194.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1000.00	99194.54

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	6400.00	88600.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6400.00	88600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	1694.54
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	1694.54

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 10

(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)

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

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

A. Atwell, Greg, , ,

Mailing Address P.O. Box 1559

City
Las Cruces

State
NM

Zip Code
88004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Southeast New Mexico Foods, Inc.

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 04 / 2016

Transaction ID : 3120

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. Duenow, Margaret, A., ,

Mailing Address 27126 Thomas Ave

City
Elko

State
MN

Zip Code
55020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DMC

Occupation (for Individual)
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 12 / 2016

Transaction ID : 3128

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

C. Galloway, Michael R., , ,

Mailing Address 1010 Mill Street

City
Camden

State
SC

Zip Code
29020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Galloway Enterprises Inc

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 04 / 2016

Transaction ID : 3121

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

1100.00

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

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

FOR LINE NUMBER: PAGE 7 OF 10

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

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

A. Giles, Ronald, H., ,

Mailing Address P.O. Box 506

City
SacoState
MEZip Code
04072FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sanweco Inc

Occupation (for Individual)

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 07 / 2016

Transaction ID : 3126

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

B. Gurney, Kirk, , ,

Mailing Address 717 South Field Rd

City

Lincoln Park

State

MI

Zip Code

48146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Windward Mgt

Occupation (for Individual)

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
10 / 05 / 2016

Transaction ID : 3124

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

C. Houston, Michael, C., ,

Mailing Address PO Box 75

City

GRANVILLE

State

MA

Zip Code

01034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2016

Transaction ID : 3122

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

1100.00

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 OF 10

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

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

A. Lyon, Walter, W., ,

Mailing Address 318 S Coffee Ave

City
DouglasState
GAZip Code
31533FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Lyon Management CompanyOccupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 04 / 2016

Transaction ID : 3123

Amount of Each Receipt this Period

1300.00

☐ Memo Item

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

B. McBrayer, Patricia, , ,

Mailing Address 16465 Winton Road

City
Apple ValleyState
CAZip Code
92307FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
T.G.G. Inc.Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 13 / 2016

Transaction ID : 3129

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

C. Rudnick, David, , ,

Mailing Address 40 Pride Farm Rd

City
FALMOUTHState
MEZip Code
04105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Good Eats Hospitality LLCOccupation (for Individual)
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 04 / 2016

Transaction ID : 3118

Amount of Each Receipt this Period

700.00

☐ Memo Item

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

2400.00

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 9 OF 10
(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)

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name West, Richard, M., ,		Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>10 / 19 / 2016</div> </div>	
Mailing Address 220 North Sixteenth Ave PO Box 2906		Transaction ID : 3112	
City Laurel	State MS	Zip Code 39442	
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>1000.00</div>	
Name of Employer (for Individual) West Quality Food Service Inc		Occupation (for Individual) Franchisee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>4000.00</div>	
B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> </div>	
Mailing Address		Amount of Each Receipt this Period <div></div>	
City	State	Zip Code	
FEC ID number of contributing federal political committee. <div>C</div>		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div></div>	
C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> </div>	
Mailing Address		Amount of Each Receipt this Period <div></div>	
City	State	Zip Code	
FEC ID number of contributing federal political committee. <div>C</div>		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div></div>	
SUBTOTAL of Receipts This Page (optional)..... ▶		<div>1000.00</div>	
TOTAL This Period (last page this line number only)..... ▶		<div>5600.00</div>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 10

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

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NAME OF COMMITTEE (In Full)

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

Full Name (Last, First, Middle Initial)

A. BRIAN FITZPATRICK FOR CONGRESS

Mailing Address PO BOX 939

City
LANGHORNEState
PAZip Code
19047Purpose of Disbursement
Political Contribution

Candidate Name

FITZPATRICK, BRIAN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA

District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		04		2016

FEC Identification Number

C C00607416**Transaction ID : 3101**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1000.00

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

1000.00