FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	_			•							
		(See instruction	ons)					Office	use only		
1. NAME OF COMMITTEE (ii	n full)	(Check if name is changed)		ple: If typying he lines	ı, type	12FE	4M5				
ASSOCIATIO L COMMITTEE	N OF KENTUCKY	FRIED CHICKEI	N FRANC	HISEES IN	IC POLIT	ICAL A	СТІОІ	N		لب	
					шш		ш			ш	ш
ADDRESS (number an	d street)	Box 26366					ш			ш	
X (Check if add	dress				шш		ш			ш	
is changed)	Alex	andria			لب	L VA			22313	ـــا - ا	
COMMITTEE'S E-M.	All ADDRESS		CITY			STATE	•		ZIP C	ODE 🛦	•
	politicalcomplian	ce.com									1
										——	
							Ш			ш	
COMMITTEE'S WE	B PAGE ADDRESS (U	RL)									
					шш		ш			ш	
							ш		11	ш	
COMMITTEE'S FAX 7034258352 2. DATE M 0	M / D D / Y										
3. FEC IDENTIFIC	ATION NUMBER	[C C004	112098							
4. IS THIS STATE	MENT NEW	/ (N) OR	X	AMEND	ED (A)						
I certify that I have exar	nined this Statement and	to the best of my kno	owledge and	belief it is true	e, correct an	d complet	te				
	_										
Type or Print Name of	of Treasurer	David E. Evans									
Signature of Treasure	er Electronically File	d by David E. I	Evans			Date	M 1 N	/ [2 5	Y	2 0 0 7
NOTE: Submission of	false, erroneous, or incon	nplete information ma	-		_		•		2 U.S.C. \$	5437g.	
Office Use Only				For further in Federal Election Toll Free 800- Local 202-694	on Commiss 424-9530				EC FC		

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5.	TYPE OF COMMITTEE (Check One)	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the calinformation below.)	ndidate
	Name of Candidate	
	Candidate Office House Senate President	State
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
		mocratic, ublican,etc.) Party.
	(e) X This committee is a separate segregated fund	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fun committee.	d or party
ŝ.	Name of Any Connected Organization or Affiliated Committee	
L	Association of Kentucky Fried Chicken Franchisees Inc.	
L		
	Mailing Address 2107 Elder Park Road	
	LaGrange KY KY 400	31
	CITY▲ STATE▲ Z	IP CODE 🛦
	Relationship Connected	
	Type of Connected Organization:	
	Corporation Corporation w/o Capital Stock Labor Organization	n
	Membership Organization X Trade Association Cooperative	

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Write or Type Committee Name

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC POLITICAL ACTION COMMIT	ITEE
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	AKFCF P			
7.		ntify by name, address, (phone number books and records.	optional), and position of the	ne person in
	Full Name David E	E. Evans		
	Mailing Address	170 Olde Forge Road		
		Hanover		02339
	Title or Position ♥	CITY A	STATE▲	ZIP CODE ▲
	Treasurer		Telephone number	
8.	Treasurer: List the name name and address of any	and address (phone number optional) designated agent (e.g., assistant treasu	of the treasurer of the commirer).	ittee; and the
	Full Name of Treasurer David E	E. Evans		
	Mailing Address	170 Olde Forge Road		
		Hanover		02339
	Title or Position ♥	CITY A	STATE▲	ZIP CODE ▲
	Treasurer		Telephone number	982 0755
	Full Name of Designated Agent			
	Mailing Address			
	Title or Position ♥	CITY A	STATE A	ZIP CODE A
			Telephone number	

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9.	Banks or Other Depositories safety deposit boxes or mainta	accounts, rents	
	Name of Bank, Depository, etc) .	
	Wacho	ovia Bank NA	
	Mailing Address	5703 Burke Centre Parkway	
		Burke VA	22015 _ [
		CITY △ STATE △	ZIP CODE △