

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, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special, Runoff (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 05 01 2010 through 05 31 2010

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 Rick Cowley

Signature of Treasurer Electronically Filed by Rick Cowley Date 06 14 2010

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 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	5

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		136532.23
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	138427.47									
(c) Total Receipts (from Line 19) .....	9902.58	21881.17								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	148330.05	158413.40								
7. Total Disbursements (from Line 31) .....	5111.43	15194.78								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	143218.62	143218.62								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

National Franchisee Association PAC (NFA-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) .....	9875.00	21625.00
(ii) Unitemized .....	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	9875.00	21725.00
(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) .....	9875.00	21725.00
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.) .....	27.58	156.17
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)) .....	9902.58	21881.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9902.58	21881.17

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	111.43	694.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	111.43	694.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	14500.00
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))..	5111.43	15194.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5111.43	15194.78

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	9875.00	21725.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9875.00	21725.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	111.43	694.78
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	111.43	694.78

**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 6 / 10
	<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	

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) Thomas F. Connolly		Date of Receipt
	Mailing Address 2213 5th St NW		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 2 4 / 2 0 1 0
	City	State	Zip Code
	Saint Paul	MN	55112-6539
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 00614.C1286
Name of Employer TAB of Rosemount, 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
			Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) Gary Edwards		Date of Receipt
	Mailing Address 811 Kensington Farm Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 2 5 / 2 0 1 0
	City	State	Zip Code
	Forest Hill	MD	21050-1519
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 00614.C1292
Name of Employer Chesapeake Burger, LLC		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"/> 625.00
			Receipt

<b>C.</b>	Full Name (Last, First, Middle Initial) Todd Gilbertson		Date of Receipt
	Mailing Address 5812 Trailridge Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 2 5 / 2 0 1 0
	City	State	Zip Code
	Parkville	MO	64152
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 00614.C1289
Name of Employer Gilbertson Restaurants LLC		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"/> 500.00
			Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> <b>1375.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 / 10
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Ben Jarratt	Date of Receipt MM / DD / YYYY 05 / 25 / 2010
	Mailing Address P.O. Box 650728	<b>Transaction ID:</b> 00614.C1294
	City State Zip Code Sterling VA 20165-0728	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Northern Virginia Group, Inc. Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Alan Martinson	Date of Receipt MM / DD / YYYY 05 / 25 / 2010
	Mailing Address 13910 Tomahawk Lane So.	<b>Transaction ID:</b> 00614.C1288
	City State Zip Code Afton MN 55001	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer ALM, Inc. Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Bruce Pavlikowski	Date of Receipt MM / DD / YYYY 05 / 25 / 2010
	Mailing Address 3710 E Finch Ln	<b>Transaction ID:</b> 00614.C1293
	City State Zip Code Flagstaff AZ 86004-7705	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Sheehy Ent. Inc. Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<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 / 10  
(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)  
Jim Reddin  
Mailing Address 5421 Feltl Rd  
City Hopkins State MN Zip Code 55343-3942  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RedKing Food LLC Occupation Franchisee  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 05 / 24 / 2010  
Transaction ID: 00614.C1287  
Amount of Each Receipt this Period 1000.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Richard Shaw  
Mailing Address 710 Larchwood Rd  
City Villanova State PA Zip Code 19085-1018  
FEC ID number of contributing federal political committee. **C**  
Name of Employer KB of Castor, Inc. Occupation Franchisee  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 05 / 25 / 2010  
Transaction ID: 00614.C1290  
Amount of Each Receipt this Period 250.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Thomas Walsh, Sr.  
Mailing Address 7005 S High Cross Trl  
City Sioux Falls State SD Zip Code 57108-3332  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Dakota King, Inc. Occupation Franchise Owner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 05 / 25 / 2010  
Transaction ID: 00614.C1291  
Amount of Each Receipt this Period 5000.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 6250.00  
**TOTAL** This Period (last page this line number only) ..... ▶ 9875.00

**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) American Express	Transaction ID: 00614.E779 Date of Disbursement
	Mailing Address P.O. Box 2878	<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="24"/> <input type="text" value="24"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/>
	City Omaha State NE Zip Code 68103-2878	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD FEE	<input type="text" value="36.43"/>
	Candidate Name	Category/Type
	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

B.	Full Name (Last, First, Middle Initial) SunTrust Bank	Transaction ID: 00614.E777 Date of Disbursement
	Mailing Address 1184 Ernest W Barrett Pkwy NW	<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="03"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/>
	City Kennesaw State GA Zip Code 30144-4534	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Service Charge	<input type="text" value="70.00"/>
	Candidate Name	Category/Type
	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) ▼
		BANK SERVICE CHARGE

C.	Full Name (Last, First, Middle Initial) SunTrust Bank	Transaction ID: 00614.E778 Date of Disbursement
	Mailing Address 1184 Ernest W Barrett Pkwy NW	<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/>
	City Kennesaw State GA Zip Code 30144-4534	Amount of Each Disbursement this Period
	Purpose of Disbursement Analysis Fee	<input type="text" value="5.00"/>
	Candidate Name	Category/Type
	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) ▼
		ANALYSIS FEE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="111.43"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="111.43"/>

**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 / 10

<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) Friends of David Harmer, Inc.	Transaction ID: 00614.E776 Date of Disbursement 05 / 18 / 2010
	Mailing Address 9321 Silverbend Ln	Amount of Each Disbursement this Period 2500.00
	City Elk Grove State CA Zip Code 95624-3985	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type
	Candidate Name DAVID JEFFREY HARMER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 10	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT CONTRIBUTION
B.	Full Name (Last, First, Middle Initial) Craig S. Miller for Congress	Transaction ID: 00614.E775 Date of Disbursement 05 / 18 / 2010
	Mailing Address 2640A Mitcham Dr	Amount of Each Disbursement this Period 2500.00
	City Tallahassee State FL Zip Code 32308-5400	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT CONTRIBUTION

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

5000.00

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

5000.00