

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 INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

ADDRESS (number and street) 1501 K Street NW Washington DC 20005 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00084491 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, Convention, General, Special, Runoff (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 12 01 2007 through 12 31 2007

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 Mr David French

Signature of Treasurer Electronically Filed by Mr David French Date 02 01 2008

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 table with 7 columns and 1 row, followed by FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Report Covering the Period: From: 

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		37104.30
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	81960.26									
(c) Total Receipts (from Line 19) .....	15620.30	255236.22								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	97580.56	292340.52								
7. Total Disbursements (from Line 31) .....	24500.00	219314.86								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	73080.56	73025.66								
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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Report Covering the Period: From: 

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	10170.30	218661.17
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	450.00	14575.05
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	10620.30	233236.22
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	16000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	10620.30	249236.22
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	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	5000.00	5000.00
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 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)) .....	15620.30	255236.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	15620.30	255236.22

**DETAILED SUMMARY PAGE**

of Disbursements

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.....	0.00	951.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	951.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24500.00	217000.00
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	1362.96
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))..	24500.00	219314.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24500.00	219314.86

**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) .....	10620.30	249236.22
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10620.30	249236.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	951.90
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	951.90

# 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 / 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	

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)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. David E. Holmes	Date of Receipt MM / DD / YYYY 12 / 12 / 2007
	Mailing Address 3800 Kilroy Airport Way, #250	<b>Transaction ID:</b> 3989887
	City State Zip Code Long Beach CA 90806-2497	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Holmes & Lofstrom, LLP Franchise Law Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.25	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. David French	Date of Receipt MM / DD / YYYY 12 / 12 / 2007
	Mailing Address 1501 K Street NW, Suite 350	<b>Transaction ID:</b> 3989888
	City State Zip Code Washington DC 20005-1412	Amount of Each Receipt this Period 625.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation International Franchise Association Vice President, Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Rennick	Date of Receipt MM / DD / YYYY 12 / 12 / 2007
	Mailing Address P.O. Box 1701	<b>Transaction ID:</b> 3989890
	City State Zip Code Palm Springs CA 92263-1701	Amount of Each Receipt this Period 1300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation American Leak Detection, Inc. Founder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2075.00
<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: (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

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)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

<b>A.</b>	Full Name (Last, First, Middle Initial) David J. Mlotkiewicz		Date of Receipt MM / DD / YYYY 12 / 12 / 2007		
	Mailing Address P.O. Box 1264		<b>Transaction ID:</b> 3989895		
	City Toms River	State NJ	Zip Code 08754-1264	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Lawn Doctor of Toms River	Occupation Owner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼  
1300.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. John W. Francis		Date of Receipt MM / DD / YYYY 12 / 12 / 2007		
	Mailing Address 1637 Highland Parkway		<b>Transaction ID:</b> 3989896		
	City St. Paul	State MN	Zip Code 55116-2163	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer PostNet of MN & WI	Occupation Franchisee	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼  
1550.00

<b>C.</b>	Full Name (Last, First, Middle Initial) John Jack Earle		Date of Receipt MM / DD / YYYY 12 / 12 / 2007		
	Mailing Address 60 East Main Street		<b>Transaction ID:</b> 3989897		
	City Marlton	State NJ	Zip Code 08053-2176	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Earle Enterprises	Occupation Owner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼  
2850.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<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: (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

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)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

<b>A.</b>	Full Name (Last, First, Middle Initial) Kirk Kinsell	Date of Receipt MM / DD / YYYY 12 / 12 / 2007
	Mailing Address Three Ravinia Drive	<b>Transaction ID:</b> 3989898
	City Atlanta State GA Zip Code 30346-2118	Amount of Each Receipt this Period 375.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer InterContinental Hotels Group Occupation SVP, Americas Franchising & Business D Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1125.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Barbara Moran	Date of Receipt MM / DD / YYYY 12 / 12 / 2007
	Mailing Address 4444 West 147th Street	<b>Transaction ID:</b> 3989899
	City Midlothian State IL Zip Code 60445-2644	Amount of Each Receipt this Period 625.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Moran Industries, Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4110.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Dina Dwyer-Owens	Date of Receipt MM / DD / YYYY 12 / 12 / 2007
	Mailing Address P.O. Box 3146	<b>Transaction ID:</b> 3989901
	City Waco State TX Zip Code 76707-0146	Amount of Each Receipt this Period 466.50
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer The Dwyer Group Occupation President/CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4625.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1466.50</b>
<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 9 / 18  
(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)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Matthew R. Shay</p> <p>Mailing Address 3811 Benton Street, NW</p> <p>City State Zip Code Washington DC 20007-1712</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer International Franchise Assn.</p> <p>Occupation President</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">5000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 2 / 1 2 / 2 0 0 7</span></p> <p><b>Transaction ID:</b> 3989902</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">555.50</span></p>
--	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Rich Emery</p> <p>Mailing Address 7555 University Avenue</p> <p>City State Zip Code Clive IA 50325-1245</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer The ServiceMaster Company</p> <p>Occupation Vice President</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">4545.40</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 2 / 1 2 / 2 0 0 7</span></p> <p><b>Transaction ID:</b> 3989903</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">454.60</span></p>
---	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) Jack Burris</p> <p>Mailing Address 3 Badgers Island West</p> <p>City State Zip Code Kittery ME 03904-1601</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Abistar Group, LLC</p> <p>Occupation Vice President</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">365.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 2 / 1 2 / 2 0 0 7</span></p> <p><b>Transaction ID:</b> 3989904</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">36.50</span></p>
---	---

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1046.60</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

**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 10 / 18		
	<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

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)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary Ann O'Connell		Date of Receipt MM / DD / YYYY 12 / 12 / 2007		
	Mailing Address 922 Van Ness Court		<b>Transaction ID:</b> 3989905		
	City Costa Mesa	State CA	Zip Code 92626-2941	Amount of Each Receipt this Period 36.50	
	FEC ID number of contributing federal political committee. C				
	Name of Employer O'Connell & Company	Occupation Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 365.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) John (Bill) William Anderson		Date of Receipt MM / DD / YYYY 12 / 12 / 2007		
	Mailing Address 1735 Market Street		<b>Transaction ID:</b> 3989906		
	City Philadelphia	State PA	Zip Code 19103-7502	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Wave Services, Inc. DBA The UPS Store	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1487.50			

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Paula Powers		Date of Receipt MM / DD / YYYY 12 / 12 / 2007		
	Mailing Address 4676 Sierra Tree Lane		<b>Transaction ID:</b> 3989907		
	City Irvine	State CA	Zip Code 92612-2245	Amount of Each Receipt this Period 45.70	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Power Training & Developm- ent	Occupation President & CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 515.60			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	182.20
<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: (check only one)	PAGE 11 / 18
	<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	

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)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

<b>A.</b>	Full Name (Last, First, Middle Initial) William G. Hall	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 2 / 2 0 0 7
	Mailing Address Dairy Queen Franchisee	<b>Transaction ID:</b> 3989909
	City State Zip Code Fort Worth TX 76109	Amount of Each Receipt this Period 1050.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation William G. Hall & Company Chairman of the Board & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jerry L Crawford	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 0 7
	Mailing Address 16885 Dallas Parkway	<b>Transaction ID:</b> 3994050
	City State Zip Code Addison TX 75001-5215	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Jani-King International, Inc. President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Lawrence J. Cohen	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 0 7
	Mailing Address 1431 Graham Drive, #218	<b>Transaction ID:</b> 3994051
	City State Zip Code Tomball TX 77375-4270	Amount of Each Receipt this Period 2750.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation DOC & Associates, Ltd. President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4200.00
<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: <span style="float: right;">PAGE 12 / 18</span>
	(check only one)
<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"/>	<input type="checkbox"/> 15
<input type="checkbox"/>	<input type="checkbox"/> 16
<input type="checkbox"/>	<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)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

**A.**

Full Name (Last, First, Middle Initial) Ms. Patricia Coqvillard		Date of Receipt
Mailing Address 34300 Lantern Bay Drive, #68		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 2 8 / 2 0 0 7
City	State	Zip Code
Dana Point	CA	92629-3805
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> 4016145
C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text"/> 300.00
Occupation		
Retired		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 300.00	
<input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) Ms. Susan Grueneberg		Date of Receipt
Mailing Address 1620 26th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 2 8 / 2 0 0 7
City	State	Zip Code
Santa Monica	CA	90404-4013
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> 4016148
C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text"/> 150.00
Dreier Stein Kahan Browne		
Woods George		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 515.00	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 450.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 10170.30

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 13 / 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

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) INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC
---

<b>A.</b>	Full Name (Last, First, Middle Initial) ServiceMaster Good Government Fund		Date of Receipt			
	Mailing Address 3250 Lacey Road		M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 7			
	City	State	Zip Code	<b>Transaction ID:</b> 4016130		
	Downers Grove	IL	60515	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		C C00331363		5000.00	
	Name of Employer		Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	5000.00

**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 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

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)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

A.	Full Name (Last, First, Middle Initial) Team Sununu	Transaction ID: 3961764 Date of Disbursement 12 / 05 / 2007
	Mailing Address P.O. Box 500	Amount of Each Disbursement this Period 1000.00
	City Rye State NH Zip Code 03870	
	Purpose of Disbursement	011 Category/Type
	Candidate Name John Sununu	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Collins For Senator	Transaction ID: 3961785 Date of Disbursement 12 / 05 / 2007
	Mailing Address PO Box 1096	Amount of Each Disbursement this Period 3000.00
	City Bangor State ME Zip Code 04402	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Sen. Susan Collins	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Johanns For Senate Incorporated	Transaction ID: 3961763 Date of Disbursement 12 / 05 / 2007
	Mailing Address 1201 O Street Suite 101	Amount of Each Disbursement this Period 2500.00
	City Lincoln State NE Zip Code 68506	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Mr. Michael Johanns	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6500.00
<b>TOTAL</b> 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

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)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

A.

Full Name (Last, First, Middle Initial)  
Stivers For Congress

Mailing Address 81 S Fifth Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Mr. Steve Stivers

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: OH District: 15

Transaction ID: 3961716

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)  
Steve Austria For Congress

Mailing Address 2537 Obetz Dr

City Beavercreek State OH Zip Code 45434

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Mr. Steve Austria

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: OH District: 07

Transaction ID: 3961777

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)  
Bobby Scott For Congress

Mailing Address P.O. Box 251

City Newport News State VA Zip Code 23607

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Robert Scott

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: VA District: 03

Transaction ID: 3961755

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

1500.00

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

7500.00

**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 16 / 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

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)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

<b>A.</b> Full Name (Last, First, Middle Initial) Citizens For Turner <hr/> Mailing Address 131 N. Ludlow Street Suite 317 <hr/> City Dayton State OH Zip Code 45402 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Michael Turner <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 03 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 3961765 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 7	
	Amount of Each Disbursement this Period 2000.00	
	011 Category/ Type	
	Full Name (Last, First, Middle Initial) Kendrick Meek Campaign For Congress <hr/> Mailing Address 111 Nw 183rd Street Suite 325 <hr/> City Miami State FL Zip Code 33169 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Kendrick Meek <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 17 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 3961771 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 7
Amount of Each Disbursement this Period 1000.00		
011 Category/ Type	Full Name (Last, First, Middle Initial) LUIS PAC <hr/> Mailing Address 1155 21st Street, NW Ste 330 <hr/> City Washington State SC Zip Code 20036 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PR District: 01 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 3961783 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 7
Amount of Each Disbursement this Period 1000.00		
011 Category/ Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



# 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

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)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kline For Congress</p> <p>Mailing Address 101 Burnsville Parkway Suite 104</p> <p>City Burnsville State MN Zip Code 55337</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Rep. John Kline</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 02</p>	<p><b>Transaction ID:</b> 3979047 <b>Date of Disbursement</b>  <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	6	/	2	0	0	7	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	6	/	2	0	0	7													
1000.00																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Latta For Congress</p> <p>Mailing Address 300 North Main Street</p> <p>City Bowling Green State OH Zip Code 43402</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Mr. Robert Latta</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 05</p>	<p><b>Transaction ID:</b> 3979048 <b>Date of Disbursement</b>  <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	6	/	2	0	0	7	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	6	/	2	0	0	7													
1000.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Keller For Congress</p> <p>Mailing Address P.O. Box 1453</p> <p>City Orlando State FL Zip Code 32802</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Richard Keller</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 08</p>	<p><b>Transaction ID:</b> 3982746 <b>Date of Disbursement</b>  <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	7	/	2	0	0	7	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	7	/	2	0	0	7													
1000.00																						

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

**3000.00**

**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

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)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

A.

Full Name (Last, First, Middle Initial)

Friends Of Erik Paulsen

Mailing Address PO Box 44369

City State Zip Code  
Eden Prairie MN 55344

Purpose of Disbursement

Category/  
Type

Candidate Name  
Mr. Erik Paulsen

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MN District: 03

Transaction ID: 3982747

Date of Disbursement

/  /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

Treadwell for Congress

Mailing Address P.O. Box 685

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement

Category/  
Type

Candidate Name  
Sandy Treadwell

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: NY District: 20

Transaction ID: 3997549

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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