

# 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  
 Check if different than previously reported. (ACC)  
Washington DC 20005

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 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 07 01 2011 through 07 31 2011

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 Mrs. Judith Thorman

Signature of Treasurer Electronically Filed by Mrs. Judith Thorman Date 08 18 2011

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

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		74380.81
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	234188.17									
(c) Total Receipts (from Line 19) .....	27662.02	327160.48								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	261850.19	401541.29								
7. Total Disbursements (from Line 31) .....	15065.35	154756.45								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	246784.84	246784.84								
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
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	1

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) .....	23760.52	304345.48
(ii) Unitemized .....	401.50	6815.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	24162.02	311160.48
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	3500.00	13500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	27662.02	324660.48
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	2500.00
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 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)) .....	27662.02	327160.48
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	27662.02	327160.48

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.....	65.35	33391.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	65.35	33391.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	121000.00
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	365.00
(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	365.00
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))..	15065.35	154756.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15065.35	154756.45

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) .....	27662.02	324660.48
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	365.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	27662.02	324295.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	65.35	33391.45
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	65.35	33391.45

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 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)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Steve Romaniello, CFE

Mailing Address 740 Riley Place

City Atlanta State GA Zip Code 30327-4353

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

Name of Employer Roark Capital Group Occupation Managing Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 01 / 2011

Transaction ID: 6826853

Amount of Each Receipt this Period 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Mike Owens

Mailing Address P.O. Box 3146

City Waco State TX Zip Code 76707-0146

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

Name of Employer ProTradeNet Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 01 / 2011

Transaction ID: 6826854

Amount of Each Receipt this Period 5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mrs. Dina Dwyer-Owens, CFE

Mailing Address 1015 Joy Drive

City Waco State TX Zip Code 76708-9770

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

Name of Employer The Dwyer Group Occupation Chairwoman & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 01 / 2011

Transaction ID: 6826855

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7000.00

**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 7 / 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)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Steve R Siegel

Mailing Address PO Box 1628

City State Zip Code  
Campton NH 03223-1628

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Brookside Consulting Managing Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
07 / 01 / 2011

**Transaction ID:** 6827447

Amount of Each Receipt this Period 500.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Scott Pressly, CFE

Mailing Address 6160 Mountain Brook Way

City State Zip Code  
Atlanta GA 30328-3608

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Van Ness Capital Advisors Manager, Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt MM / DD / YYYY  
07 / 02 / 2011

**Transaction ID:** 6835211

Amount of Each Receipt this Period 1250.00

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Susan E Black-Beth, CFE

Mailing Address 1948 Elmore Ave.

City State Zip Code  
Downers Grove IL 60515-4426

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Super Wash, Inc. Chief Operating Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt MM / DD / YYYY  
07 / 02 / 2011

**Transaction ID:** 6835213

Amount of Each Receipt this Period 625.00

**SUBTOTAL** of Receipts This Page (optional) ..... 2375.00

**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 / 18  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jason P. Zickerman, CFE

Mailing Address 2245 Keota Lane

City State Zip Code  
Superior CO 80027-8248

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
The Alternative Board (TA-B) President & CEO

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt M M / D D / Y Y Y Y  
07 / 11 / 2011

**Transaction ID:** 6860922

Amount of Each Receipt this Period 250.00

FranPAC Dinner

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lane Fisher, CFE

Mailing Address 311 Violet Lane

City State Zip Code  
Wynnewood PA 19096-1656

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
FisherZucker LLC Partner

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt M M / D D / Y Y Y Y  
07 / 12 / 2011

**Transaction ID:** 6865753

Amount of Each Receipt this Period 3000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Catherine Monson, CFE

Mailing Address 11 Florentine

City State Zip Code  
Laguna Hills CA 92656-4229

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
FASTSIGNS International CEO

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4425.00

Date of Receipt M M / D D / Y Y Y Y  
07 / 18 / 2011

**Transaction ID:** 6876156

Amount of Each Receipt this Period 250.00

FranPAC Dinner

**SUBTOTAL** of Receipts This Page (optional) ..... 3500.00

**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 / 18  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

**A.** Full Name (Last, First, Middle Initial)  
Mr. William Edwards, CFE

Mailing Address 1951 San Bruno

City State Zip Code  
Newport Beach CA 92660-4536

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Edwards Global Services Chief Executive Officer

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt M M / D D / Y Y Y Y  
07 / 18 / 2011

**Transaction ID:** 6876157

Amount of Each Receipt this Period 250.00

FranPAC Dinner

**B.** Full Name (Last, First, Middle Initial)  
Mr. Darrell M. Johnson, CFE

Mailing Address 1725 Forest Lane

City State Zip Code  
Mc Lean VA 22101-3323

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
FRANdata Corporation President & CEO

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3850.00

Date of Receipt M M / D D / Y Y Y Y  
07 / 18 / 2011

**Transaction ID:** 6876158

Amount of Each Receipt this Period 3200.00

Wine Auction Payment

**C.** Full Name (Last, First, Middle Initial)  
Ms. Carol Brauer

Mailing Address 17 Park Place, #900

City State Zip Code  
Appleton WI 54914-8203

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
BrightStar Healthcare of Appleton, WI Owner

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt M M / D D / Y Y Y Y  
07 / 18 / 2011

**Transaction ID:** 6876159

Amount of Each Receipt this Period 365.00

**SUBTOTAL** of Receipts This Page (optional) ..... 3815.00

**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: (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 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

<b>A.</b>	Full Name (Last, First, Middle Initial) John Reynolds		Date of Receipt
	Mailing Address 1501 K 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 07 / 18 / 2011
	City	State	Zip Code
	Washington	DC	20005-1401
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 6876164
Name of Employer IFA		Occupation President, Educational Foundation	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 ▼ 1000.00	1000.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Colette Russell		Date of Receipt
	Mailing Address 7562 Fairlinks 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 07 / 18 / 2011
	City	State	Zip Code
	Sarasota	FL	34243-3830
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 6876166
Name of Employer BrightStar Healthcare of South Sarasot		Occupation Owner	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 ▼ 250.00	0.00
			<b>[MEMO ITEM]</b> Credit Card declined

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Tim Johnson, CFE		Date of Receipt
	Mailing Address 300 Carlsbad Village Drive, #302		<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 07 / 18 / 2011
	City	State	Zip Code
	Carlsbad	CA	92008-2991
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 6876169
Name of Employer Process Peak LLC		Occupation President	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 ▼ 91.25	0.00
			<b>[MEMO ITEM]</b> Declined credit card

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<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 11 / 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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Sam G. Ballas, CFE

Mailing Address 520 Cherbang Ave

City State Zip Code  
Winston-Salem NC 27103

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

Name of Employer Occupation  
East Coast Wings & Grill President/CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2011

**Transaction ID:** 6876171

Amount of Each Receipt this Period  
1250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Shawn Spencer

Mailing Address 137 Johnson Ferry Road  
Bldg. 2000, Suite 2220

City State Zip Code  
Marietta GA 30068-4945

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

Name of Employer Occupation  
Fran-Systems LLC COO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2011

**Transaction ID:** 6876172

Amount of Each Receipt this Period  
1250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Reeves McGee

Mailing Address 804 East Forest Hills Blvd.

City State Zip Code  
Durham NC 27707-1804

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

Name of Employer Occupation  
Investors Management Corporation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2011

**Transaction ID:** 6876173

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2750.00**

**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 12 / 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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

**A.**

Full Name (Last, First, Middle Initial) Mr. Steve Romaniello, CFE		Date of Receipt MM / DD / YYYY 07 / 20 / 2011
Mailing Address 740 Riley Place		<b>Transaction ID:</b> 6889658
City Atlanta	State GA	Zip Code 30327-4353
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Roark Capital Group	Occupation Managing Director	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

**B.**

Full Name (Last, First, Middle Initial) Mr. Michael Knoblock		Date of Receipt MM / DD / YYYY 07 / 22 / 2011
Mailing Address 1719 Sendero Drive		<b>Transaction ID:</b> 6897151
City Richmond	State TX	Zip Code 77406-9731
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer MSK Enterprises	Occupation President	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**C.**

Full Name (Last, First, Middle Initial) Mr. Bret Lowell, CFE		Date of Receipt MM / DD / YYYY 07 / 25 / 2011
Mailing Address 1963 Virginia Avenue		<b>Transaction ID:</b> 6901599
City Mc Lean	State VA	Zip Code 22101-4938
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer DLA Piper LLP (US)	Occupation Partner	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<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 13 / 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	

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NAME OF COMMITTEE (In Full)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Tracy L. Weise		Date of Receipt
	Mailing Address 8567 E. 25th Place		<input type="text" value="07"/> / <input type="text" value="25"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Denver	CO	80238-2747
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 6901600
Name of Employer Weise Communications, Inc.		Occupation President	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" value="250.00"/>	<input type="text" value="250.00"/>
			contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Stephen J. Caldeira		Date of Receipt
	Mailing Address 1501 K St., NW Ste 350		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Washington	DC	20005-1412
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: PR36103865989
Name of Employer International Franchise Association		Occupation President and Chief Executive Officer	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" value="2916.62"/>	<input type="text" value="416.66"/>
			P/R Deduction (\$0.00)

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Judith Thorman		Date of Receipt
	Mailing Address 1501 K Street, #350		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Washington	DC	20005-1412
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: PR37637945989
Name of Employer International Franchise Association		Occupation SVP, Gov't Relations & Public Policy	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" value="1153.86"/>	<input type="text" value="1153.86"/>
			P/R Deduction (\$0.00)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1820.52"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="23760.52"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 18
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

**A.**

Full Name (Last, First, Middle Initial) Express Services, Inc. Political Action Committee		Date of Receipt
Mailing Address 8516 NW Expressway		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 11 / 2011
City State Zip Code Oklahoma City OK 73162		<b>Transaction ID:</b> 6860923
FEC ID number of contributing federal political committee. <b>C</b> C00302240		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

**B.**

Full Name (Last, First, Middle Initial) SBP INC - Padgett Business Services PAC		Date of Receipt
Mailing Address 160 Hawthorne Park		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 14 / 2011
City State Zip Code Athens GA 30606		<b>Transaction ID:</b> 6874150
FEC ID number of contributing federal political committee. <b>C</b> C00460618		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
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) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>3500.00</b>

**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 15 / 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)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

A.	Full Name (Last, First, Middle Initial) Graves For Congress	Transaction ID: 6861175 Date of Disbursement 07 / 11 / 2011
	Mailing Address 2345 Grand Suite 2400	Amount of Each Disbursement this Period 3000.00
	City Kansas City State MO Zip Code 64108	
	Purpose of Disbursement Contribution Candidate Name Rep. Samuel Graves, Jr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution
B.	Full Name (Last, First, Middle Initial) Schock For Congress	Transaction ID: 6861176 Date of Disbursement 07 / 11 / 2011
	Mailing Address PO Box 10555	Amount of Each Disbursement this Period 2500.00
	City Peoria State IL Zip Code 61612	
	Purpose of Disbursement Contribution Candidate Name Mr. Aaron Schock Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 18	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution
C.	Full Name (Last, First, Middle Initial) Jim Gerlach For Congress Committee	Transaction ID: 6861277 Date of Disbursement 07 / 11 / 2011
	Mailing Address P.O. Box 87	Amount of Each Disbursement this Period 2500.00
	City Uwchland State PA Zip Code 19480	
	Purpose of Disbursement Contribution Candidate Name James Gerlach Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution

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

8000.00

**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)

<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)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

<b>A.</b>	Full Name (Last, First, Middle Initial) Montanans For Rehberg	Transaction ID: 6861285 Date of Disbursement 07 / 11 / 2011
	Mailing Address PO Box 1597	Amount of Each Disbursement this Period 2000.00
	City Helena State MT Zip Code 59624	Contribution
	Purpose of Disbursement Contribution Candidate Name Mr. Dennis Rehberg Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) Berkley For Senate	Transaction ID: 6865314 Date of Disbursement 07 / 12 / 2011
	Mailing Address P.O. Box 636	Amount of Each Disbursement this Period 1500.00
	City Annandale State VA Zip Code 22003	Contribution
	Purpose of Disbursement Contribution Candidate Name Rep. Shelley Berkley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 01 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) Committee for the Preservation of Capitalism	Transaction ID: 6865330 Date of Disbursement 07 / 12 / 2011
	Mailing Address P.O. Box 65314	Amount of Each Disbursement this Period 2500.00
	City Washington State DC Zip Code 20035	Contribution
	Purpose of Disbursement Contribution 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) ▼	

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

6000.00

**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 17 / 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)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

A.

Full Name (Last, First, Middle Initial)  
McConnell Senate Committee

Mailing Address P.O. Box 1496

City State Zip Code  
Louisville KY 40201

Purpose of Disbursement  
Contribution

Candidate Name  
Mitch McConnell

Office Sought:  House  
 Senate  
 President

State: KY District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: 6889624

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Contribution

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

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 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)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: 6956072 Date of Disbursement
	Mailing Address 7810 Old Branch Avenue	<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City Clinton State MD Zip Code 20735	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fees Candidate Name	<input type="text" value="57.40"/>
	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 Fees
		<input type="text" value="001"/> Category/ Type

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: 6956073 Date of Disbursement
	Mailing Address 7810 Old Branch Avenue	<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2011"/>
	City Clinton State MD Zip Code 20735	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fees Candidate Name	<input type="text" value="7.95"/>
	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 Fees
		<input type="text" value="001"/> Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="65.35"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="65.35"/>