

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

ADDRESS (number and street) 1900 K Street NW  
Suite 700  
 Check if different than previously reported. (ACC) Washington DC 20006

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C 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 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of    
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y Y Y  
02 / 01 / 2014 through 02 / 28 / 2014

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. Robert Cresanti

Signature of Treasurer Mr. Robert Cresanti [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y Y Y  
10 / 19 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		275757.64
(b) Cash on Hand at Beginning of Reporting Period.....	221740.89	
(c) Total Receipts (from Line 19) .....	15052.48	26375.38
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	236793.37	302133.02
7. Total Disbursements (from Line 31).....	48653.30	113992.95
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	188140.07	188140.07
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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

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).....	14856.64	23088.28
(ii) Unitemized .....	195.84	287.10
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	15052.48	23375.38
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	15052.48	24375.38
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	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	15052.48	26375.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	15052.48	26375.38

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	13153.30	18492.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	13153.30	18492.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25500.00	85500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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 .....	10000.00	10000.00
(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)).....	10000.00	10000.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	48653.30	113992.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	48653.30	113992.95

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	15052.48	24375.38
34. Total Contribution Refunds (from Line 28(d)) .....	10000.00	10000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5052.48	14375.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	13153.30	18492.95
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	13153.30	18492.95

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

Corrects cash-on-hand

Form/Schedule:  
Transaction ID:

**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 OF 17
<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**

Full Name (Last, First, Middle Initial) <b>A. Matt Haller</b>		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 <b>Transaction ID : 4282141</b>
Mailing Address 1900 K Street Suite 700		Amount of Each Receipt this Period 416.66
City Washington	State DC	
Zip Code 20006-1110		Aggregate Year-to-Date ▼ 833.32
FEC ID number of contributing federal political committee. C		
Name of Employer International Franchise Association	Occupation Sr. Vice President, Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Bill Grubb</b>		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 <b>Transaction ID : 4282546</b>
Mailing Address 1900 K Street Suite 700		Amount of Each Receipt this Period 416.66
City Washington	State DC	
Zip Code 20006-1110		Aggregate Year-to-Date ▼ 833.32
FEC ID number of contributing federal political committee. C		
Name of Employer International Franchise Association	Occupation SVP Finance and Administration	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. Max J. Schott, II CFE</b>		Date of Receipt MM / DD / YYYY 02 / 03 / 2014 <b>Transaction ID : 9317769</b>
Mailing Address 500 IDS Center 80 South Eighth Street		Amount of Each Receipt this Period 365.00
City Minneapolis	State MN	
Zip Code 55402-2100		Aggregate Year-to-Date ▼ 365.00
FEC ID number of contributing federal political committee. C		
Name of Employer Gray Plant Mooty	Occupation Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1198.32
<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 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Mr. Lane Fisher CFE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 311 Violet Lane  
 City Wynnewood State PA Zip Code 19096-1656  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FisherZucker LLC Occupation Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 24 / 2014  
**Transaction ID : 9405961**  
 Amount of Each Receipt this Period 1000.00  
 In-Kind: Auction Item

**B. Mr. Michael H. Seid CFE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 94 Mohegan Drive  
 City West Hartford State CT Zip Code 06117-1403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MSA Worldwide Occupation Managing Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1126.00

Date of Receipt 02 / 24 / 2014  
**Transaction ID : 9405963**  
 Amount of Each Receipt this Period 1126.00  
 In-Kind: Auction Item

**C. Mr. Aaron Chaitovsky CFE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 42 Phipps Lane  
 City Plainview State NY Zip Code 11803-1948  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Citrin Cooperman Occupation Partner, Chair of Franchise Svc. Divis  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 02 / 24 / 2014  
**Transaction ID : 9405967**  
 Amount of Each Receipt this Period 2000.00  
 In-Kind: Auction Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4126.00
<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 9 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Mr. Jan Gilbert**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2326 S Queen Street  
 City Arlington State VA Zip Code 22202-1549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Gray Plant Mooty Occupation Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 02 / 24 / 2014  
**Transaction ID : 9405971**  
 Amount of Each Receipt this Period 1500.00  
 In-Kind: Auction Item

**B. Mr. Bret Lowell CFE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1963 Virginia Avenue  
 City Mc Lean State VA Zip Code 22101-4938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DLA Piper LLP (US) Occupation Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 24 / 2014  
**Transaction ID : 9405975**  
 Amount of Each Receipt this Period 5000.00  
 In-Kind: Auction Item

**c. Ms. Elizabeth D. Sigety CFE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2700 Kelly Road, Suite 300  
 City Warrington State PA Zip Code 18976-3653  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Fox Rothschild LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2199.00

Date of Receipt 02 / 24 / 2014  
**Transaction ID : 9406007**  
 Amount of Each Receipt this Period 2199.00  
 In-Kind: Auction Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8699.00
<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 10 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Erica Fitzsimmons**  
Full Name (Last, First, Middle Initial)

Mailing Address 1501 K Street, NW, Suite 350

City Washington	State DC	Zip Code 20005-1412
--------------------	-------------	------------------------

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

Name of Employer International Franchise Association	Occupation Director, Political Affairs and Grassr
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.32**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2014**  
**Transaction ID : PR38512059904**

Amount of Each Receipt this Period  
**416.66**

P/R Deduction (\$108.70 Bi-Weekly)

**B. Dean Heyl**  
Full Name (Last, First, Middle Initial)

Mailing Address 1501 K Street, NWm Suite 350

City Washington	State DC	Zip Code 20009
--------------------	-------------	-------------------

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

Name of Employer International Franchise Association	Occupation Senior Director, State Government Affa
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.32**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2014**  
**Transaction ID : PR39611799904**

Amount of Each Receipt this Period  
**416.66**

P/R Deduction (\$321.43 Bi-Weekly)

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>833.32</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>14856.64</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)

<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**

Full Name (Last, First, Middle Initial)

**A. CyberSource Corp.**

Mailing Address PO Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement  
Credit Card Transaction Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 9402493**

Amount of Each Disbursement this Period

Credit Card Transaction Fees

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement  
Credit Card Transaction Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 9402496**

Amount of Each Disbursement this Period

Credit Card Transaction Fees

Full Name (Last, First, Middle Initial)

**C. Mr. Lane Fisher CFE**

Mailing Address 311 Violet Lane

City Wynnewood State PA Zip Code 19096-1656

Purpose of Disbursement  
In-Kind: Auction Item

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 9405962**

Amount of Each Disbursement this Period

In-Kind: Auction Item

**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)

<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**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael H. Seid CFE**

Mailing Address 94 Mohegan Drive

City West Hartford State CT Zip Code 06117-1403

Purpose of Disbursement  
In-Kind: Auction Item

011  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 24 / 2014

**Transaction ID : 9405964**

Amount of Each Disbursement this Period

1126.00

In-Kind: Auction Item

Full Name (Last, First, Middle Initial)

**B. Mr. Aaron Chaitovsky CFE**

Mailing Address 42 Phipps Lane

City Plainview State NY Zip Code 11803-1948

Purpose of Disbursement  
In-Kind: Auction Item

011  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 24 / 2014

**Transaction ID : 9405969**

Amount of Each Disbursement this Period

2000.00

In-Kind: Auction Item

Full Name (Last, First, Middle Initial)

**C. Mr. Jan Gilbert**

Mailing Address 2326 S Queen Street

City Arlington State VA Zip Code 22202-1549

Purpose of Disbursement  
In-Kind: Auction Item

011  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 24 / 2014

**Transaction ID : 9405973**

Amount of Each Disbursement this Period

1500.00

In-Kind: Auction Item

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

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

4626.00

**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)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Mr. Bret Lowell CFE**

Mailing Address 1963 Virginia Avenue

City State Zip Code  
Mc Lean VA 22101-4938

Purpose of Disbursement  
In-Kind: Auction Item

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : 9405977**

Amount of Each Disbursement this Period

In-Kind: Auction Item

Full Name (Last, First, Middle Initial)

**B. Ms. Elizabeth D. Sigety CFE**

Mailing Address 2700 Kelly Road, Suite 300

City State Zip Code  
Warrington PA 18976-3653

Purpose of Disbursement  
In-Kind: Auction Item

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : 9406008**

Amount of Each Disbursement this Period

In-Kind: Auction Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**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)

<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**

Full Name (Last, First, Middle Initial)

**A. Simpson For Congress**

Mailing Address 1487 Parkway Drive

City Blackfoot State ID Zip Code 83221

Purpose of Disbursement Contribution

011

Candidate Name

**Rep. Mike Simpson**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: ID District: 02

Date of Disbursement

MM / DD / YYYY  
02 / 04 / 2014

**Transaction ID : 9309211**

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Bilirakis For Congress**

Mailing Address PO Box 606

City Tarpon Springs State FL Zip Code 34688

Purpose of Disbursement Contribution

011

Candidate Name

**Rep. Gus Bilirakis**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: FL District: 12

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2014

**Transaction ID : 9335702**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Lou Barletta For Congress**

Mailing Address P.O. Box 128

City Hazleton State PA Zip Code 18201

Purpose of Disbursement Contribution

011

Candidate Name

**Rep. Lou Barletta**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: PA District: 11

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2014

**Transaction ID : 9335704**

Amount of Each Disbursement this Period

1000.00

Contribution

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

4500.00

**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**

Full Name (Last, First, Middle Initial)

**A. Friends Of David Jolly**

Mailing Address P. O. Box 1158

City Indian Rocks Beach State FL Zip Code 33785

Purpose of Disbursement Contribution

011

Candidate Name

**David Jolly**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Special-General2014**

State: FL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	20	/	2014

**Transaction ID : 9335705**

Amount of Each Disbursement this Period

5000.00
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Contribution

Full Name (Last, First, Middle Initial)

**B. Van Hollen For Congress**

Mailing Address 10537 St. Paul St.

City Kensington State MD Zip Code 20895

Purpose of Disbursement Contribution

011

Candidate Name

**Rep. Chris Van Hollen**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **▼**

State: MD District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	20	/	2014

**Transaction ID : 9335707**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**C. Citizens For Cochran**

Mailing Address PO Box 7183

City Tupelo State MS Zip Code 38802

Purpose of Disbursement Contribution

011

Candidate Name

**Sen. Thad Cochran**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **▼**

State: MS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	20	/	2014

**Transaction ID : 9335709**

Amount of Each Disbursement this Period

5000.00
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Contribution

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

11000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**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**

Full Name (Last, First, Middle Initial)

**A. New Pioneers PAC**

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
2014 Contribution

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 9335710**

Amount of Each Disbursement this Period

2014 Contribution

Full Name (Last, First, Middle Initial)

**B. People for Enterprise Trade and Economic Growth PAC**

Mailing Address 7804 Evening Lane

City Alexandria State VA Zip Code 22306

Purpose of Disbursement  
2014 Contribution

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 9335711**

Amount of Each Disbursement this Period

2014 Contribution

Full Name (Last, First, Middle Initial)

**C. Kevin McCarthy For Congress**

Mailing Address 455 Capitol Mall

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Contribution

Category/  
Type

Candidate Name

**Kevin McCarthy**

Office Sought:  House  Senate  President  
State: CA District: 22

Disbursement For: 2014  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 9335712**

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)

<input 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 checked="" 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**

Full Name (Last, First, Middle Initial)

**A. SproutLoud Media Networks**

Mailing Address 15431 SW 14th Street

City Sunrise State FL Zip Code 33326

Purpose of Disbursement  
Refund of 2012 and 2013 contributions originally attributed to Sanford Lechner

Candidate Name

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 9402490**

Amount of Each Disbursement this Period

Refund of 2012 and 2013 contributions originally attributed to Sanford Lechner

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

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