

**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

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

ADDRESS (number and street)

912 Saint Michael Drive

Check if different
than previously
reported. (ACC)

Gambrills

MD

21054

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00412098

3. IS THIS
REPORTNEW
(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

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
01 01 2023

through

M M M / D D D / Y Y Y Y Y Y
01 31 2023

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Sharp, Leslie, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Sharp, Leslie, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
02 09 2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

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="2023"/>		<input type="text" value="131377.55"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="131377.55"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1400.00"/>	<input type="text" value="1400.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="132777.55"/>	<input type="text" value="132777.55"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9530.00"/>	<input type="text" value="9530.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="123247.55"/>	<input type="text" value="123247.55"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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. 05/2016)

Page 3

Write or Type Committee Name

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		0	1		2	0	2	3		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		3	1		2	0	2	3		

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).....	1000.00	1000.00
(ii) Unitemized	400.00	400.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1400.00	1400.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1400.00	1400.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	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))	1400.00	1400.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1400.00	1400.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	30.00	30.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	30.00	30.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	9500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	9530.00	9530.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9530.00	9530.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	1400.00	1400.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1400.00	1400.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	30.00	30.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	30.00	30.00

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

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

FOR LINE NUMBER: PAGE 6 OF 8
 (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)

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

<p>A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name West, Richard, M., ,</p> <p>Mailing Address 220 North Sixteenth Ave PO Box 2906</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Laurel</td> <td style="width: 15%;">State MS</td> <td style="width: 52%;">Zip Code 39442</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) West Quality Food Service Inc</td> <td style="width: 67%;">Occupation (for Individual) Franchisee</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Aggregate Year-to-Date ▼ 1000.00</p>			City Laurel	State MS	Zip Code 39442	Name of Employer (for Individual) West Quality Food Service Inc	Occupation (for Individual) Franchisee	<p>Date of Receipt 01 / 14 / 2023</p> <p>Transaction ID : 4418</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Memo Item</p>	
City Laurel	State MS	Zip Code 39442							
Name of Employer (for Individual) West Quality Food Service Inc	Occupation (for Individual) Franchisee								
<p>B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p>Mailing Address</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City</td> <td style="width: 15%;">State</td> <td style="width: 52%;">Zip Code</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual)</td> <td style="width: 67%;">Occupation (for Individual)</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Aggregate Year-to-Date ▼</p>			City	State	Zip Code	Name of Employer (for Individual)	Occupation (for Individual)	<p>Date of Receipt</p> <p>Amount of Each Receipt this Period</p> <p><input type="checkbox"/> Memo Item</p>	
City	State	Zip Code							
Name of Employer (for Individual)	Occupation (for Individual)								
<p>C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p>Mailing Address</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City</td> <td style="width: 15%;">State</td> <td style="width: 52%;">Zip Code</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual)</td> <td style="width: 67%;">Occupation (for Individual)</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p style="text-align: right;">Aggregate Year-to-Date ▼</p>			City	State	Zip Code	Name of Employer (for Individual)	Occupation (for Individual)	<p>Date of Receipt</p> <p>Amount of Each Receipt this Period</p> <p><input type="checkbox"/> Memo Item</p>	
City	State	Zip Code							
Name of Employer (for Individual)	Occupation (for Individual)								
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> <p>TOTAL This Period (last page this line number only)..... ▶</p>			<p>1000.00</p> <p>1000.00</p>						

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 8

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

Full Name (Last, First, Middle Initial)

A. ASHLEY HINSON FOR CONGRESS

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	2	3		

Mailing Address PO BOX 811

City
MARIONState
IAZip Code
52302Purpose of Disbursement
Political Contribution

Candidate Name

ARENHOLZ, ASHLEY, HINSON, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

State: IA

District: 02

Category/
Type

FEC Identification Number

C C00706267**Transaction ID : 4410**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. COLLINS FOR SENATOR

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	2	3		

Mailing Address PO BOX 1096

City
BANGORState
MEZip Code
04402Purpose of Disbursement
Political Contribution

Candidate Name

COLLINS, SUSAN, M., ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: ME

District:

Category/
Type

FEC Identification Number

C C00314575**Transaction ID : 4411**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JOHN BARRASSO

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	2	3		

Mailing Address PO BOX 52008

City
CASPERState
WYZip Code
82605Purpose of Disbursement
Political Contribution

Candidate Name

BARRASSO, JOHN, A, ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

State: WY

District:

Category/
Type

FEC Identification Number

C C00436386**Transaction ID : 4413**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 8

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC PAC

Full Name (Last, First, Middle Initial)

A. STEVE DAINES FOR MONTANA

Mailing Address PO BOX 1598

City
HELENAState
MTZip Code
59624Purpose of Disbursement
Political Contribution

Candidate Name

DAINES, STEVE, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: MT District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	2	3		

FEC Identification Number

C C00491357**Transaction ID : 4414**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TED BUDD FOR SENATE

Mailing Address PO BOX 97127

City
RALEIGHState
NCZip Code
27624Purpose of Disbursement
Political Contribution

Candidate Name

BUDD, THEODORE, P, ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2028
☒ Primary ☐ General
☐ Other (specify)

State: NC District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	2	3		

FEC Identification Number

C C00614776**Transaction ID : 4412**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2500.00

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

9500.00