

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines National Franchisee Association PAC (NFA-PAC)

ADDRESS (number and street) 1201 Roberts Boulevard, Suite 100 Check if different than previously reported. (ACC) Kennesaw GA 30144

2. FEC IDENTIFICATION NUMBER C00329425 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 10 01 2009 through 10 31 2009

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

Type or Print Name of Treasurer Rick Cowley

Signature of Treasurer Electronically Filed by Rick Cowley Date 11 09 2009

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

Table with 7 columns and 1 row. Office Use Only. FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
National Franchisee Association PAC (NFA-PAC)

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		75239.81
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	133238.49									
(c) Total Receipts (from Line 19)	2507.34	98441.55								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	135745.83	173681.36								
7. Total Disbursements (from Line 31)	7937.96	45873.49								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	127807.87	127807.87								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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

Write or Type Committee Name

National Franchisee Association PAC (NFA-PAC)

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2375.00	96900.00
(ii) Unitemized	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2375.00	97000.00
(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)	2375.00	97000.00
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)	4.23	4.23
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	128.11	1437.32
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))	2507.34	98441.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2507.34	98441.55

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	437.96	3373.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	437.96	3373.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	42500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	7937.96	45873.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7937.96	45873.49

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	2375.00	97000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2375.00	97000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	437.96	3373.49
37. Offsets to Operating Expenditures (from Line 15, page 3)	4.23	4.23
38. Net Operating Expenditures (subtract Line 37 from Line 36)	433.73	3369.26

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

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

FOR LINE NUMBER: PAGE 6 / 12
(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)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Joseph Anghelone
Mailing Address 118 Meirs Rd.
City State Zip Code
Cream Ridge NJ 08514
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GeorgeTowe Group LP Franchisee
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1875.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 9
Transaction ID: 91013.C1233
Amount of Each Receipt this Period
625.00
Receipt

B. Full Name (Last, First, Middle Initial)
Jack George
Mailing Address 6245 Madison Rdg
City State Zip Code
Beaumont TX 77706-5623
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Go-Burgers, LP Franchise Owner
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 9
Transaction ID: 91001.C1230
Amount of Each Receipt this Period
500.00
Receipt

C. Full Name (Last, First, Middle Initial)
William A. Harloe, Jr.
Mailing Address 304 Vale Road
City State Zip Code
Belair MD 21014
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Harloe Management Corp. Franchisee
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1250.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 9
Transaction ID: 91013.C1232
Amount of Each Receipt this Period
625.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 1750.00
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 / 12	
	(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)
National Franchisee Association PAC (NFA-PAC)

A.

Full Name (Last, First, Middle Initial) Ben Jarratt	
Mailing Address P.O. Box 650728	
City Sterling	State VA
Zip Code 20165-0728	
FEC ID number of contributing federal political committee.	C
Name of Employer Northern Virginia Group, Inc.	Occupation Franchisee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1875.00

Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 9
Transaction ID: 91013.C1231
Amount of Each Receipt this Period 625.00
Receipt

SUBTOTAL of Receipts This Page (optional)	625.00
TOTAL This Period (last page this line number only)	2375.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 12	
	(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"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Franchisee Association PAC (NFA-PAC)

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service		Date of Receipt																					
	Mailing Address Service Center		<table border="1"> <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>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		2	8		2	0	0	9														
	City	State	Zip Code	Transaction ID: 91109.C1240																				
	Ogden	UT	84201-	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		C	4.23																					
Name of Employer		Occupation	Offsets to Operating Expenditure																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4.23																						

SUBTOTAL of Receipts This Page (optional)	▶	4.23
TOTAL This Period (last page this line number only)	▶	4.23

**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 9 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 2878 City Omaha State NE Zip Code 68103-2878 Purpose of Disbursement Credit Card Fee 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) ▼	Transaction ID: 91109.E750 Date of Disbursement 10 / 01 / 2009
	Amount of Each Disbursement this Period 14.60 CREDIT CARD FEE

B. Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 2878 City Omaha State NE Zip Code 68103-2878 Purpose of Disbursement Credit Card Fees 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) ▼	Transaction ID: 91109.E751 Date of Disbursement 10 / 05 / 2009
	Amount of Each Disbursement this Period 36.43 CREDIT CARD FEES

C. Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address 1184 Ernest W Barrett Pkwy NW City Kennesaw State GA Zip Code 30144-4534 Purpose of Disbursement Bank Service Charges 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) ▼	Transaction ID: 91109.E748 Date of Disbursement 10 / 02 / 2009
	Amount of Each Disbursement this Period 373.93 BANK SERVICE CHARGES

SUBTOTAL of Disbursements This Page (optional) ▶	424.96
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 10 / 12

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A.

Full Name (Last, First, Middle Initial)

SunTrust Bank

Mailing Address 1184 Ernest W Barrett Pkwy NW

City
Kennesaw

State
GA

Zip Code
30144-4534

Purpose of Disbursement
Analysis Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 91109.E749

Date of Disbursement

10 / 21 / 2009

Amount of Each Disbursement this Period

13.00

ANALYSIS FEE

SUBTOTAL of Disbursements This Page (optional)

13.00

TOTAL This Period (last page this line number only)

437.96

**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)
National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) EVERY REPUBLICAN IS CRUCIAL (ERICPAC) <hr/> Mailing Address 209 Pennsylvania Avenue, SE <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name EVERY REPUBLICAN IS CRUCIAL (ERICPAC) <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: ANNUAL/OTHER	Transaction ID: 91109.E746 Date of Disbursement 10 / 20 / 2009
	Amount of Each Disbursement this Period 2500.00
	Category/ Type DIRECT CONTRIBUTION
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Castle Campaign Fund <hr/> Mailing Address PO Box 133 <hr/> City Wilmington State DE Zip Code 19899-0133 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name MICHAEL N CASTLE <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: DE District: 00	Transaction ID: 91109.E744 Date of Disbursement 10 / 20 / 2009
	Amount of Each Disbursement this Period 2500.00
	Category/ Type DIRECT CONTRIBUTION
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mario Diaz-Balart for Congress <hr/> Mailing Address 8770 SW 72nd St # 422 <hr/> City Miami State FL Zip Code 33173-3512 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name MARIO DIAZ-BALART <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 25	Transaction ID: 91109.E745 Date of Disbursement 10 / 20 / 2009
	Amount of Each Disbursement this Period 1500.00
	Category/ Type DIRECT CONTRIBUTION
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	6500.00
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 12 / 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Franchisee Association PAC (NFA-PAC)

A.

Full Name (Last, First, Middle Initial)
Friends of David Harmer, Inc.

Transaction ID: 91109.E747

Date of Disbursement

Mailing Address 500 Ygnacio Valley Rd
Suite 360

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

City Walnut Creek State CA Zip Code 94596-3763

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
DIRECT CONTRIBUTION

--

Category/
Type

Candidate Name
DAVID JEFFREY HARMER

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

DIRECT CONTRIBUTION

State: CA District: 10

SPECIAL

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

7500.00