

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 12 01 2009 through 12 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 Mr David French
Signature of Treasurer Electronically Filed by Mr David French Date 05 12 2010

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)

A. Form/Schedule : **F3XA**

Amending cash on hand at beginning of reporting period.

Transaction ID :

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

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		15512.36
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	83646.01									
(c) Total Receipts (from Line 19)	10992.00	322570.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	94638.01	338082.36								
7. Total Disbursements (from Line 31)	24565.35	268009.70								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	70072.66	70072.66								
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

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)	10992.00	297878.00
(ii) Unitemized	0.00	4692.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	10992.00	302570.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	20000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	10992.00	322570.00
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 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))	10992.00	322570.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10992.00	322570.00

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.....	65.35	19566.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	65.35	19566.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24500.00	238500.00
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	9943.65
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))..	24565.35	268009.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24565.35	268009.70

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	10992.00	322570.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10992.00	322570.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	65.35	19566.05
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	19566.05

**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 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.	Full Name (Last, First, Middle Initial) Mr. William Edwards, CFE		Date of Receipt
	Mailing Address 253 Chesterfield		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Newport Beach	CA	92660-4223
	FEC ID number of contributing federal political committee. C		Transaction ID: 5615906
Name of Employer Edwards Global Services		Occupation CEO	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"/>
		<input type="text"/> 665.00	<input type="text"/> 200.00

B.	Full Name (Last, First, Middle Initial) Mr. Richard Rennick, CFE		Date of Receipt
	Mailing Address 67633 N. Natoma Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Cathedral City	CA	92234-7407
	FEC ID number of contributing federal political committee. C		Transaction ID: 5615907
Name of Employer Rent Your Boxes		Occupation President & COO	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"/>
		<input type="text"/> 5000.00	<input type="text"/> 1250.00

C.	Full Name (Last, First, Middle Initial) Ms. Barbara Moran		Date of Receipt
	Mailing Address 11859 Swilly Ct.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Orland Park	IL	60467-8514
	FEC ID number of contributing federal political committee. C		Transaction ID: 5615909
Name of Employer Moran Industries, Inc.		Occupation President & CEO	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"/>
		<input type="text"/> 5000.00	<input type="text"/> 1000.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2450.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 19
(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. David R. Haarz

Mailing Address 11730 Plaza America Drive

City Reston State VA Zip Code 20190-4747

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

Name of Employer Harness, Dickey & Pierce, PLC
Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 12 / 11 / 2009
Transaction ID: 5615910
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Michael Pappas

Mailing Address 120 Route 9W

City Haverstraw State NY Zip Code 10927-1400

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

Name of Employer On Target Maintenance
Occupation VP, Franchise Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 12 / 11 / 2009
Transaction ID: 5615911
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Doug Dwyer, CFE

Mailing Address The Dwyer Group
P.O. Box 3146

City Waco State TX Zip Code 76707-0146

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

Name of Employer DreamMaker Bath & Kitchen by Worldwide
Occupation President & CSO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 11 / 2009
Transaction ID: 5615912
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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 9 / 19
	<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. Mark Dawson		Date of Receipt
	Mailing Address P.O. Box 3146 1010 N. University Parks Drive		<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 1 2 / 1 1 / 2 0 0 9
	City	State	Zip Code
	Waco	TX	76707-0146
	FEC ID number of contributing federal political committee. C		Transaction ID: 5615913
Name of Employer Glass Doctor		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 ▼ 365.00	<input type="text"/> 91.25

B.	Full Name (Last, First, Middle Initial) Ms. Mary Ann O'Connell, CFE		Date of Receipt
	Mailing Address 922 Van Ness Court		<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 1 2 / 1 1 / 2 0 0 9
	City	State	Zip Code
	Costa Mesa	CA	92626-2941
	FEC ID number of contributing federal political committee. C		Transaction ID: 5615914
Name of Employer Franwise		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 ▼ 465.00	<input type="text"/> 91.25

C.	Full Name (Last, First, Middle Initial) Mr. Jason E. Tragesser, CFE		Date of Receipt
	Mailing Address 1819 Wazee Street		<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 1 2 / 1 1 / 2 0 0 9
	City	State	Zip Code
	Denver	CO	80202-1781
	FEC ID number of contributing federal political committee. C		Transaction ID: 5615915
Name of Employer PostNet International Franchise Corpor		Occupation Director of Operations	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 ▼ 365.00	<input type="text"/> 91.25

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 273.75
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 19
	<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) Ms. Karen Powell, CFE	Date of Receipt MM / DD / YYYY 12 / 11 / 2009
	Mailing Address 99 Pond View Drive	Transaction ID: 5615916
	City State Zip Code Southbury CT 06488-1129	Amount of Each Receipt this Period 91.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Decor & You, Inc. President - Founder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

B.	Full Name (Last, First, Middle Initial) Mr. Sid Feltenstein	Date of Receipt MM / DD / YYYY 12 / 11 / 2009
	Mailing Address 5328 North Bay Road	Transaction ID: 5615917
	City State Zip Code Miami Beach FL 33140-2041	Amount of Each Receipt this Period 625.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Mrs. Fields Famous Brands Chairman of the Board, Mrs. Fields, In	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2750.00	

C.	Full Name (Last, First, Middle Initial) Ms. Kay Marie Ainsley, CFE	Date of Receipt MM / DD / YYYY 12 / 11 / 2009
	Mailing Address 2163 Ector Place	Transaction ID: 5615918
	City State Zip Code Kennesaw GA 30152-6217	Amount of Each Receipt this Period 916.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Michael H. Seid & Associates Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1632.25
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 19
(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. Dwight Gould

Mailing Address 7220 Trade Street, #300

City State Zip Code
San Diego CA 92121-2334

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

Name of Employer Occupation
Aviatech, LLC CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 9

Transaction ID: 5615919

Amount of Each Receipt this Period
121.00

B. Full Name (Last, First, Middle Initial)
Mr. Ronald A. Feldman, CFE

Mailing Address 1645 Fawn Lane

City State Zip Code
Huntingdon Valley PA 19006-7917

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

Name of Employer Occupation
Siegel Financial Group Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 9

Transaction ID: 5615920

Amount of Each Receipt this Period
515.00

C. Full Name (Last, First, Middle Initial)
Matthew R. Shay

Mailing Address 4441 33rd Street, North

City State Zip Code
Arlington VA 22207-4465

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

Name of Employer Occupation
International Franchise Assn. President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4775.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 9

Transaction ID: 5619727

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1136.00**

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 / 19
(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. John W. Francis

Mailing Address 1637 Highland Parkway

City State Zip Code
St. Paul MN 55116-2163

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

Name of Employer PostNet of MN & WI Occupation Area Franchisee MN & WI

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 9

Transaction ID: 5619742

Amount of Each Receipt this Period
885.00

B.

Full Name (Last, First, Middle Initial)
Ms. Victoria Adams

Mailing Address 1501 K Street, NW Ste 350

City State Zip Code
Washington DC 20005-1412

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

Name of Employer International Franchise Association Occupation Director, Political Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: 5639496

Amount of Each Receipt this Period
365.00

C.

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 FisherZucker LLC Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 0 9

Transaction ID: 5639851

Amount of Each Receipt this Period
3000.00

SUBTOTAL of Receipts This Page (optional)	4250.00
TOTAL This Period (last page this line number only)	10992.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

<p>A. Full Name (Last, First, Middle Initial) Mike Ross For Congress Committee</p> <p>Mailing Address PO Box 360</p> <p>City Prescott State AR Zip Code 71857</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Michael Ross</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5612770 Date of Disbursement 12 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Contribution</p>
<p>B. Full Name (Last, First, Middle Initial) Tom Rooney For Congress</p> <p>Mailing Address 2336 S. East Ocean Blvd. #313</p> <p>City Stuart State FL Zip Code 34996</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Mr. Tom Rooney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 16</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5612771 Date of Disbursement 12 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p>C. Full Name (Last, First, Middle Initial) Friends Of Erik Paulsen</p> <p>Mailing Address PO Box 44369</p> <p>City Eden Prairie State MN Zip Code 55344</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Mr. Erik Paulsen</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5612775 Date of Disbursement 12 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Contribution</p>

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)

<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) Lance For Congress Mailing Address PO Box 225 City Colonia State NJ Zip Code 07067 Purpose of Disbursement Contribution Candidate Name Mr. Leonard Lance Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5612776 Date of Disbursement 12 / 08 / 2009 Amount of Each Disbursement this Period 1000.00 Contribution
B.	Full Name (Last, First, Middle Initial) Freedom & Security PAC Mailing Address 1117 Atwood Court, City Shakopee State MN Zip Code 55379 Purpose of Disbursement 2009 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) ▼	Transaction ID: 5613224 Date of Disbursement 12 / 08 / 2009 Amount of Each Disbursement this Period 1000.00 2009 Contribution
C.	Full Name (Last, First, Middle Initial) ERICPAC Mailing Address 209 Pennsylvania Avenue, SE City Washington State DC Zip Code 20003 Purpose of Disbursement 2009 Contribution Candidate Name ERICPAC 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: 5613232 Date of Disbursement 12 / 08 / 2009 Amount of Each Disbursement this Period 2500.00 2009 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

<p>A. Full Name (Last, First, Middle Initial) Lee Terry For Congress</p> <p>Mailing Address P.O. Box 540098</p> <p>City Omaha State NE Zip Code 68154</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Lee Terry</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5620002</p> <p>Date of Disbursement 12 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Contribution</p>
<p>B. Full Name (Last, First, Middle Initial) Vern Buchanan For Congress</p> <p>Mailing Address P. O. Box 48928</p> <p>City Sarasota State FL Zip Code 34230</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Vernon Buchanan</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 13</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5620003</p> <p>Date of Disbursement 12 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p> <p>Contribution</p>
<p>C. Full Name (Last, First, Middle Initial) Kline For Congress</p> <p>Mailing Address 101 Burnsville Parkway Suite 104</p> <p>City Burnsville State MN Zip Code 55337</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. John Kline</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5620035</p> <p>Date of Disbursement 12 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p> <p>Contribution</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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)

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<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) Kline For Congress <hr/> Mailing Address 101 Burnsville Parkway Suite 104 <hr/> City Burnsville State MN Zip Code 55337 <hr/> Purpose of Disbursement Contribution Candidate Name Rep. John Kline Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5620042 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 9	Amount of Each Disbursement this Period 5000.00 <hr/> Contribution
B.	Full Name (Last, First, Middle Initial) Friends Of Blanche Lincoln <hr/> Mailing Address PO Box 3197 <hr/> City Little Rock State AR Zip Code 72203 <hr/> Purpose of Disbursement Contribution Candidate Name Blanche Lincoln Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5620051 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 9	Amount of Each Disbursement this Period 1000.00 <hr/> Contribution
C.	Full Name (Last, First, Middle Initial) Ryan For Congress <hr/> Mailing Address P.O. Box 1919 <hr/> City Janesville State WI Zip Code 53547 <hr/> Purpose of Disbursement Contribution Candidate Name Paul Ryan Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5624951 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period 1000.00 <hr/> Contribution

SUBTOTAL of Disbursements This Page (optional)	7000.00
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

<p>A. Full Name (Last, First, Middle Initial) Pat Meehan For Congress</p> <p>Mailing Address 5035 Township Line Road PO Box 308</p> <p>City Drexel Hill State PA Zip Code 19026</p> <p>Purpose of Disbursement Contribution Candidate Name Mr. Patrick Meehan Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5624952 Date of Disbursement 12 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p>B. Full Name (Last, First, Middle Initial) Duncan D. Hunter For Congress</p> <p>Mailing Address 9340 Fuerte Drive Suite 302</p> <p>City La Mesa State CA Zip Code 91941</p> <p>Purpose of Disbursement Contribution Candidate Name Rep. Duncan Hunter Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 52</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5624953 Date of Disbursement 12 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p>C. Full Name (Last, First, Middle Initial) Boyd For Congress</p> <p>Mailing Address P.O. Box 15703</p> <p>City Tallahassee State FL Zip Code 32317</p> <p>Purpose of Disbursement Contribution Candidate Name F. Allen Boyd Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5624954 Date of Disbursement 12 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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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

A. Full Name (Last, First, Middle Initial) Portman For Senate Committee <hr/> Mailing Address 8331 Little Harbor Drive <hr/> City Cincinnati State OH Zip Code 45244 <hr/> Purpose of Disbursement Void - Portman For Senate Committee (2/24/09, check #1531) Candidate Name Rob Portman <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5624985 Date of Disbursement 12 / 17 / 2009 <hr/> Amount of Each Disbursement this Period -5000.00 <hr/> Void - Portman For Senate Committee (2/24/09, check #1531)
	Category/Type 011
B. Full Name (Last, First, Middle Initial) Portman For Senate Committee <hr/> Mailing Address 8331 Little Harbor Drive <hr/> City Cincinnati State OH Zip Code 45244 <hr/> Purpose of Disbursement Contribution Candidate Name Rob Portman <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5624986 Date of Disbursement 12 / 17 / 2009 <hr/> Amount of Each Disbursement this Period 5000.00 <hr/> Contribution
	Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

24500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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

Mailing Address 7810 Old Branch Avenue

City State Zip Code
Clinton MD 20735

Purpose of Disbursement
Bank Fees

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 5689617

Date of Disbursement

12 / 01 / 2009

Amount of Each Disbursement this Period

57.40

Bank Fees

SUBTOTAL of Disbursements This Page (optional)

57.40

TOTAL This Period (last page this line number only)

57.40