

**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 20 OF 29
	<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. Steve Greenbaum CFE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1819 Wazee Street  
 City State Zip Code  
 Denver CO 80202-1781  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PostNet International Franchise Corp. CEO  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 4400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2015  
**Transaction ID : 10479327**  
 Amount of Each Receipt this Period  
 4400.00  
 In-Kind: Auction Item

**B. Mr. Lawrence Doc Cohen CFE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9900 Kleppel Road  
 City State Zip Code  
 Tomball TX 77375-3202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DOC & Associates, Ltd. President  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2015  
**Transaction ID : 10479598**  
 Amount of Each Receipt this Period  
 5000.00  
 In-Kind: Auction Item

**C. Colette Hofelich**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1722 Gagel Avenue  
 City State Zip Code  
 Louisville KY 40216-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Home Instead Senior Care of Louisville Franchise Owner  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 03 / 2015  
**Transaction ID : 10500032**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	