

**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="2016"/>		<input type="text" value="530550.94"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="486265.82"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="42762.50"/>	<input type="text" value="62552.50"/>
(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="529028.32"/>	<input type="text" value="593103.44"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="59080.40"/>	<input type="text" value="123155.52"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="469947.92"/>	<input type="text" value="469947.92"/>
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. 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).....	32345.00	39535.00
(ii) Unitemized	417.50	517.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	32762.50	40052.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	22500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	42762.50	62552.50
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))..... ▶	42762.50	62552.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	42762.50	62552.50

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	2580.40	8655.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2580.40	8655.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	56500.00	114500.00
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	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) 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)) ..	59080.40	123155.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	59080.40	123155.52

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)	42762.50	62552.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	42762.50	62552.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2580.40	8655.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2580.40	8655.52

**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 26
(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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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. 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 ▼ 2500.00

Date of Receipt 03 / 02 / 2016
Transaction ID : 11002154
Amount of Each Receipt this Period 2500.00
 Memo Item

B. Ms. Debra Shwetz CFE
Full Name (Last, First, Middle Initial)
Mailing Address 1411 Foothills Village Dr.
City Henderson State NV Zip Code 89012-7264
FEC ID number of contributing federal political committee. **C**
Name of Employer Nothing Bundt Franchising, Inc. Occupation CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 01 / 2016
Transaction ID : 11016739
Amount of Each Receipt this Period 2500.00
 Memo Item

C. Ms. Nancy Oppenheimer-Marks
Full Name (Last, First, Middle Initial)
Mailing Address 11909 Preston Rd Ste 212
City Dallas State TX Zip Code 75230-6109
FEC ID number of contributing federal political committee. **C**
Name of Employer Home Instead Senior Care of Dallas, TX Occupation Franchise Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 365.00

Date of Receipt 03 / 07 / 2016
Transaction ID : 11054726
Amount of Each Receipt this Period 365.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5365.00
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 7 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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. Mr. Roger Boles
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 Green hills Drive
 Suite 5
 City Verona State VA Zip Code 24482-2659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Home Instead Senior Care of Verona, VA Occupation Co-Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2016
Transaction ID : 11054731
 Amount of Each Receipt this Period
 365.00
 Memo Item

B. Mr. Mark Liston CFE
 Full Name (Last, First, Middle Initial)
 Mailing Address 506 Sienna Bend Trail
 City Mc Gregor State TX Zip Code 76657-3809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Glass Doctor Occupation VP, Sales & Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2016
Transaction ID : 11054733
 Amount of Each Receipt this Period
 1250.00
 Memo Item

C. Mr. Eric Stites CFE
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 Mill Pond Road
 City Kittery State ME Zip Code 03904-1113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Franchise Business Review Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2016
Transaction ID : 11054734
 Amount of Each Receipt this Period
 1250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2865.00
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 8 OF 26
(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. Mr. William Edwards CFE
Full Name (Last, First, Middle Initial)
Mailing Address 504 Cancha
City Newport Beach State CA Zip Code 92660-3508
FEC ID number of contributing federal political committee. **C**
Name of Employer Edwards Global Services Occupation CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 25 / 2016
Transaction ID : 11054735
Amount of Each Receipt this Period 1250.00
 Memo Item

B. Daniel Mormino
Full Name (Last, First, Middle Initial)
Mailing Address 6263 North Scottsdale Road, Suite
City Scottsdale State AZ Zip Code 85250-5411
FEC ID number of contributing federal political committee. **C**
Name of Employer Infiniti HR Occupation Division Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 25 / 2016
Transaction ID : 11054736
Amount of Each Receipt this Period 1250.00
 Memo Item

C. Mr. Lorne Fisher CFE
Full Name (Last, First, Middle Initial)
Mailing Address 10401 Golden Eagle Court
City Plantation State FL Zip Code 33324-2156
FEC ID number of contributing federal political committee. **C**
Name of Employer Fish Consulting Occupation CEO/Managing Partner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 25 / 2016
Transaction ID : 11054737
Amount of Each Receipt this Period 1250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3750.00
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 OF 26		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

A. Mr. R. Earl Johnson CFE
 Full Name (Last, First, Middle Initial)
 Mailing Address 10702 Green Mount Road
 City State Zip Code
 Henrico VA 23238-3511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Rainbow Station, Inc. VP, Real Estate/Sales
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2016
Transaction ID : 11054738
 Amount of Each Receipt this Period
 1250.00
 Memo Item

B. Ms. Gail W Johnson CFE
 Full Name (Last, First, Middle Initial)
 Mailing Address 10702 Green Mount Road
 City State Zip Code
 Henrico VA 23238-3511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Rainbow Station, Inc. President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2016
Transaction ID : 11054739
 Amount of Each Receipt this Period
 1250.00
 Memo Item

C. Mr. Tom Epstein CFE
 Full Name (Last, First, Middle Initial)
 Mailing Address 8027 Canyon Lic Circle
 City State Zip Code
 Orlando FL 32835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Franchise Payments Network CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2016
Transaction ID : 11054740
 Amount of Each Receipt this Period
 1250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3750.00
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 10 OF 26
	<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. Ms. Melanie Bergeron CFE
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Skipper Ln
 City Okemos State MI Zip Code 48864-3195
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Two Men And A Truck/International Occupation Chairwoman
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1250.00

Date of Receipt 03 / 25 / 2016
Transaction ID : 11054741
 Amount of Each Receipt this Period 1250.00
 Memo Item

B. Mr. Mike Rotondo
 Full Name (Last, First, Middle Initial)
 Mailing Address 1117 Perimeter Center West Suite W200
 City Atlanta State GA Zip Code 30338-5465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tropical Smoothie Cafe Occupation VP of Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1250.00

Date of Receipt 03 / 25 / 2016
Transaction ID : 11054742
 Amount of Each Receipt this Period 1250.00
 Memo Item

C. Mr. Robert Stidham
 Full Name (Last, First, Middle Initial)
 Mailing Address 2603 Crane Court
 City Naperville State IL Zip Code 60564-5904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Franchise Dynamics, LLC Occupation President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1250.00

Date of Receipt 03 / 25 / 2016
Transaction ID : 11054753
 Amount of Each Receipt this Period 1250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3750.00
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 11 OF 26
(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

Full Name (Last, First, Middle Initial)
A. Mr. Terry Powell CFE

Mailing Address 99 Pond View Drive

City Southbury State CT Zip Code 06488-1129

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

Name of Employer FranchisEsource Brands International Occupation CEO - Founder

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2016
Transaction ID : 11054754

Amount of Each Receipt this Period
 1250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Ms. Karen Powell CFE

Mailing Address 99 Pond View Drive

City Southbury State CT Zip Code 06488-1129

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

Name of Employer FranchisEsource Brands International Occupation President - Founder

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2016
Transaction ID : 11054755

Amount of Each Receipt this Period
 1250.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Ms. Barbara Moran-Goodrich CFE

Mailing Address 14110 S. 85th Ave.

City Orland Park State IL Zip Code 60462-4283

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

Name of Employer Moran Family of Brands Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2016
Transaction ID : 11054756

Amount of Each Receipt this Period
 1250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3750.00

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 12 OF 26
	<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

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

A. Ms. Catherine Monson CFE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5305 Corinthian Bay Dr
 City State Zip Code
 Plano TX 75093-4123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FASTSIGNS International CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2016
Transaction ID : 11054757
 Amount of Each Receipt this Period
 1250.00
 Memo Item

B. Ms. Joyce G. Mazero
 Full Name (Last, First, Middle Initial)
 Mailing Address 471 Oakwood Trail
 City State Zip Code
 Fairview TX 75069-8724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Gardere Wynne Sewell LLP Partner
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2016
Transaction ID : 11054758
 Amount of Each Receipt this Period
 1250.00
 Memo Item

C. Mr. Gary Goerke CFE
 Full Name (Last, First, Middle Initial)
 Mailing Address 6012 Greatwater Drive
 City State Zip Code
 Windermere FL 34786-5600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Clarity Voice President/CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2016
Transaction ID : 11054759
 Amount of Each Receipt this Period
 1250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3750.00
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 13 OF 26
	<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. Matt Haller
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 K Street
 Suite 700
 City Washington State DC Zip Code 20006-1110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer International Franchise Association Occupation Sr. Vice President, Public Affairs
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date 1250.00

Date of Receipt 03 / 25 / 2016
Transaction ID : 11054760
 Amount of Each Receipt this Period 1250.00
 Memo Item

B. Mr. John Hogan
 Full Name (Last, First, Middle Initial)
 Mailing Address 13323 California Street
 City Omaha State NE Zip Code 68154-5240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Home Instead Senior Care Occupation Chief Operating Officer
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date 250.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 11071003
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Mr. Jeff Bevis CFE
 Full Name (Last, First, Middle Initial)
 Mailing Address 4573 W. State Route 73
 City Wilmington State OH Zip Code 45177-9299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FirstLight HomeCare Occupation Consultant
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date 250.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 11071005
 Amount of Each Receipt this Period 250.00
 Memo Item

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 14 OF 26
(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

Full Name (Last, First, Middle Initial)
A. Mr. Azim Saju

Mailing Address 507 East Fort King St

City State Zip Code
 Ocala FL 34471-2237

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

Name of Employer Occupation
 HDG Hotels Vice President of Operations & General

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 11071006

Amount of Each Receipt this Period
 250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Ms. Nancy Bigley CFE

Mailing Address 3719 Ponderosa Way, E.

City State Zip Code
 Palm Springs CA 92264-3539

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

Name of Employer Occupation
 Bottle & Bottega Senior Director of Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 11071007

Amount of Each Receipt this Period
 250.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Mr. John W Francis

Mailing Address 2280 Rivewood Place

City State Zip Code
 Saint Paul MN 55104-5646

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

Name of Employer Occupation
 Sport Clips, Inc. Area Franchisee MN & WI

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 11071008

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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 15 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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. Mrs. Tracey Gibson
 Full Name (Last, First, Middle Initial)
 Mailing Address 117 N. Center Street
 City Statesville State NC Zip Code 28677-5299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Home Instead Senior Care of Statesvill Occupation Franchise Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 03 / 28 / 2016
Transaction ID : 11093182
 Amount of Each Receipt this Period 365.00
 Memo Item

B. 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 ▼ 2500.00

Date of Receipt 03 / 08 / 2016
Transaction ID : 11109202
 Amount of Each Receipt this Period 2500.00
 Memo Item
 In-Kind: Auction Item

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
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2865.00
TOTAL This Period (last page this line number only).....	32345.00

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

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

FOR LINE NUMBER: PAGE 16 OF 26
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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. Wendy's International PAC
Full Name (Last, First, Middle Initial)
Mailing Address 4288 West Dublin Granville Road
City Dublin State OH Zip Code 43017
FEC ID number of contributing federal political committee. **C** C00369090
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 28 / 2016
Transaction ID : 11093183
Amount of Each Receipt this Period 5000.00
 Memo Item

B. DLA Piper PAC
Full Name (Last, First, Middle Initial)
Mailing Address 500 8th Street, NW
City Washington State DC Zip Code 20004
FEC ID number of contributing federal political committee. **C** C00151340
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 29 / 2016
Transaction ID : 11093184
Amount of Each Receipt this Period 5000.00
 Memo Item

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
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	10000.00

**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. 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 : 11093188

Amount of Each Disbursement this Period

Memo Item
Credit Card Transaction Fees

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

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11109204

Amount of Each Disbursement this Period

Memo Item
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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo 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 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. Tim Scott For Senate

Mailing Address 1405 Ashley River Road

City Charleston State SC Zip Code 29407

Purpose of Disbursement Contribution

011

Candidate Name

Sen. Tim Scott

Category/Type

Office Sought: House Senate President
State: SC District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2016

Transaction ID : 11016696

Amount of Each Disbursement this Period

2500.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Scott Peters For Congress

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement Contribution

011

Candidate Name

Rep. Scott Peters

Category/Type

Office Sought: House Senate President
State: CA District: 52

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2016

Transaction ID : 11016699

Amount of Each Disbursement this Period

1000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. The Richard Burr Committee

Mailing Address P. O. Box 5928

City Winston-Salem State NC Zip Code 27113

Purpose of Disbursement Contribution

011

Candidate Name

Richard Burr

Category/Type

Office Sought: House Senate President
State: NC District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2016

Transaction ID : 11016701

Amount of Each Disbursement this Period

4000.00

Memo Item Contribution

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

7500.00

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 Jeb Hensarling

Mailing Address PO Box 820504

City Dallas State TX Zip Code 75382

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Rep. Jeb Hensarling

Office Sought: House
 Senate
 President
State: TX District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11016702

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Project West PAC

Mailing Address 9227 East Lincoln Avenue
#200-435

City Lone Tree State CO Zip Code 80124

Purpose of Disbursement
2016 Contribution

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11016703

Amount of Each Disbursement this Period

Memo Item
2016 Contribution

Full Name (Last, First, Middle Initial)

C. Rodney For Congress

Mailing Address PO Box 344

City Taylorville State IL Zip Code 62568

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Mr. Rodney Davis

Office Sought: House
 Senate
 President
State: IL District: 13

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11016718

Amount of Each Disbursement this Period

Memo Item
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 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. Ryan For Congress

Mailing Address P.O. Box 1919

City State Zip Code
Janesville WI 53547

Purpose of Disbursement
Contribution

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2016

Transaction ID : 11024525

Amount of Each Disbursement this Period

5000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Ryan For Congress

Mailing Address P.O. Box 1919

City State Zip Code
Janesville WI 53547

Purpose of Disbursement
Contribution

011

Candidate Name

Paul Ryan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2016

Transaction ID : 11024526

Amount of Each Disbursement this Period

5000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Prosperity PAC

Mailing Address 1006 Pendleton Street

City State Zip Code
Alexandria VA 22314

Purpose of Disbursement
2016 Contribution

011

Candidate Name

Prosperity PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2016

Transaction ID : 11024527

Amount of Each Disbursement this Period

5000.00

Memo Item
2016 Contribution

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

15000.00

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. Virginia Foxx For Congress

Mailing Address PO Box 2767

City Boone State NC Zip Code 28607

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Rep. Virginia Foxx

Office Sought: House
 Senate
 President
State: NC District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11024529

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Zinke For Congress

Mailing Address PO Box 1596

City Helena State MT Zip Code 59624

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Ryan Zinke

Office Sought: House
 Senate
 President
State: MT District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11024530

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Dold For Congress

Mailing Address PO Box 8145

City Northfield State IL Zip Code 60093

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Mr. Robert Dold

Office Sought: House
 Senate
 President
State: IL District: 10

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11024531

Amount of Each Disbursement this Period

Memo Item
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 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. David Rouzer For Congress

Mailing Address PO Box 2267

City Smithfield State NC Zip Code 27577

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Rep. David Rouzer

Office Sought: House
 Senate
 President
State: NC District: 07

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11054056

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Brad Ashford For Congress

Mailing Address PO Box 24023

City Omaha State NE Zip Code 68124

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Rep. Brad Ashford

Office Sought: House
 Senate
 President
State: NE District: 02

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11054070

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Families For James Lankford

Mailing Address PO Box 1639

City Bethany State OK Zip Code 73008

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Sen. James Lankford

Office Sought: House
 Senate
 President
State: OK District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11054078

Amount of Each Disbursement this Period

Memo Item
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 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. Hudson For Congress

Mailing Address PO Box 5053

City State Zip Code
Concord NC 28027

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Mr. Richard Hudson

Office Sought: House
 Senate
 President
State: NC District: 08

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2016

Transaction ID : 11054080

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Pat Meehan For Congress

Mailing Address 5035 Township Line Road
PO Box 308

City State Zip Code
Drexel Hill PA 19026

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Mr. Patrick Meehan

Office Sought: House
 Senate
 President
State: PA District: 07

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2016

Transaction ID : 11054082

Amount of Each Disbursement this Period

4000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Coffman For Congress Inc.

Mailing Address 9249 South Broadway Blvd.
#200-501

City State Zip Code
Highlands Ranch CO 80129

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Mr. Mike Coffman

Office Sought: House
 Senate
 President
State: CO District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : 11054769

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

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

Full Name (Last, First, Middle Initial)

A. Collins For Congress

Mailing Address PO Box 1295

City Gainesville State GA Zip Code 30503

Purpose of Disbursement
Contribution

Candidate Name

Mr. Douglas Collins

Office Sought: House
 Senate
 President
State: GA District: 09

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2016

Transaction ID : 11054770

Amount of Each Disbursement this Period

1000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Tim Murphy For Congress

Mailing Address PO Box 24551

City Pittsburgh State PA Zip Code 15234

Purpose of Disbursement
Contribution

Candidate Name

Rep. Tim Murphy

Office Sought: House
 Senate
 President
State: PA District: 18

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2016

Transaction ID : 11058766

Amount of Each Disbursement this Period

1000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. John Carter For Congress

Mailing Address 1717 North Ih-35
Suite 304

City Round Rock State TX Zip Code 78664

Purpose of Disbursement
Contribution

Candidate Name

Rep. John Carter

Office Sought: House
 Senate
 President
State: TX District: 31

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2016

Transaction ID : 11058767

Amount of Each Disbursement this Period

1000.00

Memo Item Contribution

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

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

3000.00

**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

Full Name (Last, First, Middle Initial)

A. Steve Knight For Congress

Mailing Address PO Box 984

City Willows State CA Zip Code 95988

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Steve Knight

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 25

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : 11058768

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Georgians For Isakson

Mailing Address 6000 Lake Forest Drive #102

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Contribution

011

Candidate Name

Johnny Isakson

Category/
Type

Office Sought: House
 Senate
 President
State: GA District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 29 / 2016

Transaction ID : 11059347

Amount of Each Disbursement this Period

500.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Georgians For Isakson

Mailing Address 6000 Lake Forest Drive #102

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Contribution

011

Candidate Name

Johnny Isakson

Category/
Type

Office Sought: House
 Senate
 President
State: GA District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 29 / 2016

Transaction ID : 11059348

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

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

2500.00

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. Lisa Murkowski For U.S. Senate

Mailing Address PO Box 100847

City Anchorage State AK Zip Code 99510

Purpose of Disbursement
Contribution

Candidate Name

Lisa Murkowski

Office Sought: House
 Senate
 President

State: AK District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		3	0		2	0	1	6		

Transaction ID : 11060017

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Memo Item Contribution

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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Memo Item

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

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

2	5	0	0	.	0	0
---	---	---	---	---	---	---

5	6	5	0	0	.	0	0
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