

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

ADDRESS (number and street) 1900 K Street NW
Suite 700
Washington DC 20006
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C 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 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 05 / 01 / 2014 through 05 / 31 / 2014

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. Robert Cresanti

Signature of Treasurer Mr. Robert Cresanti [Electronically Filed] Date 10 / 19 / 2015

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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="2014"/>	<input type="text" value="275757.64"/>	<input type="text" value="275757.64"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="135038.99"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="11860.93"/>	<input type="text" value="118310.67"/>
(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="146899.92"/>	<input type="text" value="394068.31"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="18433.25"/>	<input type="text" value="265601.64"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="128466.67"/>	<input type="text" value="128466.67"/>
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).....	11766.64	113868.20
(ii) Unitemized	94.29	1442.47
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11860.93	115310.67
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	11860.93	116310.67
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	2000.00
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))..... ▶	11860.93	118310.67
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11860.93	118310.67

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1433.25	22101.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1433.25	22101.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17000.00	233500.00
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	10000.00
(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	10000.00
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)) ..	18433.25	265601.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18433.25	265601.64

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	11860.93	116310.67
34. Total Contribution Refunds (from Line 28(d))	0.00	10000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11860.93	106310.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1433.25	22101.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1433.25	22101.64

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA

Transaction ID :

Corrects cash on hand.

Form/Schedule:

Transaction ID:

**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 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. 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)
 Aggregate Year-to-Date **2083.30**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2014
Transaction ID : 4282141
 Amount of Each Receipt this Period
416.66

B. Mr. Bill Grubb
 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 SVP Finance and Administration
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2083.30**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2014
Transaction ID : 4282546
 Amount of Each Receipt this Period
416.66

C. Mr. Sam G. Ballas CFE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2406 Wellsburg Ct
 City Clemmons State NC Zip Code 27012-9728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer East Coast Wings & Grill Occupation President/CEO
 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
05 / 01 / 2014
Transaction ID : 9534887
 Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....	5833.32
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 8 OF 14
	<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. Mr. Seth Goldstein
Full Name (Last, First, Middle Initial)

Mailing Address 5 Indian Valley Rd.

City State Zip Code
Setauket NY 11733-4037

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

Name of Employer Occupation
Dunkin' Donuts/Baskin Robbins of Baysh Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
05 / 22 / 2014

Transaction ID : 9557053

Amount of Each Receipt this Period
100.00

B. Mr. Amit Y. Kleinberger CFE
Full Name (Last, First, Middle Initial)

Mailing Address 17555 Ventura Boulevard, Suite 200

City State Zip Code
Encino CA 91316-3890

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

Name of Employer Occupation
Menchies Frozen Yogurt Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt
05 / 22 / 2014

Transaction ID : 9557054

Amount of Each Receipt this Period
5000.00

C. Erica Fitzsimmons
Full Name (Last, First, Middle Initial)

Mailing Address 1501 K Street, NW, Suite 350

City State Zip Code
Washington DC 20005-1412

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

Name of Employer Occupation
International Franchise Association Director, Political Affairs and Grassr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2083.30**

Date of Receipt
05 / 31 / 2014

Transaction ID : PR385120510531

Amount of Each Receipt this Period
416.66

P/R Deduction (\$108.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	5516.66
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 9 OF 14
(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)
Dean Heyl

Mailing Address 1501 K Street, NW Suite 350

City Washington State DC Zip Code 20009

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

Name of Employer International Franchise Association Occupation Senior Director, State Government Affa

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2083.30

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2014

Transaction ID : PR396117910531

Amount of Each Receipt this Period
 416.66

P/R Deduction (\$321.43 Bi-Weekly)

B. 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
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	416.66
TOTAL This Period (last page this line number only).....▶	11766.64

**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

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	01	/	2014

Transaction ID : 9577999

Amount of Each Disbursement this Period

1188.02

Credit Card Transaction Fees

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Transaction Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	05	/	2014

Transaction ID : 9578001

Amount of Each Disbursement this Period

229.23

Credit Card Transaction Fees

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

1417.25

1417.25

**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. Walorski For Congress Inc

Mailing Address PO Box 954

City State Zip Code
Mishawaka IN 46546

Purpose of Disbursement
Contribution

Candidate Name

Jackie Walorski

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
05 / 06 / 2014

Transaction ID : 9527238

Amount of Each Disbursement this Period
2000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Mark Warner

Mailing Address 1029 North Royal Street 2nd Fl

City State Zip Code
Alexandria VA 22314

Purpose of Disbursement
Contribution

Candidate Name

Mr. Mark Warner

Office Sought: House
 Senate
 President
State: VA District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
05 / 14 / 2014

Transaction ID : 9537370

Amount of Each Disbursement this Period
2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Stivers For Congress

Mailing Address 81 S Fifth Street

City State Zip Code
Columbus OH 43215

Purpose of Disbursement
Contribution

Candidate Name

Mr. Steve Stivers

Office Sought: House
 Senate
 President
State: OH District: 15

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
05 / 20 / 2014

Transaction ID : 9548706

Amount of Each Disbursement this Period
2500.00

Contribution

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

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

6500.00

**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. Friends Of Joe Heck

Mailing Address PO Box 750114

City Las Vegas State NV Zip Code 89136

Purpose of Disbursement Contribution

011

Candidate Name

Mr. Joe Heck

Category/Type

Office Sought: House Senate President
State: NV District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2014

Transaction ID : 9556971

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Southerland For Congress

Mailing Address PO Box 1692

City Lynn Haven State FL Zip Code 32444

Purpose of Disbursement Contribution

011

Candidate Name

Mr. William Southerland

Category/Type

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2014

Transaction ID : 9556972

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Chuck Fleischmann For Congress Committee, Inc.

Mailing Address P.O. Box 11091

City Chattanooga State TN Zip Code 37401

Purpose of Disbursement Contribution

011

Candidate Name

Rep. Charles Fleischmann

Category/Type

Office Sought: House Senate President
State: TN District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2014

Transaction ID : 9556974

Amount of Each Disbursement this Period

1000.00

Contribution

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

3000.00

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. 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: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2014

Transaction ID : 9556975

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Volunteers For Shimkus

Mailing Address PO Box 661

City Collinsville State IL Zip Code 62234

Purpose of Disbursement
Contribution

Candidate Name

Rep. John Shimkus

Office Sought: House
 Senate
 President
State: IL District: 19

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2014

Transaction ID : 9556976

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Collins For Senator

Mailing Address PO Box 1096

City Bangor State ME Zip Code 04402

Purpose of Disbursement
Contribution

Candidate Name

Sen. Susan Collins

Office Sought: House
 Senate
 President
State: ME District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2014

Transaction ID : 9556979

Amount of Each Disbursement this Period

500.00

Contribution

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

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

5500.00

**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. Collins For Senator

Mailing Address PO Box 1096

City Bangor State ME Zip Code 04402

Purpose of Disbursement
Contribution

011
Category/ Type

Candidate Name
Sen. Susan Collins

Office Sought: House
 Senate
 President
State: ME District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2014

Transaction ID : 9556980

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

B.

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

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

Amount of Each Disbursement this Period

--

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

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

Amount of Each Disbursement this Period

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

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

2000.00

17000.00
