

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
 Check if different than previously reported. (ACC) **Washington DC 20006**

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 / / 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 / / through / /

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 / /

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="2016"/>		<input type="text" value="530550.94"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="424867.22"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="5127.78"/>	<input type="text" value="220168.55"/>
(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="429995.00"/>	<input type="text" value="750719.49"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="41320.91"/>	<input type="text" value="362045.40"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="388674.09"/>	<input type="text" value="388674.09"/>
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).....	5127.78	195994.78
(ii) Unitemized	0.00	1673.77
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5127.78	197668.55
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	22500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5127.78	220168.55
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))..... ▶	5127.78	220168.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5127.78	220168.55

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	1320.91	49545.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1320.91	49545.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	40000.00	312500.00
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)) ..	41320.91	362045.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	41320.91	362045.40

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)	5127.78	220168.55
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5127.78	220168.55
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1320.91	49545.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1320.91	49545.40

**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 6 OF 15
	<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

Full Name (Last, First, Middle Initial)
A. Mr. Adam Robinson

Mailing Address 303 E. Wacker Drive, Suite 500

City	State	Zip Code
Chicago	IL	60601-5217

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

Name of Employer	Occupation
Hireology, Inc.	CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1666.66

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	31	/	2016

Transaction ID : 11421076

Amount of Each Receipt this Period
1666.66

Memo Item

Full Name (Last, First, Middle Initial)
B. Ms. Edith Wiseman CFE

Mailing Address 4515 Exeter St.

City	State	Zip Code
Annandale	VA	22003-5802

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

Name of Employer	Occupation
FRANdata	Vice President, Client Solutions

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	31	/	2016

Transaction ID : 11421077

Amount of Each Receipt this Period
2500.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Ms. Mary Alexander

Mailing Address 13323 California Street

City	State	Zip Code
Omaha	NE	68154-5240

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

Name of Employer	Occupation
Home Instead Senior Care	Director of Business Relationships

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	31	/	2016

Transaction ID : 11421078

Amount of Each Receipt this Period
365.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	4531.66
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 7 OF 15
(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. Mr. Kevin Serafino
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Florida Avenue NE #501
 City Washington State DC Zip Code 20002-3280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer International Franchise Association Occupation Manager, Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 223.08

Date of Receipt 08 / 31 / 2016
Transaction ID : 3829768
 Amount of Each Receipt this Period 40.56
 Memo Item

B. Erica Fitzsimmons
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 K Street NW Suite 700
 City Washington State DC Zip Code 20006-1135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer International Franchise Association Occupation Director, Political Affairs and Grass
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3055.58

Date of Receipt 08 / 31 / 2016
Transaction ID : 3851205
 Amount of Each Receipt this Period 555.56
 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).....▶	596.12
TOTAL This Period (last page this line number only).....▶	5127.78

**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 : 11456038

Amount of Each Disbursement this Period

Memo Item
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

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11456044

Amount of Each Disbursement this Period

Memo Item
Credit Card Transaction Fees

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. Jaime Herrera For Congress

Mailing Address PO Box 1614

City Ridgefield State WA Zip Code 98642

Purpose of Disbursement
Contribution

011

Candidate Name

Jaime Herrera

Category/
Type

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 02 / 2016

Transaction ID : 11365258

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Walberg For Congress

Mailing Address 6769 Teachout Road

City Tipton State MI Zip Code 49287

Purpose of Disbursement
Contribution

011

Candidate Name

Timothy Walberg

Category/
Type

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2016

Transaction ID : 11368519

Amount of Each Disbursement this Period

5000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Mike Crapo For Us Senate

Mailing Address P.O. Box 1948

City Boise State ID Zip Code 83701

Purpose of Disbursement
Contribution

011

Candidate Name

Sen. Mike Crapo

Category/
Type

Office Sought: House
 Senate
 President
State: ID District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2016

Transaction ID : 11368520

Amount of Each Disbursement this Period

5000.00

Memo Item
Contribution

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

11000.00

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. Correa for Congress

Mailing Address 220 Eye Street NE
Suite 110

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name

Correa for Congress

Office Sought: House
 Senate
 President
State: CA District: 46

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 11368521

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Andy Harris For Congress

Mailing Address PO Box 1527

City Annapolis State MD Zip Code 21404

Purpose of Disbursement
Contribution

Candidate Name

Mr. Andrew Harris

Office Sought: House
 Senate
 President
State: MD District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 11368522

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Friends For Chris Stewart, Inc.

Mailing Address PO Box 22

City Farmington State UT Zip Code 84025

Purpose of Disbursement
Contribution

Candidate Name

Rep. Chris Stewart

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 11368523

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. Loudermilk For Congress

Mailing Address PO Box 447

City Cassville State GA Zip Code 30123

Purpose of Disbursement Contribution

Category/Type

Candidate Name
Rep. Barry Loudermilk

Office Sought: House Senate President
State: GA District: 11

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11368524

Amount of Each Disbursement this Period

Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Glenn Thompson

Mailing Address 198 Park Road

City Howard State PA Zip Code 16841

Purpose of Disbursement Contribution

Category/Type

Candidate Name
Mr. Glenn Thompson

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

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11368525

Amount of Each Disbursement this Period

Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Friends Of Joe Heck

Mailing Address PO Box 753908

City Las Vegas State NV Zip Code 89136

Purpose of Disbursement Contribution

Category/Type

Candidate Name
Joe Heck

Office Sought: House Senate President
State: NV District:

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11368526

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. Jim Jordan for Congress

Mailing Address 1709 State Route 560 South

City Urbana State OH Zip Code 43078

Purpose of Disbursement
Contribution

011

Candidate Name

James Jordan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 04

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2016

Transaction ID : 11368527

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Reclaim America PAC

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
2016 Contribution

011

Candidate Name

Reclaim America PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2016

Transaction ID : 11368528

Amount of Each Disbursement this Period

2500.00

Memo Item
2016 Contribution

Full Name (Last, First, Middle Initial)

C. Peterson For Congress

Mailing Address 26192 Floyd Lake Point Road

City Detroit Lakes State MN Zip Code 56501

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Collin Peterson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MN District: 07

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2016

Transaction ID : 11368529

Amount of Each Disbursement this Period

2500.00

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. Ron Johnson For Senate Inc		Date of Disbursement MM / DD / YYYY 08 / 03 / 2016
Mailing Address 601 Oregon Street Suite A		Transaction ID : 11368530
City Oshkosh	State WI	
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1500.00
Candidate Name Mr. Ronald Johnson	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item Contribution
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: WI District:	

Full Name (Last, First, Middle Initial) B. Rick Kozell For Congress		Date of Disbursement MM / DD / YYYY 08 / 17 / 2016
Mailing Address PO Box 2172		Transaction ID : 11401053
City Jupiter	State FL	
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name Rick Kozell	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item Contribution
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: FL District: 18	

Full Name (Last, First, Middle Initial) C. Rick Kozell For Congress		Date of Disbursement MM / DD / YYYY 08 / 17 / 2016
Mailing Address PO Box 2172		Transaction ID : 11401225
City Jupiter	State FL	
Purpose of Disbursement Void - Rick Kozell For Congress - Disbursement originally reported on July 20, 2016 monthly report	Category/ Type 011	Amount of Each Disbursement this Period -1000.00
Candidate Name Rick Kozell	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item Void - Rick Kozell For Congress - Disbursement originally reported on July 20, 2016 monthly report
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: FL District: 18	

SUBTOTAL of Disbursements This Page (optional).....▶	1500.00
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. Danny Tarkanian For Congress

Mailing Address 50 S Jones Blvd
#202

City Las Vegas State NV Zip Code 89107

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
Mr. Danny Tarkanian

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11403504

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. 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 : 11403505

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Kirk For Senate

Mailing Address P.O. Box 8

City Winnetka State IL Zip Code 60093

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
Mr. Mark Kirk

Office Sought: House
 Senate
 President
State: IL District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11404136

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. Friends Of John McCain Inc

Mailing Address 228 S Washington Street Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Sen. John McCain

Office Sought: House
 Senate
 President
State: AZ District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 11404896

Amount of Each Disbursement this Period

Memo Item
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

/ /

Amount of Each Disbursement this Period

Memo 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)..... ▶