

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

ADDRESS (number and street) 1501 K Street NW
 Check if different than previously reported. (ACC)
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00084491
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 25 2008 through 12 31 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr David French

Signature of Treasurer Electronically Filed by Mr David French Date 01 13 2009

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		72970.76
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	33889.88									
(c) Total Receipts (from Line 19)	2367.50	286918.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	36257.38	359888.76								
7. Total Disbursements (from Line 31)	-7883.30	315748.08								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	44140.68	44140.68								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	2367.50	258130.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	0.00	11288.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2367.50	269418.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	17500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	2367.50	286918.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	2367.50	286918.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2367.50	286918.00

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) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	5749.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	5749.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	-8500.00	302000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	490.00	1140.00
(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))	490.00	1140.00
29. Other Disbursements.....	126.70	6859.08
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	-7883.30	315748.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	-7883.30	315748.08

DETAILED SUMMARY PAGE
of Disbursements

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)	2367.50	286918.00
34. Total Contribution Refunds (from Line 28(d))	490.00	1140.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1877.50	285778.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	5749.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	5749.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 16
(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			

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

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

A.

Full Name (Last, First, Middle Initial) Larry Tate		Date of Receipt MM / DD / YYYY 12 / 08 / 2008
Mailing Address 5151 Glenwood Avenue		Transaction ID: 4844705
City Raleigh	State NC	Zip Code 27612
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Golden Corral Buffet & Grill	Occupation Sr. Vice President of Franchise Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2265.00	

B.

Full Name (Last, First, Middle Initial) Philip St. Jacques		Date of Receipt MM / DD / YYYY 12 / 08 / 2008
Mailing Address 17 Orchard Street		Transaction ID: 4844706
City Mendham	State NJ	Zip Code 07945-1610
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer St. Jacques Franchise Marketing	Occupation Chief Marketing Officer and Founding P	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.

Full Name (Last, First, Middle Initial) Ms. Alisa Harrison		Date of Receipt MM / DD / YYYY 12 / 18 / 2008
Mailing Address 700 12th Street, NW, Suite 800		Transaction ID: 4864997
City Washington	State DC	Zip Code 20005-3949
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer APCO Worldwide	Occupation Vice President, Communications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 815.00	

SUBTOTAL of Receipts This Page (optional)	850.00
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 7 / 16
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Mr. Brian Spindel

Mailing Address 1819 Wazee Street

City State Zip Code
Denver CO 80202-1781

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

Name of Employer PostNet International Franchise Corpor
Occupation Executive Vice President & COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

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

Transaction ID: 4864998

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Sidney Feltenstein

Mailing Address 5328 North Bay Road

City State Zip Code
Miami Beach FL 33140-2041

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

Name of Employer Sagittarius Brands
Occupation Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: 4864999

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Mr. Mark Platt

Mailing Address 77 Apple Court

City State Zip Code
Applegate CA 95703

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

Name of Employer Aire Serv of Sacramento & N. Placer Co
Occupation Franchisee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

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

Transaction ID: 4865000

Amount of Each Receipt this Period
91.25

SUBTOTAL of Receipts This Page (optional) ► **366.25**

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

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

A.	Full Name (Last, First, Middle Initial) Mr. Timothy Funke	Date of Receipt
	Mailing Address 1403 Hwy 53	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 8 / 2 0 0 8
	City State Zip Code Poplar Bluff MO 63901-4128	Transaction ID: 4865001
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 91.25
Name of Employer Aire Serv of Poplar Bluff, MO	Occupation Franchisee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 365.00	

B.	Full Name (Last, First, Middle Initial) Mr. David French	Date of Receipt
	Mailing Address 1501 K Street NW, Suite 350	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 8 / 2 0 0 8
	City State Zip Code Washington DC 20005-1412	Transaction ID: 4865002
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 300.00
Name of Employer International Franchise Association	Occupation Vice President, Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 2000.00	

C.	Full Name (Last, First, Middle Initial) John (Bill) William Anderson	Date of Receipt
	Mailing Address 1735 Market Street	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 8 / 2 0 0 8
	City State Zip Code Philadelphia PA 19103-7502	Transaction ID: 4865003
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 250.00
Name of Employer Wave Services, Inc. DBA The UPS Store	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 1300.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 641.25
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Matthew R. Shay	Date of Receipt MM / DD / YYYY 12 / 18 / 2008
	Mailing Address 3811 Benton Street, NW	Transaction ID: 4865004
	City State Zip Code Washington DC 20007-1712	Amount of Each Receipt this Period 510.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: International Franchise Assn. Occupation: President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Ms. Paula Powers	Date of Receipt MM / DD / YYYY 12 / 01 / 2008
	Mailing Address 1920 South Pennsylvania Street	Transaction ID: 4915302
	City State Zip Code Denver CO 80210-4032	Amount of Each Receipt this Period 0.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Power Training & Development Occupation: President & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$490.00 This changes the YTD Total to \$0.-00

SUBTOTAL of Receipts This Page (optional)	510.00
TOTAL This Period (last page this line number only)	2367.50

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)

PAGE 10 / 16

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

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NAME OF COMMITTEE (In Full)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Coleman Minnesota Recount Committee</p> <p>Mailing Address Post Office Box 14483</p> <p>City Saint Paul State MN Zip Code 55114</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 4831163</p> <p>Date of Disbursement 12 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Coleman Minnesota Recount Committee</p> <p>Mailing Address Post Office Box 14483</p> <p>City Saint Paul State MN Zip Code 55114</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 4831188</p> <p>Date of Disbursement 12 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Friends of John Tanner</p> <p>Mailing Address Post Office Box 1994</p> <p>City Union City State TN Zip Code 38281</p> <p>Purpose of Disbursement Void - Friends of John Tanner</p> <p>Candidate Name John Tanner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 4841146</p> <p>Date of Disbursement 12 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>011 Category/ Type</p> <p>Void - Friends of John Tanner</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

<p>A. Full Name (Last, First, Middle Initial) Kevin Mccarthy For Congress</p> <p>Mailing Address 455 Capitol Mall</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Void - Kevin Mccarthy For Congress</p> <p>Candidate Name Kevin McCarthy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 22</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 4841147 Date of Disbursement 12 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>011 Category/ Type</p> <p>Void - Kevin Mccarthy For Congress</p>
<p>B. Full Name (Last, First, Middle Initial) Friends For Harry Reid</p> <p>Mailing Address PO Box 85223</p> <p>City Las Vegas State NV Zip Code 89185</p> <p>Purpose of Disbursement Void - Friends For Harry Reid</p> <p>Candidate Name Harry Reid</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 4841149 Date of Disbursement 12 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>011 Category/ Type</p> <p>Void - Friends For Harry Reid</p>
<p>C. Full Name (Last, First, Middle Initial) Boren for Congress 2006</p> <p>Mailing Address P.O. Box 1924</p> <p>City Muskogee State OK Zip Code 74401</p> <p>Purpose of Disbursement Void - Boren for Congress 2006</p> <p>Candidate Name David Boren</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 4841150 Date of Disbursement 12 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -2500.00</p> <p>011 Category/ Type</p> <p>Void - Boren for Congress 2006</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-4500.00

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

-

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

A.

Full Name (Last, First, Middle Initial)
Mikulski For Senate Committee

Mailing Address P O B 13147

City Baltimore State MD Zip Code 21208

Purpose of Disbursement
Void - Mikulski For Senate Committee

Candidate Name
Sen. Barbara Mikulski

Office Sought: House Senate President

State: MD District:

Disbursement For: 2008
 Primary General Other (specify) ▼

Transaction ID: 4841153

Date of Disbursement

12 / 03 / 2008

Amount of Each Disbursement this Period

-2500.00

Void - Mikulski For Senate Committee

B.

Full Name (Last, First, Middle Initial)
Elizabeth Dole Committee Inc

Mailing Address PO Box 2918

City Raleigh State NC Zip Code 27602

Purpose of Disbursement
Void - Elizabeth Dole Committee Inc

Candidate Name
Sen. Elizabeth Dole

Office Sought: House Senate President

State: NC District:

Disbursement For: 2008
 Primary General Other (specify) ▼

Transaction ID: 4841154

Date of Disbursement

12 / 03 / 2008

Amount of Each Disbursement this Period

-2000.00

Void - Elizabeth Dole Committee Inc

C.

Full Name (Last, First, Middle Initial)
Bob Corker For Senate

Mailing Address 518 Georgia Ave 2nd Floor

City Chattanooga State TN Zip Code 37403

Purpose of Disbursement
Void - Bob Corker For Senate

Candidate Name
Robert Corker

Office Sought: House Senate President

State: TN District:

Disbursement For: 2006
 Primary General Other (specify) ▼

2006 US General DR

Transaction ID: 4841155

Date of Disbursement

12 / 03 / 2008

Amount of Each Disbursement this Period

-1000.00

Void - Bob Corker For Senate

SUBTOTAL of Disbursements This Page (optional)

-5500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

<p>A. Full Name (Last, First, Middle Initial) Alexander For Senate 2008 Inc</p> <p>Mailing Address 228 S Washington Street Suite 115</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Void - Alexander For Senate 2008 Inc,</p> <p>Candidate Name Sen. Lamar Alexander</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 4841156 Date of Disbursement 12 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -1500.00</p> <p>011 Category/ Type</p> <p>Void - Alexander For Sena- te 2008 Inc,</p>
<p>B. Full Name (Last, First, Middle Initial) Committee To Re-Elect Vito Fossella</p> <p>Mailing Address 34 Dumont Avenue 34 Dumont Ave</p> <p>City Staten Island State NY Zip Code 10305</p> <p>Purpose of Disbursement Void - Committee To Re-Elect Vito Fossella</p> <p>Candidate Name Rep. Vito Fossella</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 4841157 Date of Disbursement 12 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>011 Category/ Type</p> <p>Void - Committee To Re-El- ect Vito Fossella</p>
<p>C. Full Name (Last, First, Middle Initial) Buck Mckeon for Congress</p> <p>Mailing Address 24265 San Fernando Road</p> <p>City Santa Clarita State CA Zip Code 91321</p> <p>Purpose of Disbursement Void - Buck Mckeon for Congress</p> <p>Candidate Name Howard McKeon</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 25</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 4841158 Date of Disbursement 12 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>011 Category/ Type</p> <p>Void - Buck Mckeon for Co- ngress</p>

SUBTOTAL of Disbursements This Page (optional) ►

-3500.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

A.	Full Name (Last, First, Middle Initial) Fallin For Congress	Transaction ID: 4841159 Date of Disbursement 12 / 03 / 2008
	Mailing Address 119 N Robinson	Amount of Each Disbursement this Period -1000.00
	City Oklahoma City State OK Zip Code 73102	
	Purpose of Disbursement Void - Fallin For Congress	011 Category/ Type
	Candidate Name Mary Fallin	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Void - Fallin For Congress

B.	Full Name (Last, First, Middle Initial) Bright For Congress.Com	Transaction ID: 4861136 Date of Disbursement 12 / 11 / 2008
	Mailing Address P.O.Box 2106	Amount of Each Disbursement this Period 1000.00
	City Montgomery State AL Zip Code 36102	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Mr. Bobby Bright	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 General Debt Re

C.	Full Name (Last, First, Middle Initial) ERICPAC	Transaction ID: 4861229 Date of Disbursement 12 / 12 / 2008
	Mailing Address 209 Pennsylvania Avenue, SE	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name ERICPAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

-8500.00

**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)

PAGE 15 / 16

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 7810 Old Branch Avenue

City Clinton State MD Zip Code 20735

Purpose of Disbursement

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 4898897

Date of Disbursement

11 / 28 / 2008

Amount of Each Disbursement this Period

57.40

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 7810 Old Branch Avenue

City Clinton State MD Zip Code 20735

Purpose of Disbursement

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 4914301

Date of Disbursement

12 / 01 / 2008

Amount of Each Disbursement this Period

57.40

SUBTOTAL of Disbursements This Page (optional)

114.80

TOTAL This Period (last page this line number only)

114.80

**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)

PAGE 16 / 16

<input 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 checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

A. Full Name (Last, First, Middle Initial) Ms. Paula Powers <hr/> Mailing Address 1920 South Pennsylvania Street <hr/> City Denver State CO Zip Code 80210-4032 <hr/> Purpose of Disbursement Refund of Contribution Candidate Name	Transaction ID: 4915296 Date of Disbursement 12 / 01 / 2008 <hr/> Amount of Each Disbursement this Period 365.00 <hr/> Refund of Contribution
B. Full Name (Last, First, Middle Initial) Ms. Paula Powers <hr/> Mailing Address 1920 South Pennsylvania Street <hr/> City Denver State CO Zip Code 80210-4032 <hr/> Purpose of Disbursement Refund of Contribution Candidate Name	Transaction ID: 4915299 Date of Disbursement 12 / 01 / 2008 <hr/> Amount of Each Disbursement this Period 125.00 <hr/> Refund of Contribution

SUBTOTAL of Disbursements This Page (optional) ►

490.00

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

490.00