

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 20006-1135**

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 / / 2019 through / / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Cresanti, Robert, , Mr., CFE
Type or Print Name of Treasurer

Signature of Treasurer Cresanti, Robert, , Mr., CFE [Electronically Filed] Date / / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="2019"/>	<input type="text" value="373878.72"/>	<input type="text" value="373878.72"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="423795.05"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="35254.11"/>	<input type="text" value="361383.22"/>
(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="459049.16"/>	<input type="text" value="735261.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="53552.36"/>	<input type="text" value="329765.14"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="405496.80"/>	<input type="text" value="405496.80"/>
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. 05/2016)

Page 3

Write or Type Committee Name

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 05 / 01 / 2019 To: M M / D D / Y Y Y Y Y 05 / 31 / 2019

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).....	32413.29	346089.82
(ii) Unitemized	340.82	2793.40
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	32754.11	348883.22
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	12500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	35254.11	361383.22
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)).....▶	35254.11	361383.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	35254.11	361383.22

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	1052.36	15015.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1052.36	15015.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	52500.00	308500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	6250.00
(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	6250.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	53552.36	329765.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	53552.36	329765.14

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)	35254.11	361383.22
34. Total Contribution Refunds (from Line 28(d))	0.00	6250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35254.11	355133.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1052.36	15015.14
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1052.36	15015.14

**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 28
	<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

A. Merin, Josh, , Mr., CFE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 K St NW
 Ste 700
 City Washington State DC Zip Code 20006-1135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) International Franchise Association Occupation (for Individual) Vice President, International Affairs
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **363.60**

Date of Receipt **05 / 31 / 2019**
Transaction ID : AF3A7E84114EE44439ED
 Amount of Each Receipt this Period **136.35**
 Memo Item
 Payroll Deduction: \$45.45/Bi-Weekly

B. Beall, Suzanne, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 K St NW
 Ste 700
 City Washington State DC Zip Code 20006-1135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) International Franchise Association Occupation (for Individual) Vice President, Government Relations
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1956.51**

Date of Receipt **05 / 31 / 2019**
Transaction ID : A6A331501A50A4280A06
 Amount of Each Receipt this Period **652.17**
 Memo Item
 Payroll Deduction: \$217.39/Bi-Weekly

C. Farage, Erica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 K St NW
 Ste 700
 City Washington State DC Zip Code 20006-1135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) International Franchise Association Occupation (for Individual) Senior Director, Political Affairs, Gr
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1500.00**

Date of Receipt **05 / 31 / 2019**
Transaction ID : A8D6167012FBC47A3A49
 Amount of Each Receipt this Period **750.00**
 Memo Item
 Payroll Deduction: \$250.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	1538.52
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 28
	<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Worley, Stephen, , Mr.,			Date of Receipt MM / DD / YYYY 05 / 31 / 2019		
Mailing Address 1900 K St NW Ste 700			Transaction ID : A5D2DC4BD07C045BD830		
City Washington	State DC	Zip Code 20006-1135	Amount of Each Receipt this Period 130.44		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction: \$43.48/Bi-Weekly		
Name of Employer (for Individual) International Franchise Association		Occupation (for Individual) Senior Director, Communications			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 391.32			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cheng, Amy, , Ms., CFE			Date of Receipt MM / DD / YYYY 05 / 01 / 2019		
Mailing Address 311 N Aberdeen St Ste 400			Transaction ID : A51D19C69C5B74B508C1		
City Chicago	State IL	Zip Code 60607-1298	Amount of Each Receipt this Period 454.54		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Cheng Cohen LLC		Occupation (for Individual) Partner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1818.16			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Gray, Michael, R., Mr., CFE			Date of Receipt MM / DD / YYYY 05 / 02 / 2019		
Mailing Address 500 IDS Center 80 South Eighth Street			Transaction ID : A3810FACFC32D4215A9C		
City Minneapolis	State MN	Zip Code 55402	Amount of Each Receipt this Period 365.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Gray Plant Mooty		Occupation (for Individual) Principal			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 365.00			

SUBTOTAL of Receipts This Page (optional).....	949.98
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 28
	<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. Saju, Azim, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1920 SW 12th Ave

City Ocala	State FL	Zip Code 34471-1263
---------------	-------------	------------------------

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

Name of Employer (for Individual) HDG Hotels	Occupation (for Individual) General Counsel & Vice President
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2019

Transaction ID : ACD4B06CFEBAA49FBAD

Amount of Each Receipt this Period
250.00

Memo Item

B. Moran-Goodrich, Barbara, , Ms., CFE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4444 147th St

City Midlothian	State IL	Zip Code 60445-2644
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Moran Family of Brands	Occupation (for Individual) CEO & Co-Founder
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2019

Transaction ID : AC1403CF3BB1547FA896

Amount of Each Receipt this Period
1250.00

Memo Item

C. Darter, Guy, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 188

City Cheshire	State CT	Zip Code 06410-0188
------------------	-------------	------------------------

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

Name of Employer (for Individual) Darter Specialties/Get Company Uniform	Occupation (for Individual) Vice President
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1818.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2019

Transaction ID : A540A11AF327140BF83C

Amount of Each Receipt this Period
454.54

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1954.54
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 28
	<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. Goerke, Gary, , Mr., CFE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 Corporate Dr
Ste 250

City Southfield State MI Zip Code 48076-3716

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

Name of Employer (for Individual) Clarity Voice Occupation (for Individual) President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2019

Transaction ID : AC5402E0614014088BBD

Amount of Each Receipt this Period
1250.00

Memo Item

B. Sessler, Jerrod, , Mr., CFE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 611 SW 152nd St

City Burien State WA Zip Code 98166-2212

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

Name of Employer (for Individual) HomeTask, Inc. Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2019

Transaction ID : A530E761BF6B64672B53

Amount of Each Receipt this Period
500.00

Memo Item

C. DiPaola, William, , Mr., CFE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 New Camellia Blvd
Ste 100

City Covington State LA Zip Code 70433-7812

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

Name of Employer (for Individual) Ballard Brands, LLC Occupation (for Individual) COO

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2019

Transaction ID : AD4AB471449344C2DB4A

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1850.00
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 28
	<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. Portesy, Tom, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 208 Harristown Rd
Ste 102

City Glen Rock State NJ Zip Code 07452-3306

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

Name of Employer (for Individual) MFV Expositions Occupation (for Individual) President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 14 / 2019
Transaction ID : AC6DE6E635D7C45219F9

Amount of Each Receipt this Period
5000.00

Memo Item

B. Epstein, Tom, , Mr., CFE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 S Dillard St
200

City Winter Garden State FL Zip Code 34787-3909

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

Name of Employer (for Individual) Franchise Payments Network Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
05 / 15 / 2019
Transaction ID : A0BBBA096DB254BD1888

Amount of Each Receipt this Period
1250.00

Memo Item

C. Kelley, Ed, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10125 Glasshouse Ct
Ste 414

City Ellicott City State MD Zip Code 21042-5809

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

Name of Employer (for Individual) Franchise Partners of America, LLC Occupation (for Individual) Founder-CEO

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
222.22

Date of Receipt
05 / 15 / 2019
Transaction ID : A110679DB7BD546B896A

Amount of Each Receipt this Period
111.11

Memo Item

SUBTOTAL of Receipts This Page (optional).....	6361.11
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 28 (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 of Individual (Last, First, Middle Initial) or Full Organization Name A. Bevis, Jeff, , Mr., CFE			Date of Receipt					
Mailing Address 7870 E Kemper Rd Ste 440			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align: center;">M M M 05</td> <td style="width:33%; text-align: center;">D D D 18</td> <td style="width:33%; text-align: center;">Y Y Y Y Y 2019</td> </tr> </table>			M M M 05	D D D 18	Y Y Y Y Y 2019
M M M 05	D D D 18	Y Y Y Y Y 2019						
City Cincinnati		State OH	Zip Code 45249-1675					
FEC ID number of contributing federal political committee. C			Transaction ID : AE07A1585A0B54208939					
Name of Employer (for Individual) FirstLight Home Care			Occupation (for Individual) Co-Founder & CEO					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00						
			<input type="checkbox"/> Memo Item					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dickison, Emma, R., Ms., CFE			Date of Receipt					
Mailing Address 10700 Montgomery Rd Ste 300			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align: center;">M M M 05</td> <td style="width:33%; text-align: center;">D D D 21</td> <td style="width:33%; text-align: center;">Y Y Y Y Y 2019</td> </tr> </table>			M M M 05	D D D 21	Y Y Y Y Y 2019
M M M 05	D D D 21	Y Y Y Y Y 2019						
City Cincinnati		State OH	Zip Code 45242-3296					
FEC ID number of contributing federal political committee. C			Transaction ID : A892A021AA4194653BFE					
Name of Employer (for Individual) Home Helpers Home Care			Occupation (for Individual) President & CEO					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 416.66						
			<input type="checkbox"/> Memo Item					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Visconti, Alesia, , Ms.,			Date of Receipt					
Mailing Address 345 State Rt 17			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align: center;">M M M 05</td> <td style="width:33%; text-align: center;">D D D 21</td> <td style="width:33%; text-align: center;">Y Y Y Y Y 2019</td> </tr> </table>			M M M 05	D D D 21	Y Y Y Y Y 2019
M M M 05	D D D 21	Y Y Y Y Y 2019						
City Upper Saddle River		State NJ	Zip Code 07458-2307					
FEC ID number of contributing federal political committee. C			Transaction ID : A88760A62ECDE428E8C8					
Name of Employer (for Individual) FranServe, Inc.			Occupation (for Individual) CEO					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1666.66						
			<input type="checkbox"/> Memo Item					

SUBTOTAL of Receipts This Page (optional).....	2333.32
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 12 OF 28
<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. Chapman, Graham, , Mr., CFE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 Avent Ferry Rd
 Apt A2
 City Holly Springs State NC Zip Code 27540-8918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 919 Marketing Company Occupation (for Individual) VP, Account Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 23 / 2019
Transaction ID : A2BCB71D010E84A89ADD
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Johnson, R. Earl, , Mr., CFE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4551 Cox Rd
 Ste 310
 City Glen Allen State VA Zip Code 23060-6740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LeafSpring Schools Occupation (for Individual) Founder
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2083.30

Date of Receipt 05 / 23 / 2019
Transaction ID : A24E9CB9AD4244A4FAFA
 Amount of Each Receipt this Period 416.66
 Memo Item

C. Johnson, Gail, W, Ms., CFE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4551 Cox Rd
 Ste 310
 City Glen Allen State VA Zip Code 23060-6740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LeafSpring Schools Occupation (for Individual) Founder & Chairman
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2083.30

Date of Receipt 05 / 23 / 2019
Transaction ID : A468868323BC34FADBAA
 Amount of Each Receipt this Period 416.66
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1833.32
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 13 OF 28
	<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. Wahl, Jim, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 IDS Center
 80 South Eighth Street
 City Minneapolis State MN Zip Code 55402-2100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gray Plant Mooty Occupation (for Individual) Attorney
 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
 05 / 24 / 2019
Transaction ID : A9858132D363C44779B6
 Amount of Each Receipt this Period
 365.00
 Memo Item

B. Bodeau, Sandy, Y., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 IDS Center
 80 South Eighth Street
 City Minneapolis State MN Zip Code 55402-5844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gray Plant Mooty Occupation (for Individual) Principal
 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
 05 / 24 / 2019
Transaction ID : AFB4A621A64A74BD48B6
 Amount of Each Receipt this Period
 365.00
 Memo Item

C. Zwisler, Carl, E., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 New Hampshire Ave NW
 Ste 700
 City Washington State DC Zip Code 20037-2409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gray Plant Mooty Occupation (for Individual) Principal
 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
 05 / 24 / 2019
Transaction ID : A9E875926DB8840EFBD2
 Amount of Each Receipt this Period
 365.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1095.00
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 14 OF 28
	<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. Yaffe, Eric, L, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 New Hampshire Ave NW
Ste 700

City Washington State DC Zip Code 20037-2409

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

Name of Employer (for Individual) Gray Plant Mooty Occupation (for Individual) Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
05 / 24 / 2019
Transaction ID : **AD42AE469ADA24BAC92/**

Amount of Each Receipt this Period
365.00

Memo Item

B. Reilly, Kirk, W, Mr., CFE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 IDS Center
80 South Eighth Street

City Minneapolis State MN Zip Code 55402

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

Name of Employer (for Individual) Gray Plant Mooty Occupation (for Individual) Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
05 / 24 / 2019
Transaction ID : **A417E8E0703F447769DA**

Amount of Each Receipt this Period
365.00

Memo Item

C. Cohen, Mitch, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 749 Van Buren Ave

City East Meadow State NY Zip Code 11554-4621

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

Name of Employer (for Individual) Jersey Mike's Subs of East Meadow, NY Occupation (for Individual) Franchisee

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1041.65

Date of Receipt
05 / 28 / 2019
Transaction ID : **A3575FCC912004E11B15**

Amount of Each Receipt this Period
208.33

Memo Item

SUBTOTAL of Receipts This Page (optional).....	938.33
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 28
	<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. Rotche, John, , Mr., CFE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 E Liberty St
 Ste 310
 City Ann Arbor State MI Zip Code 48104-2100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TITLE Boxing Club Occupation (for Individual) CEO and Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2083.30

Date of Receipt 05 / 29 / 2019
Transaction ID : ACE8A348866EA4901832
 Amount of Each Receipt this Period 416.66
 Memo Item

B. Kirsch, Mark, , Mr., CFE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 New Hampshire Ave NW
 Ste 700
 City Washington State DC Zip Code 20037-2409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gray Plant Mooty Occupation (for Individual) Principal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 29 / 2019
Transaction ID : AAE97C9502A384FE1B68
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Zisk, Robert, L., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 New Hampshire Ave NW
 Ste 700
 City Washington State DC Zip Code 20037-2409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gray Plant Mooty Occupation (for Individual) Principal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 05 / 29 / 2019
Transaction ID : A444D3123D1C94DD2B03
 Amount of Each Receipt this Period 365.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5781.66
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 16 OF 28
(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 of Individual (Last, First, Middle Initial) or Full Organization Name
A. Dillon, Elizabeth, S., Ms., CFE

Mailing Address 500 IDS Center
80 S. 8th Street

City Minneapolis State MN Zip Code 55402

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

Name of Employer (for Individual) Gray Plant Mooty Occupation (for Individual) Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
MM / DD / YYYY
05 / 29 / 2019

Transaction ID : A85BAA28DDD9F40738E9

Amount of Each Receipt this Period
365.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Dwyer-Owens, Dina, , Mrs., CFE

Mailing Address 1015 Joy Dr

City Waco State TX Zip Code 76708-9770

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

Name of Employer (for Individual) Neighborly Occupation (for Individual) Brand Ambassador

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4083.34

Date of Receipt
MM / DD / YYYY
05 / 30 / 2019

Transaction ID : AAD0049B26A204409A7B

Amount of Each Receipt this Period
916.67

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Wells, Tom, , Mr.,

Mailing Address 3575 Piedmont Rd NE
Bldg 15

City Atlanta State GA Zip Code 30305-1623

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

Name of Employer (for Individual) 10 Point Capital Occupation (for Individual) Managing Partner

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2019

Transaction ID : A2086AA7DC66547D3A0E

Amount of Each Receipt this Period
625.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1906.67

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 17 OF 28
	<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	<input type="checkbox"/> 17

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

A. Cahn, David, L., Mr., CFE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 Saint Paul St
 FI 13
 City Baltimore State MD Zip Code 21202-1626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Whiteford Taylor & Preston LLP Occupation (for Individual) Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.34

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2019
Transaction ID : A0F0B164DC16846E8A65
 Amount of Each Receipt this Period
 333.34
 Memo Item

B. Caucci, Sam, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Washington Park
 FI 7
 City Newark State NJ Zip Code 07102-3122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 1HUDDLE Occupation (for Individual) Founder & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1237.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2019
Transaction ID : A9E4683CAE984412C87C
 Amount of Each Receipt this Period
 537.50
 Memo Item

C. Moore, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6818 Chisholm Avenue
 City Van Nuys State CA Zip Code 91406-5109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Silvercrest Advertising, Inc. Occupation (for Individual) CMO
 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 / 31 / 2019
Transaction ID : A167A154CD6374EE2A8B
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5870.84
TOTAL This Period (last page this line number only).....	32413.29

**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 18 OF 28
<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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRAY, PLANT, MOOTY, MOOTY & BENNETT P A PUBLIC AFFAIRS COMMITTEE

Mailing Address 80 S 8th Street

City Minneapolis	State MN	Zip Code 55402-2100
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00099473

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	24	/	2019

Transaction ID : A38FC863899174F0CAC6

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	2500.00

**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"/> 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. CampaignContribution.com

Full Name (Last, First, Middle Initial)

Mailing Address 201 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1107

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 31 / 2019

FEC Identification Number: C

Transaction ID : B4368A72BF

Amount of Each Disbursement this Period: 1052.36

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1052.36
TOTAL This Period (last page this line number only).....▶	1052.36

**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"/> 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 Costa For Congress

Mailing Address 412 First Street SE, Ste 100
c/o Molly Allen Associates

City
Washington

State
DC

Zip Code
20003-1804

Purpose of Disbursement
Contribution to Committee

Candidate Name

Costa, Jim, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: CA District: 16

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	9

FEC Identification Number

C C00391029

Transaction ID : B1EFF5F589I

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Rick W. Allen For Congress

Mailing Address P.O. Box 338

City
Augusta

State
GA

Zip Code
30903

Purpose of Disbursement
Contribution to Committee

Candidate Name

Allen, Rick, W., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: GA District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	9

FEC Identification Number

C C00504019

Transaction ID : BA552514380

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Thom Tillis Committee

Mailing Address PO Box 97396

City
Raleigh

State
NC

Zip Code
27624

Purpose of Disbursement
Contribution to Committee

Candidate Name

Tillis, Thom, R., Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: NC District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	9

FEC Identification Number

C C00545772

Transaction ID : BCDB7D38B

Amount of Each Disbursement this Period

1000.00

Memo Item

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"/> 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. TEAM GRAHAM INC

Full Name (Last, First, Middle Initial)

Mailing Address 1006 Pendleton Street
c/o The Townsend Group

City Alexandria State VA Zip Code 22314-1837

Purpose of Disbursement Contribution to Committee

Candidate Name **Graham, Lindsey, , Sen.,**

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: SC District:

Date of Disbursement 05 / 09 / 2019

FEC Identification Number **C00458828**
Transaction ID : B3666774D6f
Amount of Each Disbursement this Period 500.00

Memo Item

B. KUSTOFF FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 410 1st Street SE, Suite 310
c/o The Elevated Group

City Washington State DC Zip Code 20003-1866

Purpose of Disbursement Contribution to Committee

Candidate Name **Kustoff, David, F., Rep.,**

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify)

State: TN District: 08

Date of Disbursement 05 / 02 / 2019

FEC Identification Number **C00614826**
Transaction ID : BF2C4B7466f
Amount of Each Disbursement this Period 2000.00

Memo Item

C. VICENTE GONZALEZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15096

City Washington State DC Zip Code 20003-0096

Purpose of Disbursement Contribution to Committee

Candidate Name **Gonzalez, Vicente, , Rep.,**

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: TX District: 15

Date of Disbursement 05 / 20 / 2019

FEC Identification Number **C00592659**
Transaction ID : B3F8FCBCC
Amount of Each Disbursement this Period 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5000.00

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"/> 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. Peterson For Congress

Full Name (Last, First, Middle Initial)
Mailing Address 413 New Jersey Ave SE

City Washington State DC Zip Code 20003-4007

Purpose of Disbursement Contribution to Committee

Candidate Name Peterson, Collin, C., Rep.,

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: MN District: 07

Date of Disbursement 05 / 02 / 2019

FEC Identification Number C00253187
Transaction ID : B031F67AC2
Amount of Each Disbursement this Period 1500.00

Memo Item

B. Texans For Henry Cuellar Congressional Campaign

Full Name (Last, First, Middle Initial)
Mailing Address 1701 16th Street NW, #121
c/o Vanessa Ide

City Washington State DC Zip Code 20009-3110

Purpose of Disbursement Contribution to Committee

Candidate Name Cuellar, Henry, R., Rep.,

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: TX District: 28

Date of Disbursement 05 / 09 / 2019

FEC Identification Number C00371302
Transaction ID : BA640202194
Amount of Each Disbursement this Period 1000.00

Memo Item

C. COMMITTEE TO RE-ELECT STEVE WATKINS

Full Name (Last, First, Middle Initial)
Mailing Address 499 South Capitol Street SW, Suite
c/o Gula Graham

City Washington State DC Zip Code 20003-4027

Purpose of Disbursement Contribution to Committee

Candidate Name Watkins, Steven, C, Rep., JR

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: KS District: 02

Date of Disbursement 05 / 20 / 2019

FEC Identification Number C00660050
Transaction ID : BDAA705F8z
Amount of Each Disbursement this Period 2000.00

Memo Item

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

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

4500.00

**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"/> 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. Graves For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	09	/	2019

Mailing Address 410 1st Street SE, Suite 310
c/o The Elevated Group

City Washington State DC Zip Code 20003-1866

Purpose of Disbursement
Contribution to Committee

FEC Identification Number

C C00462556

Transaction ID : BB3D896AC3
Amount of Each Disbursement this Period

1000.00

Memo Item

Candidate Name

Graves, Tom, , Rep., Jr.

Category/
Type

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: GA District: 14

Full Name (Last, First, Middle Initial)

B. Jason Smith For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	20	/	2019

Mailing Address 439 New Jersey Ave SE
c/o Grand Valley Consulting

City Washington State DC Zip Code 20003-4034

Purpose of Disbursement
Contribution to Committee

FEC Identification Number

C C00541862

Transaction ID : BDE01A88AA
Amount of Each Disbursement this Period

1000.00

Memo Item

Candidate Name

Smith, Jason, T., Rep.,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: MO District: 08

Full Name (Last, First, Middle Initial)

C. Rick W. Allen For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	30	/	2019

Mailing Address P.O. Box 338

City Augusta State GA Zip Code 30903

Purpose of Disbursement
VOID - Contribution to Committee Originally Reported on 2019 April Monthly Report

FEC Identification Number

C C00504019

Transaction ID : B99ACB3687
Amount of Each Disbursement this Period

- 1000.00

Memo Item

Candidate Name

Allen, Rick, W., Rep.,

Category/
Type

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: GA District: 12

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

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

1000.00

**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"/> 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. FRIENDS OF SUSAN BROOKS

Full Name (Last, First, Middle Initial)
Date of Disbursement: 05 / 09 / 2019

Mailing Address: 1006 Pendleton Street
c/o The Townsend Group

City: Alexandria State: VA Zip Code: 22314-1837

Purpose of Disbursement: Contribution to Committee
FEC Identification Number: C00500207
Transaction ID: BB541C24A4
Amount of Each Disbursement this Period: 2500.00

Candidate Name: Brooks, Susan, , Rep.,
Category/Type: []

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: IN District: 05
 Memo Item

B. Martha Roby For Congress

Full Name (Last, First, Middle Initial)
Date of Disbursement: 05 / 20 / 2019

Mailing Address: 1006 Pendleton St
c/o Townsend Group

City: Alexandria State: VA Zip Code: 22314-1837

Purpose of Disbursement: Contribution to Committee
FEC Identification Number: C00462143
Transaction ID: B8FEBADF06
Amount of Each Disbursement this Period: 2500.00

Candidate Name: Roby, Martha, , Rep.,
Category/Type: []

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: AL District: 02
 Memo Item

C. BRINDISI FOR CONGRESS

Full Name (Last, First, Middle Initial)
Date of Disbursement: 05 / 09 / 2019

Mailing Address: 412 First Street SE, Ste 100
c/o Molly Allen Associates

City: Washington State: DC Zip Code: 20003

Purpose of Disbursement: Contribution to Committee
FEC Identification Number: C00648725
Transaction ID: B26216D97B
Amount of Each Disbursement this Period: 1000.00

Candidate Name: Brindisi, Anthony, , Rep.,
Category/Type: []

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: NY District: 22
 Memo Item

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"/> 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. ALMA ADAMS FOR CONGRESS

Mailing Address 514 Daniels Street #286
c/o Blue Wave Pol Partners

City Raleigh State NC Zip Code 27605-1317

Purpose of Disbursement
Contribution to Committee

Candidate Name
Adams, Alma, S., Rep.,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NC District: 12

Date of Disbursement

MM / DD / YYYY
05 / 20 / 2019

FEC Identification Number

C C00546358

Transaction ID : BDDD47A0F6

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LOFGREN FOR CONGRESS

Mailing Address PO Box 913

City San Jose State CA Zip Code 95108-0913

Purpose of Disbursement
Contribution to Committee

Candidate Name
Lofgren, Zoe, , Rep.,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: CA District: 19

Date of Disbursement

MM / DD / YYYY
05 / 20 / 2019

FEC Identification Number

C C00289603

Transaction ID : B9F27026F1C

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WILLIAM TIMMONS FOR CONGRESS

Mailing Address 499 South Capitol Street SW, Suite
c/o Gula Graham

City Washington State DC Zip Code 20003-4027

Purpose of Disbursement
Contribution to Committee

Candidate Name
Timmons, William, R., Rep., IV

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: SC District: 04

Date of Disbursement

MM / DD / YYYY
05 / 20 / 2019

FEC Identification Number

C C00668491

Transaction ID : B505DA6AAI

Amount of Each Disbursement this Period

1000.00

Memo Item

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"/> 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. Jim Costa For Congress

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
05 / 20 / 2019

Mailing Address 412 First Street SE, Ste 100
c/o Molly Allen Associates

City Washington State DC Zip Code 20003-1804

Purpose of Disbursement Contribution to Committee

Candidate Name **Costa, Jim, , Rep.,** Category/Type

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) Memo Item

State: CA District: 16

FEC Identification Number **C00391029**
Transaction ID : **BB26C91D9E**
Amount of Each Disbursement this Period: 2500.00

B. TEAM GRAHAM INC

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
05 / 09 / 2019

Mailing Address 1006 Pendleton Street
c/o The Townsend Group

City Alexandria State VA Zip Code 22314-1837

Purpose of Disbursement Contribution to Committee

Candidate Name **Graham, Lindsey, , Sen.,** Category/Type

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) Memo Item

State: SC District:

FEC Identification Number **C00458828**
Transaction ID : **BD690C8032f**
Amount of Each Disbursement this Period: 2000.00

C. MAKE IT WORK PAC

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
05 / 02 / 2019

Mailing Address 200 East Jefferson Street

City Falls Church State VA Zip Code 22046-3531

Purpose of Disbursement Contribution to Committee

Candidate Name **MAKE IT WORK PAC** Category/Type

Office Sought: House Senate President Disbursement For: 2019 Primary General Other (specify) Memo Item

State: District: Other

FEC Identification Number **C00552539**
Transaction ID : **B9B66CB05E**
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9500.00

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"/> 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. COWBOY PAC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	1	9

Mailing Address 1006 Pendleton Street
c/o The Townsend Group

City Alexandria State VA Zip Code 22314-1837

Purpose of Disbursement
Contribution to Committee

FEC Identification Number

C	C00638130
Transaction ID : BBBB84962F	
Amount of Each Disbursement this Period	
5000.00	

Candidate Name

COWBOY PAC

Category/
Type

Office Sought: House Senate President
Disbursement For: 2019 Primary General Other (specify) Other

Memo Item

Full Name (Last, First, Middle Initial)

B. VALUE IN ELECTING WOMEN POLITICAL ACTION COMMITTEE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	1	9

Mailing Address 3106 Russell Road
c/o Shamrock Advisors

City Alexandria State VA Zip Code 22305-1720

Purpose of Disbursement
Contribution to Committee

FEC Identification Number

C	C00327189
Transaction ID : BE3070B1CB	
Amount of Each Disbursement this Period	
2500.00	

Candidate Name

VALUE IN ELECTING WOMEN POLITICAL ACTION COMMITTEE

Category/
Type

Office Sought: House Senate President
Disbursement For: 2019 Primary General Other (specify) Other

Memo Item

Full Name (Last, First, Middle Initial)

C. FUTURE FORUM PAC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	9

Mailing Address c/o Molly Allen Associates
412 First Street SE, Suite 100

City Washington State DC Zip Code 20003-1804

Purpose of Disbursement
Contribution to Committee

FEC Identification Number

C	C00625988
Transaction ID : B1D28CE402	
Amount of Each Disbursement this Period	
2500.00	

Candidate Name

FUTURE FORUM PAC

Category/
Type

Office Sought: House Senate President
Disbursement For: 2019 Primary General Other (specify) Other

Memo Item

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

10000.00

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

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**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"/> 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. Wild and Wonderful PAC

Mailing Address 1006 Pendleton Street

City
Alexandria

State
VA

Zip Code
22314-1837

Purpose of Disbursement
Contribution to Committee

Candidate Name

Wild and Wonderful PAC

Office Sought: House
 Senate
 President

Disbursement For: 2019
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2019

FEC Identification Number

C C00489336

Transaction ID : B7C964CBFE
Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Country Roads PAC

Mailing Address 660 Pennsylvania Ave SE, Ste 201
c/o Ashley Kennedy

City
Washington

State
DC

Zip Code
20003-4365

Purpose of Disbursement
Contribution to Committee

Candidate Name

Country Roads PAC

Office Sought: House
 Senate
 President

Disbursement For: 2019
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2019

FEC Identification Number

C C00484402

Transaction ID : B3A2E3B33D
Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

10000.00

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

52500.00