PAGE 1 / 11

Image# 201510199003118866

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For	Other Than	An Authorized	d Commit	tee		Office Use On	ıly
NAME OF COMMITTEE (in		E OR PRINT		ample: If typer the lines.	oing, type	12FE4M5		
INTERNATION	IAL FRANCH	IISE ASSC	CIATION FRA	NCHISIN	IG POLITIO	CAL ACTIO	ON COMMI	ITTEE INC
ADDRESS (number a		900 K Street N	N					
Check if dir than previo reported. (A	ferent uslyv	uite 700				DC	20006	
2. FEC IDENTIFIC	CATION NUMB	ER ▼	CITY			STATE A	ZIP	CODE A
C C000844	91		3. IS THIS REPORT		NEW (N) OR	× AN	MENDED)	
4. TYPE OF RE (Choose One) (a) Quarterly Re	eports:	b) Monthly Report Due On:	X Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)	ĕ	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep	20 (M8) 20 (M9) 20 (M10)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
July 15 Quarter Octobe Quarter Januar	rly Report (Q1) rly Report (Q2) r 15 rly Report (Q3) y 31		y Election t for the:	Primary (12 Convention		General Special ((12S) in t	Runoff (12R) the
July 31 Report Year O	nd Report (YE) Mid-Year (Non-election nly) (MY) ation Report			General (30	OG)	Runoff (3	30R) in t	Special (30S)
5. Covering Period	01	01	2015	through	M M M	31	2015	Y
I certify that I have of Type or Print Name		eport and to t		wledge and	belief it is tru	ie, correct and	d complete.	
Signature of Treasur	er <i>Mr. Rober</i>	t Cresanti		[Electronica	lly Filed]	Date 10	/ 19	2015
NOTE: Submission of	false, erroneous	, or incomplete	information may so	ubject the pe	erson signing th	nis Report to the	ne penalties of	2 U.S.C. §437g.
Office Use Only							1	ORM 3X 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

01 01 2015 Report Covering the Period: 2015 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 360876.68 January 1, 2015 (b) Cash on Hand at 360876.68 Beginning of Reporting Period..... 2033.70 2033.70 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 362910.38 362910.38 6(a) and 6(c) for Column B)..... 59763.00 59763.00 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 303147.38 303147.38 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

I. Receipts	COLUMN B Calendar Year-to-Date				
1. Contributions (other than loans) From:	ontributions (other than loans) From:				
(a) Individuals/Persons Other					
Than Political Committees		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
(i) Itemized (use Schedule A)	1799.78	1799.78			
(ii) Unitemized(iii) TOTAL (add	233.92	233.92			
Lines 11(a)(i) and (ii)	2033.70	2033.70			
(b) Political Party Committees	0.00	0.00			
(c) Other Political Committees (such as PACs)	0.00	0.00			
(d) Total Contributions (add Lines					
11(a)(iii), (b), and (c)) (Carry					
Totals to Line 33, page 5)▶	2033.70	2033.70			
. Transfers From Affiliated/Other					
Party Committees	0.00	0.00			
All Loans Received	0.00	0.00			
All Loans Received		0.00			
. Loan Repayments Received	0.00	0.00			
Offsets To Operating Expenditures	7	7			
(Refunds, Rebates, etc.)					
(Carry Totals to Line 37, page 5)	0.00	0.00			
. Refunds of Contributions Made					
to Federal Candidates and Other					
Political Committees	0.00	0.00			
Other Federal Receipts	7				
(Dividends, Interest, etc.)	0.00	0.00			
Transfers from Non-Federal and Levin Funds	0.00	0.00			
(a) Non-Federal Account					
(from Schedule H3)	0.00	0.00			
(IIOIII Ochedule 110)	7 0.00	0.00			
	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			
Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	2033.70	2033.70			
. Total Federal Receipts	0000 70	2033.70			
(subtract Line 18(c) from Line 19)▶	2033.70	20			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	II. Disbursements COLUMN A Total This Period			
Operating Expenditures:	10.00. 11110 1 01100	Calendar Year-to-Date		
(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	4762.00	4762.00		
Expenditures	4763.00	4763.00		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	4763.00	4763.00		
Transfers to Affiliated/Other Party	7			
Committees	0.00	0.00		
Contributions to Federal Candidates/Committees				
and Other Political Committees	55000.00	55000.00		
Independent Expenditures	0.00	0.00		
(use Schedule E) Coordinated Party Expenditures	0.00	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
(use Schedule F)	3.00	0.00		
Loan Repayments Made	0.00	0.00		
Loan riepayments wade				
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other				
Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))▶	0.00	0.00		
(444 2.1100 20(4), (2), 4.14 (9),				
Other Disbursements	0.00	0.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)	0.00	0.00		
(i) Federal Share	0.00	7 7		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely	7			
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		
_		,		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	59763.00	59763.00		
Total Fadaral Diaburaansanta				
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	59763.00	59763.00		
nom Line org	20700.00	25. 56.66		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

Net Contributions/Operating Expenditures COLUMN A Total This Period		COLUMN B Calendar Year-to-Date		
3. Total Contributions (other than loans) (from Line 11(d), page 3)	2033.70	2033.70		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2033.70	2033.70		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	4763.00	4763.00		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	4763.00	4763.00		

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F3XA Transaction ID :

Corrects cash-on-hand.

Form/Schedule: Transaction ID:

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE		: PAGE	7 OF	11	
(check only one)					
X 11a	11b	11c	12		
13	14	15	16	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.

or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
\rangle	NAME OF COMMITTEE (In Full) INTERNATIONAL FRANCHISE A	SSOCIATION FRANCHISING POLI	TICAL ACTION COMMITTEE INC			
Α.	Full Name (Last, First, Middle Initial) Mr. Max J. Schott, II CFE Mailing Address 500 IDS Center 80 South Eighth Street City Minneapolis FEC ID number of contributing federal political committee. Name of Employer Gray Plant Mooty Receipt For: Primary General Other (specify) Sull Name (Last, First, Middle Initial)	State Zip Code MN 55402-2100 C Occupation Principal Aggregate Year-to-Date ▼ 365.00	Date of Receipt M M / 29 2015 Transaction ID: 10145640 Amount of Each Receipt this Period 365.00			
В.	Full Name (Last, First, Middle Initial) Ms. Jisella Dolan Mailing Address 13323 California Street City Omaha FEC ID number of contributing federal political committee. Name of Employer Home Instead Senior Care Receipt For: Primary General Other (specify) Other (specify)	State Zip Code NE 68154-5240 C Occupation General Counsel Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M M			
C.	Full Name (Last, First, Middle Initial) Mr. Bill Grubb Mailing Address 1900 K Street Suite 700 City Washington FEC ID number of contributing federal political committee. Name of Employer International Franchise Association Receipt For: Primary General Other (specify)	State Zip Code DC 20006-1110 C Occupation SVP Finance and Administration Aggregate Year-to-Date ▼ 217.39	Date of Receipt M M M / 31			
Н	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of		1582.39			
Ι'	VIAL THIS I CHOO (IGST Page this line number t	/i '' y / · · · · · · · · · · · · · · · · · ·				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:					PAGE	8	OF	11	
(check only one)									
>	<	11a		11b		11c	12	!	
		13		14		15	16	;	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.

or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) INTERNATIONAL FRANCHISE A	SSOCIATION FRANCHISING POLI	ITICAL ACTION COMMITTEE INC
Full Name (Last, First, Middle Initial) Dean Heyl Mailing Address 1501 K Street, NWm Suite 35	Date of Receipt	
City	State Zip Code	01 31 2015
Washington	DC 20009	Transaction ID : PR396117912151 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	217.39
Name of Employer	Occupation	
International Franchise Association	Senior Director, State Government Affa	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 217.39	P/R Deduction (\$321.43 Bi-Weekly)
Full Name (Last, First, Middle Initial) 3.		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Allount of Lacif necespt this Period
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		217.39
TOTAL This Period (last page this line number	<u>^</u>	1799.78

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S	CHEDULE B (FEC Form 3X)		F05	NE NUMBER: PAGE 9 OF 11					
	· ·			FOR LINE NUMBER: (check only one)				OF II	
П	EMIZED DISBURSEMENTS	for each categ	ory of the	21b	22 F	23	24	25	□ 26
			Detailed Summary Page		28a	28b	24 28c	29	30b
_				27					
	ly information copied from such Reports and Stater for commercial purposes, other than using the nam								
<u> </u>	NAME OF COMMITTEE (In Full)	ic and address c	n arry politica	i committee to	JOHOIT GOTTE	battorio	110111 0001	1 00111111	
	INTERNATIONAL FRANCHISE ASS		DANCHIC	SINIC DOLL	TICAL A	TION		AITTE	EINC
/	INTERNATIONAL FRANCHISE ASS	OCIATION F	KANCHI	SING POLI	IICAL A	יוטוי	COM	VIIIIE	EINC
<u></u>	Full Name (Last, First, Middle Initial)								
Α.	CyberSource Corp.				Date of D	isburser	nent		
		M M / D D / Y Y Y Y			Y				
	Mailing Address PO Box 8999				01	02		2015	
			Code						
	City		Transac	tion ID ·	1015959	1			
	San Francisco	CA 941	28		Tranous		101000	•	
	Purpose of Disbursement Credit Card Transaction Fees	001	A pa a	f Eagle 5)ioh	ont #-!-	Doring		
				001	Amount o	ı ⊏ach L	Soursem	ient this	reriod
	Candidate Name			Category/				273	33.82
	Office Sought: House Dishurs	nont For:		Туре		7	7		
	Office Sought: House Disburser Senate		Gonoral		.		=		
	President	Other (specify)	General		Credit Card Transaction Fees				
	State: District:	Other (specify)	•						
_	Full Name (Last, First, Middle Initial)								
R					Date of D	iehurear	mant		
٥.	American Express								
	Mailing Address P.O. Box 53852				01 05 2015			Y	
	Walling / Radioss F.O. Box 33832				O1	00		2010	_
	City	State Zip	Code		T	Alam ID	4045050	•	
	Phoenix		072		Transac	tion ID	1015959	2	
	Purpose of Disbursement								
	Credit Card Transaction Fees			001	Amount o	f Each [Disbursem	ent this	Period
	Candidate Name			Category/				20-	13.18
				Туре		7	7	20	13.10
	Office Sought: House Disburser	_	1 -						
	Senate	Primary	General		Credit Car	d Transa	action Fee	s	
	President	Other (specify)	▼						
_	State: District:								
_	Full Name (Last, First, Middle Initial)				D-4 (D	: _ l			
C.					Date of D	isburser	nent 		
						/ D I	D / Y	YY	Y
	Mailing Address								
	City	State Zip	Code						
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	Purpose of Disbursement								
					Amount o	f Each Γ	Disbursem	ent this	Period
	Candidate Name		Category/	Amount of Each Disbursement this Period					
			Type						
	Office Sought: House Disburser	nent For:	I			,			
	Senate	Primary	General						
	President	Other (specify)	▼						
_	State: District:								
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s	UBTOTAL of Disbursements This Page (optional)					7	1 0	474	7.00
\vdash				<u> </u>		-		- 1	7.00
ĺτ	OTAL This Period (last nage this line number only)							474	7.00

S 17

SCHEDULE B (FEC Form 3X)		FOR THE	OR LINE NUMBER: PAGE 10 OF 11				
•	Use separate schedule(s)	-	FOR LINE NUMBER: PAGE 10 OF 11 (check only one)				
ITEMIZED DISBURSEMENTS	for each category of the	21b	22 💢 23 24 25 26				
	Detailed Summary Page	27	28a 28b 28c 29 30b				
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NAME OF COMMITTEE (In Full)	and and on any pointed						
INTERNATIONAL FRANCHISE AS	SUCIVIUM EDVIUM	SING POLI					
/ IIVTERIVATIONAL FRANCHISE AS	SOCIATION FRANCHI	SING PULI	TICAL ACTION COMMITTEE INC				
Full Name (Last, First, Middle Initial)		İ					
A. National Republican Congression	nal Committee		Date of Disbursement				
radional Republican Congression	iai Committee		M M / D D / Y Y Y Y				
Mailing Address 320 First Street, SE			01 27 2015				
City	State Zip Code		Transaction ID : 4044.4659				
Washington	DC 20003		Transaction ID: 10114658				
Purpose of Disbursement							
		011	Amount of Each Disbursement this Period				
Candidate Name	-1.0	Category/	15000.00				
National Republican Congression	I	Type	13000.00				
	sement For:						
Senate	Primary General						
President	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial)			D . (D)				
B. National Republican Senatorial C	ommittee		Date of Disbursement				
Mailing Address 107.0			M M / D D / Y Y Y Y				
Mailing Address 425 Second Street, NE			01 27 2015				
City	State Zip Code						
Washington	DC 20002		Transaction ID: 10114659				
Purpose of Disbursement	20002						
· ·	20002	011	Amount of Each Disbursement this Period				
· ·	20002						
Purpose of Disbursement	20002	011 Category/ Type	Amount of Each Disbursement this Period				
Purpose of Disbursement Candidate Name	sement For:	Category/					
Purpose of Disbursement Candidate Name		Category/					
Purpose of Disbursement Candidate Name Office Sought: House Disbur	sement For:	Category/					
Purpose of Disbursement Candidate Name Office Sought: House Disbur Senate	sement For:	Category/					
Purpose of Disbursement Candidate Name Office Sought: House Disbur Senate President	sement For:	Category/					
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial)	ement For: Primary General Other (specify)	Category/					
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Democratic Congressional Camp	ement For: Primary General Other (specify)	Category/	15000.00				
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial)	ement For: Primary General Other (specify)	Category/	Date of Disbursement				
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Democratic Congressional Camp Mailing Address 430 South Capitol Street SE	ement For: Primary General Other (specify) aign Committee	Category/	Date of Disbursement				
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Democratic Congressional Camp Mailing Address 430 South Capitol Street SE City	ement For: Primary General Other (specify) aign Committee State Zip Code	Category/	Date of Disbursement				
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Democratic Congressional Camp Mailing Address 430 South Capitol Street SE City Washington	ement For: Primary General Other (specify) aign Committee	Category/	Date of Disbursement M M / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Democratic Congressional Camp Mailing Address 430 South Capitol Street SE City	ement For: Primary General Other (specify) aign Committee State Zip Code	Category/ Type	Date of Disbursement M M / 27 / 2015 Transaction ID : 10114660				
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Democratic Congressional Camp Mailing Address 430 South Capitol Street SE City Washington	ement For: Primary General Other (specify) aign Committee State Zip Code	Category/ Type	Date of Disbursement M M / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Democratic Congressional Camp Mailing Address 430 South Capitol Street SE City Washington Purpose of Disbursement	ement For: Primary General Other (specify) aign Committee State Zip Code	Category/ Type 011 Category/	Date of Disbursement M M / 27 / 2015 Transaction ID : 10114660				
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Democratic Congressional Camp Mailing Address 430 South Capitol Street SE City Washington Purpose of Disbursement Candidate Name	State Zip Code DC 20003	Category/ Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Democratic Congressional Camp Mailing Address 430 South Capitol Street SE City Washington Purpose of Disbursement Candidate Name	ement For: Primary General Other (specify) aign Committee State Zip Code DC 20003	Category/ Type 011 Category/	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Democratic Congressional Camp Mailing Address 430 South Capitol Street SE City Washington Purpose of Disbursement Candidate Name Office Sought: House Disbur	ement For: Primary General Other (specify) aign Committee State Zip Code DC 20003	Category/ Type 011 Category/	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Democratic Congressional Camp Mailing Address 430 South Capitol Street SE City Washington Purpose of Disbursement Candidate Name Office Sought: House Disbur Senate	ement For: Primary General Other (specify) aign Committee State Zip Code DC 20003 Sement For: Primary General	Category/ Type 011 Category/	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Democratic Congressional Camp Mailing Address 430 South Capitol Street SE City Washington Purpose of Disbursement Candidate Name Office Sought: House Senate President	ement For: Primary General Other (specify) aign Committee State Zip Code DC 20003 Sement For: Primary General	Category/ Type 011 Category/	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Democratic Congressional Camp Mailing Address 430 South Capitol Street SE City Washington Purpose of Disbursement Candidate Name Office Sought: House Disbur Senate President State: District:	ement For: Primary	Category/ Type 011 Category/ Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Democratic Congressional Camp Mailing Address 430 South Capitol Street SE City Washington Purpose of Disbursement Candidate Name Office Sought: House Senate President	ement For: Primary	Category/ Type 011 Category/ Type	Date of Disbursement M M / 27 / 2015 Transaction ID: 10114660 Amount of Each Disbursement this Period				

SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 11 OF 11			
ITEMIZED DISBURSEMENTS	Use separate schedule(s	(check only one)				
IT LIVITZED DISDUNSEIVIEN 13	for each category of the	21b	22 🔀 23 🗆 24 🗆 25 🖂 26			
	Detailed Summary Page	27	28a 28b 28c 29 30k			
Any information copied from such Reports and	Statements may not be sold or u	sed by any nere	on for the purpose of soliciting contributions			
or for commercial purposes, other than using the						
NAME OF COMMITTEE (In Full)						
· · · · · ·	ASSOCIATION FRANCE	HISING POL	ITICAL ACTION COMMITTEE INC			
Full Name (Last, First, Middle Initial)						
A. New Democrat Coalition			Date of Disbursement			
Mailing Addington						
Mailing Address 700 13TH STREET, NW		01 27 2015				
SUITE 600 City	State Zip Code					
Washington	DC 20005		Transaction ID : 10114661			
Purpose of Disbursement	2000					
•		011	Amount of Each Disbursement this Period			
Candidate Name		Category/				
New Democrat Coalition		Type	5000.00			
Office Sought: House Dis	bursement For:	•				
Senate	Primary General					
President	Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial)						
B. Blue Dog PAC			Date of Disbursement			
Marks A. C.			M - M / D - D / Y - Y - Y - Y			
Mailing Address 6849 Old Dominion Drive			01 27 2015			
City	State Zip Code					
City McLean	State Zip Gode VA 22101		Transaction ID : 10114662			
Purpose of Disbursement	££ 10 1					
		011	Amount of Each Disbursement this Period			
Candidate Name		Category/				
Blue Dog PAC		Type	5000.00			
	bursement For:					
Senate	Primary General					
President	Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial)						
C. Lisa Murkowski For U.S. Sena	te		Date of Disbursement			
Matter Add			M M / D D / Y Y Y Y			
Mailing Address PO Box 100847			01 27 2015			
City	State Zip Code					
City Anchorage	AK 99510		Transaction ID : 10114665			
Purpose of Disbursement	50010					
		011	Amount of Each Disbursement this Period			
Candidate Name		Category/				
Lisa Murkowski		Type	5000.00			
Office Sought: House Dis	bursement For: 2016					
X Senate	Primary General					
President	Other (specify) ▼					
State: AK District:						
SUBTOTAL of Disbursements This Page (opti	onal)	·····•	15000.00			
			55000.00			
TOTAL This Period (last page this line numbe	r only)		ວວບບ.ບປ			