

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 Washington DC 20005 Check if different than previously reported. (ACC)

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special, Runoff (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 07 01 2008 through 07 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 09 18 2008

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 FE6AN026 FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
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|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |          |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|----------|
| 6. (a) Cash on Hand<br>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<br>Beginning of Reporting Period .....  | 106566.46               |                                   |   |   |   |   |   |   |  |          |
| (c) Total Receipts (from Line 19) .....   | 13140.00                | 199831.00                         |   |   |   |   |   |   |  |          |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 119706.46               | 272801.76                         |   |   |   |   |   |   |  |          |
| 7. Total Disbursements (from Line 31) .....   | 15063.35                | 168158.65                         |   |   |   |   |   |   |  |          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 104643.11               | 104643.11                         |   |   |   |   |   |   |  |          |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |          |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>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 |
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 To: 

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|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 12540.00                      | 179108.00                         |
| (i) Itemized (use Schedule A) .....  |                               |                                   |
| (ii) Unitemized .....  | 600.00                        | 5723.00                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 13140.00                      | 184831.00                         |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 0.00                          | 15000.00                          |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     | 13140.00                      | 199831.00                         |
| 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)) .....                          | 13140.00                      | 199831.00                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 13140.00                      | 199831.00                         |

**DETAILED SUMMARY PAGE**

of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>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.....         | 15000.00                      | 162000.00                         |
| 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 .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                           | 0.00                          | 0.00                              |
| 29. Other Disbursements.....   | 63.35                         | 409.65                            |
| 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))..       | 15063.35                      | 168158.65                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 15063.35                      | 168158.65                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                    | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3 .....         | 13140.00                      | 199831.00                         |
| 34. Total Contribution Refunds (from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....   | 13140.00                      | 199831.00                         |
| 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: (check only one)   | PAGE 6 / 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

|   |   |                              |   |
|---|---|------------------------------|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Sidney Feltenstein       |                              | Date of Receipt   |
|   | Mailing Address 5328 North Bay Road                                 |                              | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>07 / 01 / 2008 |
|   | City  | State                        | Zip Code  |
|   | Miami Beach   | FL                           | 33140-2041  |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                              | Transaction ID: 4426776   |
| Name of Employer<br>Sagittarius Brands  |   | Occupation<br>Chairman       | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼     | <input type="text"/><br>100.00  |
|   |   | <input type="text"/> 3100.00 |   |

|   |   |                              |   |
|---|---|------------------------------|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Michael D. Joblove       |                              | Date of Receipt   |
|   | Mailing Address 100 SE 2nd Street                                   |                              | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>07 / 01 / 2008 |
|   | City  | State                        | Zip Code  |
|   | Miami   | FL                           | 33131-2100  |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                              | Transaction ID: 4426778   |
| Name of Employer<br>Genovese Joblove & Battista   |   | Occupation<br>Partner        | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼     | <input type="text"/><br>200.00  |
|   |   | <input type="text"/> 1200.00 |   |

|   |   |                             |   |
|---|---|-----------------------------|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Ms. Cindy Neal           |                             | Date of Receipt   |
|   | Mailing Address 4111 North Prospect Road, #3                        |                             | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>07 / 01 / 2008 |
|   | City  | State                       | Zip Code  |
|   | Peoria Heights  | IL                          | 61616-7773  |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                             | Transaction ID: 4426779   |
| Name of Employer<br>Express Employment Professionals of Peoria  |   | Occupation<br>Franchisee    | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼    | <input type="text"/><br>100.00  |
|   |   | <input type="text"/> 465.00 |   |

|  |                             |
|--|-----------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text"/> 400.00 |
| <b>TOTAL</b> 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: PAGE 7 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Barbara Moran

Mailing Address 4444 West 147th Street

City State Zip Code  
Midlothian IL 60445-2644

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Moran Industries, Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4915.00

Date of Receipt 07 / 01 / 2008

**Transaction ID:** 4426780

Amount of Each Receipt this Period 1250.00

**B.** Full Name (Last, First, Middle Initial)  
Russell J. Frith

Mailing Address 142 State Route 34

City State Zip Code  
Holmdel NJ 07733-2090

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Lawn Doctor Inc. President, CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3200.00

Date of Receipt 07 / 01 / 2008

**Transaction ID:** 4426781

Amount of Each Receipt this Period 700.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John W. Francis

Mailing Address 1637 Highland Parkway

City State Zip Code  
St. Paul MN 55116-2163

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
PostNet of MN & WI Franchisee

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 565.00

Date of Receipt 07 / 01 / 2008

**Transaction ID:** 4426782

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... 2050.00

**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 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

|   |   |   |
|---|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Barry E Miller             | Date of Receipt<br>MM / DD / YYYY<br>07 / 01 / 2008 |
|   | Mailing Address 930 Royal Arms Drive                                  | <b>Transaction ID:</b> 4426783                      |
|   | City State Zip Code<br>Girard OH 44420-1652                           | Amount of Each Receipt this Period<br>100.00        |
|   | FEC ID number of contributing federal political committee.<br>C       |   |
|   | Name of Employer Occupation<br>NBM Management Inc. Executive Director |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>600.00                                    |   |

|   |  |   |
|---|--|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Matthew R. Shay             | Date of Receipt<br>MM / DD / YYYY<br>07 / 10 / 2008 |
|   | Mailing Address 3811 Benton Street, NW                                 | <b>Transaction ID:</b> 4547972                      |
|   | City State Zip Code<br>Washington DC 20007-1712                        | Amount of Each Receipt this Period<br>1700.00       |
|   | FEC ID number of contributing federal political committee.<br>C        |   |
|   | Name of Employer Occupation<br>International Franchise Assn. President |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2450.00                                    |   |

|   |   |   |
|---|---|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Lori Shaffron                                  | Date of Receipt<br>MM / DD / YYYY<br>07 / 10 / 2008 |
|   | Mailing Address 800 Market Avenue North   | <b>Transaction ID:</b> 4547973                      |
|   | City State Zip Code<br>Canton OH 44702-1083   | Amount of Each Receipt this Period<br>250.00        |
|   | FEC ID number of contributing federal political committee.<br>C                           |   |
|   | Name of Employer Occupation<br>Sarah Adult Day Services, Inc. VP of Franchise Development |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>615.00  |   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2050.00 |
| <b>TOTAL</b> 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 / 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

|   |  |   |
|---|--|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Dina Dwyer-Owens            | Date of Receipt<br>MM / DD / YYYY<br>07 / 10 / 2008 |
|   | Mailing Address P.O. Box 3146  | <b>Transaction ID:</b> 4547974                      |
|   | City State Zip Code<br>Waco TX 76707-0146                              | Amount of Each Receipt this Period<br>3450.00       |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> |   |
| Name of Employer<br>The Dwyer Group   | Occupation<br>President/CEO  |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>4800.00                                    |   |

|   |  |   |
|---|--|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Dawn A. Lawin               | Date of Receipt<br>MM / DD / YYYY<br>07 / 10 / 2008 |
|   | Mailing Address 800 Washington Avenue, North                           | <b>Transaction ID:</b> 4547975                      |
|   | City State Zip Code<br>Minneapolis MN 55401-1286                       | Amount of Each Receipt this Period<br>1100.00       |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> |   |
| Name of Employer<br>Hot Dish Advertising  | Occupation<br>President  |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1100.00                                    |   |

|   |  |   |
|---|--|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Mr. Julius L Shaw           | Date of Receipt<br>MM / DD / YYYY<br>07 / 10 / 2008 |
|   | Mailing Address 3429 Pierson Place                                     | <b>Transaction ID:</b> 4547976                      |
|   | City State Zip Code<br>Flushing MI 48433-2413                          | Amount of Each Receipt this Period<br>600.00        |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> |   |
| Name of Employer<br>The Coffee Beanery, Ltd.  | Occupation<br>Chairman of the Board                                    |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>600.00                                     |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | 5150.00 |
| <b>TOTAL</b> 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 10 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary Beth Brody

Mailing Address 2200 Wells Fargo Center

City State Zip Code  
Minneapolis MN 55402

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

Name of Employer Occupation  
Faegre & Benson LLP Special Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2008

**Transaction ID:** 4549304

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mark Dely

Mailing Address 3839 Forest Hill Irene Road

City State Zip Code  
Memphis TN 38125-2502

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

Name of Employer Occupation  
ServiceMaster Company General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
MM / DD / YYYY  
07 / 21 / 2008

**Transaction ID:** 4579034

Amount of Each Receipt this Period  
365.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Curt Bembenek

Mailing Address 2522 Fish Hatchery Road, #100

City State Zip Code  
Madison WI 53713-2446

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

Name of Employer Occupation  
ServiceMaster of Dane County, WI Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
07 / 21 / 2008

**Transaction ID:** 4579035

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1065.00**

**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 11 / 16                 |
|   | <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

|           |   |   |
|-----------|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Mr. Reginald Heard   | Date of Receipt<br>MM / DD / YYYY<br>07 / 21 / 2008 |
|           | Mailing Address 10 South Street, #71  | <b>Transaction ID:</b> 4579038                      |
|           | City State Zip Code<br>Danbury CT 06810-3104  | Amount of Each Receipt this Period<br>175.00        |
|           | FEC ID number of contributing federal political committee.<br>C   |   |
|           | Name of Employer Bankers One Capital<br>Occupation President<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>540.00 |   |

|           |  |   |
|-----------|--|---|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>John Jack Earle   | Date of Receipt<br>MM / DD / YYYY<br>07 / 21 / 2008 |
|           | Mailing Address 60 East Main Street  | <b>Transaction ID:</b> 4579039                      |
|           | City State Zip Code<br>Marlton NJ 08053-2176   | Amount of Each Receipt this Period<br>1450.00       |
|           | FEC ID number of contributing federal political committee.<br>C  |   |
|           | Name of Employer Earle Enterprises<br>Occupation Owner<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>3315.00 |   |

|           |   |   |
|-----------|---|---|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>James M. Lipson  | Date of Receipt<br>MM / DD / YYYY<br>07 / 21 / 2008 |
|           | Mailing Address 444 North Michigan Avenue   | <b>Transaction ID:</b> 4579040                      |
|           | City State Zip Code<br>Chicago IL 60611-3903  | Amount of Each Receipt this Period<br>100.00        |
|           | FEC ID number of contributing federal political committee.<br>C   |   |
|           | Name of Employer Gannett/Franchise Xpress<br>Occupation Vice President/Sales<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>465.00 |   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1725.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|   |                              |                              |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             |                              | PAGE 12 / 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"/> 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. Reginald Heard

Mailing Address 10 South Street, #71

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Danbury | CT    | 06810-3104 |

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

|   |                         |
|---|-------------------------|
| Name of Employer<br>Bankers One Capital | Occupation<br>President |
|---|-------------------------|

Receipt For:

Primary     General

Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 21 / 2008

Transaction ID: 4579041

Amount of Each Receipt this Period

100.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 100.00   |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 12540.00 |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

**A.** Full Name (Last, First, Middle Initial)  
Gene Taylor For Congress Committee

Mailing Address P.O. Box 38

City Bay St. Louis State MS Zip Code 39520

Purpose of Disbursement

Category/  
Type

Candidate Name  
Gene Taylor

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MS District: 04

Transaction ID: 4583273

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
Cantor For Congress

Mailing Address P.O. Box 17813

City Richmond State VA Zip Code 23226

Purpose of Disbursement

Category/  
Type

Candidate Name  
Eric Cantor

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: VA District: 07

Transaction ID: 4583274

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
Olson For Congress Committee

Mailing Address PO Box 16381

City Sugar Land State TX Zip Code 77496

Purpose of Disbursement

Category/  
Type

Candidate Name  
Mr. Peter Olson

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: TX District: 22

Transaction ID: 4583275

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

|   |  |
|---|--|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Friends Of Erik Paulsen<br><hr/> Mailing Address PO Box 44369<br><hr/> City Eden Prairie State MN Zip Code 55344<br>Purpose of Disbursement<br><hr/> Candidate Name Mr. Erik Paulsen<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: MN District: 03<br>Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: 4583276<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 7 / 2 3 / 2 0 0 8  |
|   | Amount of Each Disbursement this Period<br>2500.00   |
|   | 011<br>Category/<br>Type   |
|   | Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>Boren for Congress 2006<br><hr/> Mailing Address P.O. Box 1924<br><hr/> City Muskogee State OK Zip Code 74401<br>Purpose of Disbursement<br><hr/> Candidate Name David Boren<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: OK District: 02<br>Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼         | Transaction ID: 4583277<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 7 / 2 3 / 2 0 0 8  |
|   | Amount of Each Disbursement this Period<br>2500.00   |
|   | 011<br>Category/<br>Type   |
|   | Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>Moran For Kansas<br><hr/> Mailing Address P.O. Box 1151<br><hr/> City Hays State KS Zip Code 67601<br>Purpose of Disbursement<br><hr/> Candidate Name Jerry Moran<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: KS District: 01<br>Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                    | Transaction ID: 4583278<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 7 / 2 3 / 2 0 0 8  |
|   | Amount of Each Disbursement this Period<br>1000.00   |
|   | 011<br>Category/<br>Type   |
|   | Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

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

6000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Kuhl For Congress</p> <p>Mailing Address 10 Ganesvoort Street<br/>Suite 101</p> <p>City Bath State NY Zip Code 14810</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span><br/>Category/Type</p> <p>Candidate Name<br/>Rep. John Kuhl, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: NY District: 29</p> <p>Disbursement For: 2008<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>        | <p><b>Transaction ID:</b> 4583279</p> <p>Date of Disbursement<br/><span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">23</span> / <span style="border: 1px solid black; padding: 2px;">2008</span></p> <p>Amount of Each Disbursement this Period<br/><span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">1000.00</span></p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Dave Camp For Congress 2008</p> <p>Mailing Address 5915 Eastman Ave. Suite 100</p> <p>City Midland State MI Zip Code 48640</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span><br/>Category/Type</p> <p>Candidate Name<br/>Rep. David Camp</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: MI District: 04</p> <p>Disbursement For: 2008<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>      | <p><b>Transaction ID:</b> 4583280</p> <p>Date of Disbursement<br/><span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">23</span> / <span style="border: 1px solid black; padding: 2px;">2008</span></p> <p>Amount of Each Disbursement this Period<br/><span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">1000.00</span></p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Jay Love For Congress Committee</p> <p>Mailing Address 1020 Monticello Ct Suite 205</p> <p>City Montgomery State AL Zip Code 36117</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span><br/>Category/Type</p> <p>Candidate Name<br/>Mr. Jay Love</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: AL District: 02</p> <p>Disbursement For: 2008<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> 4583281</p> <p>Date of Disbursement<br/><span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">23</span> / <span style="border: 1px solid black; padding: 2px;">2008</span></p> <p>Amount of Each Disbursement this Period<br/><span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">2500.00</span></p> |

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

4500.00

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

15000.00

**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 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 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 State Zip Code  
Clinton MD 20735

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Transaction ID: 4609724

Date of Disbursement

07 / 01 / 2008

Amount of Each Disbursement this Period

57.40

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

57.40

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

57.40