

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

ADDRESS (number and street) ▼

1900 K Street NW

Suite 700

☐ Check if different than previously reported. (ACC)

Washington

DC

20006

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00084491

3. IS THIS REPORT ☐ NEW (N) OR ☒ AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly Report Due On: ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only) ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only) ☒ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on

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

in the  
State of(d) 30-Day POST-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

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

in the  
State of

5. Covering Period 03 / 01 / 2015 through 03 / 31 / 2015

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

Type or Print Name of Treasurer Mr. Robert Cresanti

Signature of Treasurer

Mr. Robert Cresanti

[Electronically Filed]

Date

10

19

2015

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**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 / D D / Y Y Y Y Y Y  
03 01 2015 To: M M / D D / Y Y Y Y Y Y  
03 31 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2015</span>		<span style="border: 1px solid black; padding: 2px;">360876.68</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">291275.46</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">33920.10</span>	<span style="border: 1px solid black; padding: 2px;">68716.60</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">325195.56</span>	<span style="border: 1px solid black; padding: 2px;">429593.28</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">52585.40</span>	<span style="border: 1px solid black; padding: 2px;">156983.12</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">272610.16</span>	<span style="border: 1px solid black; padding: 2px;">272610.16</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Report Covering the Period:

From:

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

To:

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

**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).....

33255.12

67667.26

(ii) Unitemized .....

664.98

1049.34

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

33920.10

68716.60

(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) .....

33920.10

68716.60

## 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))..... ▶

33920.10

68716.60

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

33920.10

68716.60

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	85.40	24483.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	85.40	24483.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	52500.00	132500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	52585.40	156983.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	52585.40	156983.12

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	33920.10	68716.60
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	33920.10	68716.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	85.40	24483.12
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	85.40	24483.12

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A=N5HCB  
.

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 NUMBER: PAGE 7 OF 26

(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.

NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Ms. Melanie Bergeron CFE**

Mailing Address 12 Skipper Ln

City State Zip Code  
Okemos MI 48864-3195

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Two Men And A Truck International, Inc

Occupation  
Chairwoman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : 10222064**

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

**B. Mr. William Edwards CFE**

Mailing Address 504 Cancha

City State Zip Code  
Newport Beach CA 92660-3508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Edwards Global Services

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : 10222065**

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Tim Lightner CFE**

Mailing Address 5501 Shale Road

City State Zip Code  
Fitchburg WI 53711-4940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Two Men And A Truck of Madison and Rac

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : 10222066**

Amount of Each Receipt this Period

625.00

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

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

3125.00

# **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 8 OF 26

☒ 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 (Last, First, Middle Initial)

## **A. Ms. Karen Powell CFE**

Mailing Address 99 Pond View Drive

City  
Southbury

State  
CT

Zip Code  
06488-1129

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FranchisEsource Brands International

Occupation

President - Founder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : 10222068**

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

## **B. Ms. Catherine Monson CFE**

Mailing Address 5305 Corinthian Bay Dr

City  
Plano

State  
TX

Zip Code  
75093-4123

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FASTSIGNS International

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : 10222069**

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Tom Epstein CFE**

Mailing Address 8027 Canyon Lic Circle

City  
Orlando

State  
FL

Zip Code  
32835

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Franchise Payments Network

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : 10222070**

Amount of Each Receipt this Period

1250.00

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

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

3750.00



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

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

 FOR LINE NUMBER: PAGE 9 OF 26  
 (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 (Last, First, Middle Initial)

**A. Mr. Joseph H. Bourdow CFE**

Mailing Address 450 Bath Club Blvd. South

City	State	Zip Code
North Redington Beach	FL	33708-1536

FEC ID number of contributing federal political committee.

C

Name of Employer

Valpak

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

Transaction ID : 10222072

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Don Fox**

Mailing Address 1141 Buckbean Branch Lane East

City	State	Zip Code
Saint Johns	FL	32259-4352

FEC ID number of contributing federal political committee.

C

Name of Employer

Firehouse Subs

Occupation

COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

Transaction ID : 10222074

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Gary Goerke CFE**

Mailing Address 6012 Greatwater Drive

City	State	Zip Code
Windermere	FL	34786-5600

FEC ID number of contributing federal political committee.

C

Name of Employer

Clarity Voice

Occupation

President/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

Transaction ID : 10222075

Amount of Each Receipt this Period

1250.00

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

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

2750.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 26

(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 (Last, First, Middle Initial)

A. Mr. R. Earl Johnson CFE

Mailing Address 10702 Green Mount Road

City State Zip Code  
 Henrico VA 23238-3511

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Rainbow Station, Inc.

Occupation  
 VP, Real Estate/Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 18 2015

Transaction ID : 10222097

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

B. Ms. Gail W Johnson CFE

Mailing Address 10702 Green Mount Road

City State Zip Code  
 Henrico VA 23238-3511

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Rainbow Station, Inc.

Occupation  
 President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 18 2015

Transaction ID : 10222098

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

C. Ms. Barbara Moran-Goodrich CFE

Mailing Address 14110 S. 85th Ave.

City State Zip Code  
 Orland Park IL 60462-4283

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Moran Family of Brands

Occupation  
 President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 18 2015

Transaction ID : 10222099

Amount of Each Receipt this Period

1250.00

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

3750.00

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 OF 26

☒ 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 (Last, First, Middle Initial)

**A. Mr. Ryan Cunningham**

Mailing Address 3981 Nassau Circle West

City State Zip Code  
 Englewood CO 80113-5126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Javelin Solutions

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : 10222100**

Amount of Each Receipt this Period

625.00

Full Name (Last, First, Middle Initial)

**B. Mr. Thomas Scalese CFE**

Mailing Address 100 Cambridge Plaza Drive

City State Zip Code  
 Winston Salem NC 27104-3556

FEC ID number of contributing  
federal political committee.

C

Name of Employer

East Coast Wings & Grill

Occupation

VP of Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : 10222101**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Daniel Mormino**

Mailing Address 6263 North Scottsdale Road, Suite

City State Zip Code  
 Scottsdale AZ 85250-5411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Infiniti HR

Occupation

Division Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : 10222102**

Amount of Each Receipt this Period

1250.00

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

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

2125.00

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 26  
(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 (Last, First, Middle Initial)

**A. Mr. Sanford Lechner CFE**

Mailing Address 9441 NW 13th Street

City	State	Zip Code
Plantation	FL	33322-4201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

LED Source

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

**Transaction ID : 10222103**

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

**B. Mr. John W Francis**

Mailing Address 2280 Rivewood Place

City	State	Zip Code
Saint Paul	MN	55104-5646

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Sport Clips, Inc.

Area Franchisee MN &amp; WI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

**Transaction ID : 10222104**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Ritchie Taylor CFE**

Mailing Address 3510 Rock Creek Drive

City	State	Zip Code
Raleigh	NC	27609-7125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Manning, Fulton &amp; Skinner, P.A.

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

**Transaction ID : 10222105**

Amount of Each Receipt this Period

250.00

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

1750.00

**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

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(check only one)

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☒ 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 (Last, First, Middle Initial)

## **A. Mr. Doug Groves**

Mailing Address 3609 Williams Drive, Suite 101

City State Zip Code  
 Georgetown TX 78628-2510

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Program Insurance Group

Occupation

Insurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : 10222106**

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Robert Stidham**

Mailing Address 2603 Crane Court

City State Zip Code  
 Naperville IL 60564-5904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Franchise Dynamics, LLC

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : 10232030**

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

## **C. Ms. Nancy Bigley CFE**

Mailing Address 3719 Ponderosa Way, E.

City State Zip Code  
 Palm Springs CA 92264-3539

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bottle & Bottega

Occupation

Senior Director of Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : 10232031**

Amount of Each Receipt this Period

250.00

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

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

2750.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Mitch Cohen**

Mailing Address 1401 Brentwood rd

City

State

Zip Code

Bay Shore

NY

11706-5251

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Baskin Robbins/Dunkin' Donuts Bayshore

Owner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

03 / 25 / 2015

Transaction ID : 10232032

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Sean Trumbo**

Mailing Address 3024 N. Market Street, #D

City

State

Zip Code

Fayetteville

AR

72703-3566

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

BrightStar Care of Fayetteville, AR

Owner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

03 / 25 / 2015

Transaction ID : 10232033

Amount of Each Receipt this Period

625.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Robert McDevitt CFE**

Mailing Address 5513 Somerford Lane

City

State

Zip Code

Raleigh

NC

27614-9841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Golden Corral Buffet & Grill

SVP, Franchising

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 25 / 2015

Transaction ID : 10232035

Amount of Each Receipt this Period

250.00

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

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

1375.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Mr. Jeffrey L. Tews**

Mailing Address 1716 Brookside Lane

City

Waunakee

State

WI

Zip Code

53597-2621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BrightStar Care of Madison, WI

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : 10244666**

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Mark Liston CFE**

Mailing Address 506 Sienna Bend Trail

City

Mc Gregor

State

TX

Zip Code

76657-3809

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Glass Doctor

Occupation

VP, Sales & Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : 10244667**

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Mark Kirsch CFE**

Mailing Address 10901 Larkmeade Lane

City

Potomac

State

MD

Zip Code

20854-2747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gray Plant Mooty

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : 10244668**

Amount of Each Receipt this Period

5000.00

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

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

7500.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial)

**A. Mr. Roger Baumgart**

Mailing Address 10618 Adams Drive

City State Zip Code  
Omaha NE 68127-4541

FEC ID number of contributing federal political committee.

C

Name of Employer  
Home Instead Senior Care

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2015

Transaction ID : 10244669

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Ignacio Cespedes**

Mailing Address 210 Estates Drive, #108

City State Zip Code  
Roseville CA 95678-2300

FEC ID number of contributing federal political committee.

C

Name of Employer  
BrightStar Care of Roseville, CA

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2015

Transaction ID : 10244670

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

**C. Mr. Mark Jameson**

Mailing Address 2542 Highlander Way

City State Zip Code  
Carrollton TX 75006-3312

FEC ID number of contributing federal political committee.

C

Name of Employer  
FASTSIGNS International

Occupation  
Senior Vice President, Franchise Devel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2015

Transaction ID : 10244671

Amount of Each Receipt this Period

365.00

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

1230.00

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



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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial)

A. Mr. Thomas Gilday

Mailing Address 1125 Tri-State Parkway  
Suite 700

City State Zip Code  
Gurnee IL 60031-9177

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BrightStar Franchising, LLC

Occupation  
Businessman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

Transaction ID : 10244672

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mr. Paul R Hogan

Mailing Address 13323 California Street

City State Zip Code  
Omaha NE 68154-5240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Home Instead Senior Care

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2015

Transaction ID : 10245243

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Mr. Derek Kropp

Mailing Address 7825 Washington Avenue South  
Suite 800

City State Zip Code  
Minneapolis MN 55439-2441

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bluewater

Occupation  
VP, Sales & Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2015

Transaction ID : 10273096

Amount of Each Receipt this Period

-5000.00

Returned check, originally reported in March monthly  
report

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

1000.00

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

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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Mr John Ansel**

Mailing Address 642 S. Loop Parkway

City

Saint Augustine

State

FL

Zip Code

32095-6833

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FASTSIGNS of Jacksonville, FL

Occupation

Franchise Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

03 / 31 / 2015

**Transaction ID : 10273097**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Ms. Alisa Harrison**

Mailing Address 1900 K Street  
Suite 700

City

Washington

State

DC

Zip Code

20006-1110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

International Franchise Association

Occupation

Vice President, Communications & Marke

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

714.30

Date of Receipt

03 / 31 / 2015

**Transaction ID : 1520706**

Amount of Each Receipt this Period

476.20

Full Name (Last, First, Middle Initial)

**C. Mr. Christopher Krueger**

Mailing Address 1900 K Street NW  
Suite 700

City

Washington

State

DC

Zip Code

20006-1110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

International Franchise Association

Occupation

Director, Grassroots Advocacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.40

Date of Receipt

03 / 31 / 2015

**Transaction ID : 4259699**

Amount of Each Receipt this Period

86.96

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

1063.16

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

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

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NAME OF COMMITTEE (In Full)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial)

**A. Mr. Bill Grubb**
 Mailing Address 1900 K Street  
 Suite 700

 City State Zip Code  
 Washington DC 20006-1110

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 International Franchise Association

 Occupation  
 SVP Finance and Administration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1086.95

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2015

Transaction ID : 4282546

Amount of Each Receipt this Period

434.78

Full Name (Last, First, Middle Initial)

**B. Erica Fitzsimmons**

Mailing Address 1501 K Street, NW, Suite 350

 City State Zip Code  
 Washington DC 20005-1412

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 International Franchise Association

 Occupation  
 Director, Political Affairs and Grass

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.50

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2015

Transaction ID : PR385120512323

Amount of Each Receipt this Period

217.40

P/R Deduction (\$108.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Dean Heyl**

Mailing Address 1501 K Street, NWm Suite 350

 City State Zip Code  
 Washington DC 20009

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 International Franchise Association

 Occupation  
 Senior Director, State Government Affa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1086.95

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2015

Transaction ID : PR396117912323

Amount of Each Receipt this Period

434.78

P/R Deduction (\$321.43 Bi-Weekly)

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

1086.96

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

33255.12

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial)

**A. CyberSource Corp.**

Mailing Address PO Box 8999

City	State	Zip Code
San Francisco	CA	94128

Purpose of Disbursement  
Credit Card Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2015

Transaction ID : 10245598

Amount of Each Disbursement this Period

57.40
-------

Credit Card Transaction Fees

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

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

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

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

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

--

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

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

57.40
-------

57.40
-------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<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

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

NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Dan Lipinski For Congress**

Mailing Address P.O. Box 520

City  
Western SpringsState  
ILZip Code  
60558Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Daniel Lipinski**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2015

**Transaction ID : 10220680**

Amount of Each Disbursement this Period

5000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. Carlos Curbelo Congress**

Mailing Address 8770 Sunset Drive #355

City  
MiamiState  
FLZip Code  
33173Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Carlos Curbelo**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2015

**Transaction ID : 10220681**

Amount of Each Disbursement this Period

5000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**C. David Vitter For US Senate**

Mailing Address P.O. Box 8175

City  
MetairieState  
LAZip Code  
70011Purpose of Disbursement  
Contribution

Candidate Name

**David Vitter**Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: LA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2015

**Transaction ID : 10220683**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

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

11000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Reclaim America PAC**

Mailing Address 228 S WASHINGTON ST STE 115

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
2015 Contribution

011

Candidate Name

**Reclaim America PAC**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		16		2015

**Transaction ID : 10220684**

Amount of Each Disbursement this Period

5000.00
---------

2015 Contribution

Full Name (Last, First, Middle Initial)

**B. Scalise For Congress**

Mailing Address PO Box 23219

City	State	Zip Code
Jefferson	LA	70183

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. Steve Scalise**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2016
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

State: LA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		16		2015

**Transaction ID : 10220685**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends Of Roy Blunt**

Mailing Address PO Box 50100

City	State	Zip Code
Springfield	MO	65805

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mr. Roy Blunt**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2016
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

State: MO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		16		2015

**Transaction ID : 10220688**

Amount of Each Disbursement this Period

5000.00
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Contribution

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

11000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 26

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

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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Portman For Senate Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2015

Mailing Address 8331 Little Harbor Drive

City	State	Zip Code
Cincinnati	OH	45244

**Transaction ID : 10220689**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**Rob Portman**Category/  
Type

5000.00
---------

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Contribution

State: OH

District:

Full Name (Last, First, Middle Initial)

**B. Toomey For Senate Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2015

Mailing Address 2720 Jordan Road

City	State	Zip Code
Orefield	PA	18069

**Transaction ID : 10220691**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**Mr. Patrick Toomey**Category/  
Type

2500.00
---------

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Contribution

State: PA

District:

Full Name (Last, First, Middle Initial)

**C. Kline For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2015

Mailing Address 101 Burnsville Parkway  
Suite 104

City	State	Zip Code
Burnsville	MN	55337

**Transaction ID : 10220692**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**Rep. John Kline**Category/  
Type

5000.00
---------

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Contribution

State: MN

District: 02

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

12500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 26

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

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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Kline For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2015

Mailing Address 101 Burnsville Parkway  
Suite 104

City Burnsville State MN Zip Code 55337

Purpose of Disbursement  
Contribution

011

**Transaction ID : 10220693**

Amount of Each Disbursement this Period

2500.00
---------

Candidate Name

**Rep. John Kline**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN District: 02

Contribution

Full Name (Last, First, Middle Initial)

**B. Friends Of Kelly Ayotte**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2015

Mailing Address PO Box 233

City Nashua State NH Zip Code 03061

Purpose of Disbursement  
Contribution

011

**Transaction ID : 10220694**

Amount of Each Disbursement this Period

5000.00
---------

Candidate Name

**Kelly Ayotte**Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NH District:

Contribution

Full Name (Last, First, Middle Initial)

**C. Kevin McCarthy For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2015

Mailing Address 455 Capitol Mall

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Contribution

011

**Transaction ID : 10220695**

Amount of Each Disbursement this Period

1000.00
---------

Candidate Name

**Kevin McCarthy**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 22

Contribution

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

8500.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 26

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

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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Upton For All Of Us**

Mailing Address P.O. Box 490

City	State	Zip Code
St. Joseph	MI	49085

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Frederick Upton**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: MI	District: 06

Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General
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011

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

**Transaction ID : 10232020**

Amount of Each Disbursement this Period

5000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. Georgians For Isakson**

Mailing Address 6000 Lake Forest Drive #102

City	State	Zip Code
Atlanta	GA	30328

Purpose of Disbursement  
Contribution

Candidate Name

**Johnny Isakson**

Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
State: GA	District:

Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General
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011

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

**Transaction ID : 10232021**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**C. Rodney For Congress**

Mailing Address PO Box 344

City	State	Zip Code
Taylorville	IL	62568

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Rodney Davis**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: IL	District: 13

Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General
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011

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

**Transaction ID : 10232022**

Amount of Each Disbursement this Period

1000.00
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Contribution

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

7000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 26

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

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NAME OF COMMITTEE (In Full)

**INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. Donovan For Congress**

Mailing Address 440 Leverett Avenue

City	State	Zip Code
Staten Island	NY	10308

Purpose of Disbursement  
Contribution

Candidate Name

**Dan Donovan**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 11

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

**Transaction ID : 10232023**

Amount of Each Disbursement this Period

2500.00
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Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

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

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

2500.00

52500.00