

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL ROOM

2002 JUL 21 P 12:57

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL ON TYPE OR PRINT

Example: If typing, type over the lines.

12FEAM5

Outdoor Amusement Business Association Inc PAC

ADDRESS (number and street)

P.O. Box 582

Check if different than previously reported. (AOO)

Hopkins

NM

505-343-0582

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

000163212

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)
Mar 20 (M3)
Apr 20 (M4)
May 20 (M5)
Jun 20 (M6)
Jul 20 (M7)
Aug 20 (M8)
Sep 20 (M9)
Oct 20 (M10)
Nov 20 (M11) (Non-Election Year Only)
Dec 20 (M12) (Non-Election Year Only)
Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
General (12G)
Runoff (12R)
Convention (12C)
Special (12S)
Election on:
In the State of:

(d) 30-Day POST-Election Report for the:

- General (30G)
Runoff (30R)
Special (30S)
Election on:
In the State of:

5. Covering Period

04 01 2002

through

06 30 2002

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

ROBERT W. TOMSON, President

Signature of Treasurer

[Handwritten Signature]

Date

07 15 2002

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 (Revised 1/01)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

Outdoor Amusement Business Association Inc. PAC

Report Covering the Period:

From:

04 01 2002

To:

06 30 2002

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, 2002	136329.87	
(b) Cash on Hand at Beginning of Reporting Period	132108.53	
(c) Total Receipts (from Line 19)	5.77	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	132109.64	136335.64
7. Total Disbursements (from Line 30)	691.00	4917.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	131418.64	131418.64
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 28X (Revised 1/01)

Page 3

Write or Type Committee Name

Outdoor Amusement Business Association Inc. PAE

Report Covering the Period:

From:

07 01 2002

To:

06 30 2002

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) .....

(ii) Unitemized .....

(b) TOTAL (add  
Lines 11(a)(i) and (ii) .....

(c) Political Party Committees .....

(d) Other Political Committees  
(such as PACs) .....

(e) Total Contributions (add Lines  
11(a)(ii), (b), and (c)) (Carry  
Totals to Line 32, page 4) .....

12. Transfers From Affiliated/Other  
Party Committees .....

13. All Loans Received .....

14. Loan Repayments Received .....

15. Offsets To Operating Expenditures  
(Refunds, Retates, etc.)  
(Carry Totals to Line 36, page 4) .....

16. Refunds of Contributions Made  
to Federal Candidates and Other  
Political Committees .....

17. Other Federal Receipts  
(Dividends, Interest, etc.) .....

18. Transfers from Nonfederal  
Account for Joint Activity .....

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18) .....

20. Total Federal Receipts  
(subtract Line 18 from Line 19) .....

0.00

111

111

577

577

577

20020630 17:07 21 00000000

**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	OF
<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24
<input type="checkbox"/>	25	<input type="checkbox"/>	27	<input type="checkbox"/>	25a	<input type="checkbox"/>	25b
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	25c	<input type="checkbox"/>	29

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)  
**Outdoor Amusement Business Association Inc. PAC**

**A. Graves, McKenna, Lundeen & Almqvist**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **16800 France Ave. S.**  
 City: **Minneapolis** State: **MN** Zip Code: **55435**  
 Purpose of Disbursement: **Accountant fee**  
 Candidate Name: \_\_\_\_\_ Category/Type: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **04 05 2002**  
 Amount of Each Disbursement this Period: **46500**

**B. Minnesota Dept. of Revenue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **Mail Station 1257**  
 City: **St. Paul** State: **MN** Zip Code: **55145-1257**  
 Purpose of Disbursement: **Estimated MN tax**  
 Candidate Name: \_\_\_\_\_ Category/Type: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **06 10 2002**  
 Amount of Each Disbursement this Period: **22000**

**C. Wells Fargo Bank**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **7900 Xerxes Ave. S.**  
 City: **Bloomington** State: **MN** Zip Code: **55431**  
 Purpose of Disbursement: **Bank account fee**  
 Candidate Name: \_\_\_\_\_ Category/Type: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **04 08 2002**  
 Amount of Each Disbursement this Period: **200**

SUBTOTAL of Disbursements This Page (optional) ..... **68700**  
 TOTAL This Period (last page this line number only) ..... **68700**

**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	OF
	<input type="checkbox"/> 21b <input type="checkbox"/> 25	<input type="checkbox"/> 22 <input type="checkbox"/> 27	<input type="checkbox"/> 23 <input type="checkbox"/> 28a	<input type="checkbox"/> 24 <input type="checkbox"/> 28b	<input type="checkbox"/> 25 <input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (to Full):  
**Outdoor Amusement Business Association Inc. PAC**

**A. Wells Fargo Bank**  
 Mailing Address: **7900 Xerxes Ave. S.**  
 City: **Bloomington** State: **MN** Zip Code: **55431**  
 Purpose of Disbursement: **Bank account fee**  
 Candidate Name: \_\_\_\_\_  
 Date of Disbursement: **05/08/2002**  
 Amount of Each Disbursement this Period: **2.00**  
 Category Type: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: \_\_\_\_\_ District: \_\_\_\_\_

**B. Wells Fargo Bank**  
 Mailing Address: **7900 Xerxes Ave. S.**  
 City: **Bloomington** State: **MN** Zip Code: **55431**  
 Purpose of Disbursement: **Bank account fee**  
 Candidate Name: \_\_\_\_\_  
 Date of Disbursement: **06/10/2002**  
 Amount of Each Disbursement this Period: **2.00**  
 Category Type: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: \_\_\_\_\_ District: \_\_\_\_\_

**C.**  
 Full Name (Last, First, Middle Initial): \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Disbursement: \_\_\_\_\_  
 Candidate Name: \_\_\_\_\_  
 Date of Disbursement: \_\_\_\_\_  
 Amount of Each Disbursement this Period: \_\_\_\_\_  
 Category Type: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: \_\_\_\_\_ District: \_\_\_\_\_

**SUBTOTAL** of Disbursements This Page (colored) ..... **4.00**  
**TOTAL** This Period (last page this line number only) ..... **63.100**

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

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

FOR LINE NUMBER:		PAGE	OF
<input 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)

**Outdoor Amusement Business Association Inc. PAC**

Full Name (Last, First, Middle Initial)

A. **Wells Fargo Bank**

Mailing Address

**7900 Xerxes Ave. S.**

City **Bloomington**

State **MN**

Zip Code **55431**

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**09/30/2002**

Amount of Each Receipt this Period

**32**

**interest  
Savings account**

Full Name (Last, First, Middle Initial)

B. **Wells Fargo Bank**

Mailing Address

**7900 Xerxes Ave. S.**

City **Bloomington**

State **MN**

Zip Code **55431**

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**09/30/2002**

Amount of Each Receipt this Period

**10**

**interest  
MoneyMarket account**

Full Name (Last, First, Middle Initial)

C. **Wells Fargo Bank**

Mailing Address

**7900 Xerxes Ave. S.**

City **Bloomington**

State **MN**

Zip Code **55431**

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**09/31/2002**

Amount of Each Receipt this Period

**26**

**interest  
Savings account**

SUBTOTAL of Receipts This Page (optional)

**68**

TOTAL This Period (incl. 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		OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 18	<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)

Outdoor Amusement Business Association Inc PAC

Full Name (Last, First, Middle Initial)

A. Wells Fargo Bank

Mailing Address

1900 Xerxes Ave. S.

City

Bloomington

State

MN

Zip Code

55431

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

05 ' 01 ' 2002

Amount of Each Receipt this Period

0.9

interest  
Money Market account

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank

Mailing Address

1900 Xerxes Ave. S.

City

Bloomington

State

MN

Zip Code

55431

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

06 ' 28 ' 2002

Amount of Each Receipt this Period

26

interest  
Savings account

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank

Mailing Address

1900 Xerxes Ave. S.

City

Bloomington

State

MN

Zip Code

55431

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

06 ' 28 ' 2002

Amount of Each Receipt this Period

0.8

interest  
Money Market acct.

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

43  
1111

Federal Election Commission

### ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/>	Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/>	First Class Mail	POSTMARKED 7-15-02
<input type="checkbox"/>	Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/>	No Postmark	
<input type="checkbox"/>	Postmark Illegible	
<input type="checkbox"/>	Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/>	Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/>	Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/>	Electronic Filing	
<i>Amis</i> PREPARER		7-21-02 DATE PREPARED