

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEDERAL CENTER

JAN 29 AM 9:36  
Office Use Only

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

OUTDOOR AMUSEMENT BUSINESS ASSOCIATION, INC.  
PAC

ADDRESS (number and street) 11035 S SEMORAN BLVD STE 1045A

Check if different than previously reported. (ACC)

WINTER PARK FL 32792-1551

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:
- |                                      |                                      |                                       |   |
|--------------------------------------|--------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11)<br>(Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12)<br>(Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                              |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on M M / D D / Y Y Y Y Y Y In the State of

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M / D D / Y Y Y Y Y Y In the State of

5. Covering Period 07 / 07 / 2007 through 12 / 31 / 2007

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. Johnson

Signature of Treasurer



Date 07 / 27 / 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

FEC FORM 3X  
Rev. 12/2004

28039603027

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Outdoor Amusement Business Association, Inc. PAC

Report Covering the Period:

From:

07 ' 01 ' 2007

To:

12 ' 31 ' 2007

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2007	2007	140,133.92
(b) Cash on Hand at Beginning of Reporting Period.....	137,613.92	
(c) Total Receipts (from Line 19) .....	139,315.3	139,315.3
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	151,545.45	154,065.45
7. Total Disbursements (from Line 31) .....	50,000	30,200
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	151,045.45	151,045.45
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

28039603028

**DETAILED SUMMARY PAGE  
of Receipts**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

*Outdoor Amusement Business Association, Inc. PAC*

Report Covering the Period: From:

*07 ' 01 ' 2007*

To:

*12 ' 31 ' 2007*

**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).....

[Empty box]

[Empty box]

(ii) Unitemized.....

[Empty box]

[Empty box]

(iii) TOTAL (add  
Lines 11(a)(i) and (ii))..... ▶

[Empty box]

[Empty box]

(b) Political Party Committees.....

[Empty box]

[Empty box]

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

[Empty box]

[Empty box]

(d) Total Contributions (add Lines  
11(a)(iii), (b), and (c)) (Carry  
Totals to Line 33, page 5)..... ▶

[Empty box]

[Empty box]

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

[Empty box]

[Empty box]

**13. All Loans Received.....**

[Empty box]

[Empty box]

**14. Loan Repayments Received.....**

[Empty box]

[Empty box]

**15. Offsets To Operating Expenditures  
(Refunds, Rebates, etc.)  
(Carry Totals to Line 37, page 5).....**

[Empty box]

[Empty box]

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

[Empty box]

[Empty box]

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

*139,315.3*

*139,315.3*

**18. Transfers from Non-Federal and Levin Funds**

(a) Non-Federal Account  
(from Schedule H3).....

[Empty box]

[Empty box]

(b) Levin Funds (from Schedule H5).....

[Empty box]

[Empty box]

(c) Total Transfers (add 18(a) and 18(b))..

[Empty box]

[Empty box]

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

*139,315.3*

*139,315.3*

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

*139,315.3*

*139,315.3*

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**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**

	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<b>21. Operating Expenditures:</b>		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....		2,520.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		2,520.00
<b>22. Transfers to Affiliated/Other Party Committees .....</b>		
<b>23. Contributions to Federal Candidates/Committees and Other Political Committees .....</b>	500.00	500.00
<b>24. Independent Expenditures (use Schedule E) .....</b>		
<b>25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....</b>		
<b>26. Loan Repayments Made .....</b>		
<b>27. Loans Made .....</b>		
<b>28. Refunds of Contributions To:</b>		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		
<b>29. Other Disbursements .....</b>		
<b>30. Federal Election Activity (2 U.S.C. §431(20))</b>		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		
<b>31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..</b>	500.00	3,020.00
<b>32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....</b>	500.00	3,020.00

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**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) .....		
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....		2520.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....		2520.00

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**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		OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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. Full Name (Last, First, Middle Initial)  
**Wells Fargo Investment Services**

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  
**12 ' 31 ' 2007**

Amount of Each Receipt this Period  
**3,510.44**

**Wealthbuilder  
Growth Bal. Port.  
Dividend**

B. Full Name (Last, First, Middle Initial)  
**Wells Fargo Investment Services**

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  
**12 ' 31 ' 2007**

Amount of Each Receipt this Period  
**7,154.00**

**Wealthbuilder  
Growth Bal. Port.  
Cap Gain**

C. Full Name (Last, First, Middle Initial)  
**Wells Fargo Investment Services**

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  
**12 ' 31 ' 2007**

Amount of Each Receipt this Period  
**3,267.09**

SUBTOTAL of Receipts This Page (optional).....▶ **13,931.53**

TOTAL This Period (last page this line number only).....▶ **13,931.53**

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

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

FOR LINE NUMBER:  
(check only one)

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"/> 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)

Outdoor Amusement Business Association, Inc. PAC

Full Name (Last, First, Middle Initial)

A. Salazar for Senate

Date of Disbursement

10 / 31 / 2007

Mailing Address

422 C Street, NE

City

Washington

State

DC

Zip Code

20002

Purpose of Disbursement

re-election campaign

Candidate Name

Ken Salazar

011

Category/  
Type

Amount of Each Disbursement this Period

500.00

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: CO

District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

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

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

500.00

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Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 1/21/08
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

  
**PREPARER**

1/29/08  
**DATE PREPARED**

28039603034