

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
For Other Than An Authorized Committee

RECEIVED

2014 DEC -4 AM 10:14
Office Use Only

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

OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC

ADDRESS (number and street)

1035 S SEMORAN BLVD

SUITE 1045A

Check if different than previously reported. (ACC)

WINTER PARK

FL

32792

5512

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) (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) (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 [MM/DD/YYYY] in the State of []

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

Election on [MM/DD/YYYY] in the State of []

5. Covering Period 10/16/2014 through 11/24/2014

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 *Robert W. Johnson*

Date 12/03/2014

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									
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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

OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC

Report Covering the Period:

From:

10 ' 16 ' 2014

To:

11 ' 24 ' 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014	2014	119,089.45
(b) Cash on Hand at Beginning of Reporting Period.....	100,889.45	
(c) Total Receipts (from Line 19).....	2680.00	2680.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	103,569.45	121,769.45
7. Total Disbursements (from Line 31).....	550,000	237,000
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	98,069.45	98,069.45
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

**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:

10/10/2014

To:

11/24/2014

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).....

2680.00

2680.00

(ii) Unitemized.....

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

(b) Political Party Committees.....

(c) Other Political Committees

(such as PACs).....

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)..... ▶

2680.00

2680.00

12. Transfers From Affiliated/Other

Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

17. Other Federal Receipts

(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

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

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

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

2680.00

2680.00

20. Total Federal Receipts

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

1-800-438-0400

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		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5,500 00	23,700 00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(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)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(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))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	550000	2378000

1-1000-1-1000-1-1000

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex-
penditures

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))
- 37. Offsets to Operating Expenditures
(from Line 15, page 3).....
- 38. Net Operating Expenditures
(subtract Line 37 from Line 36)

268000

268000

1
NON
LINE
0110

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

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

FOR LINE NUMBER: PAGE 1 OF 2

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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

<p>Full Name (Last, First, Middle Initial) A. Johnson, Jeffrey V.</p>		<p>Date of Receipt 10 / 22 / 2014</p>
<p>Mailing Address 4083 Carlsbad Dr.</p>		<p>Amount of Each Receipt this Period , 500.00</p>
<p>City Lake Havasu City</p>	<p>State AZ</p>	
<p>Zip Code 86404</p>		<p>Amount of Each Receipt this Period , 500.00</p>
<p>FEC ID number of contributing federal political committee. C</p>		
<p>Name of Employer</p>		<p>Amount of Each Receipt this Period , 500.00</p>
<p>Occupation</p>		
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Amount of Each Receipt this Period , 500.00</p>
<p>Aggregate Year-to-Date ▼</p>		
<p>Full Name (Last, First, Middle Initial) B. Sheridan, Patrick M.</p>		<p>Date of Receipt 10 / 22 / 2014</p>
<p>Mailing Address P.O. Box 6161</p>		<p>Amount of Each Receipt this Period , 500.00</p>
<p>City Avon</p>	<p>State CO</p>	
<p>Zip Code 81620</p>		<p>Amount of Each Receipt this Period , 500.00</p>
<p>FEC ID number of contributing federal political committee. C</p>		
<p>Name of Employer</p>		<p>Amount of Each Receipt this Period , 500.00</p>
<p>Occupation</p>		
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Amount of Each Receipt this Period , 500.00</p>
<p>Aggregate Year-to-Date ▼</p>		
<p>Full Name (Last, First, Middle Initial) C. Hanschen, John</p>		<p>Date of Receipt 10 / 22 / 2014</p>
<p>Mailing Address 4508 Cliffstone Cove</p>		<p>Amount of Each Receipt this Period , 500.00</p>
<p>City Austin</p>	<p>State TX</p>	
<p>Zip Code 78735</p>		<p>Amount of Each Receipt this Period , 500.00</p>
<p>FEC ID number of contributing federal political committee. C</p>		
<p>Name of Employer</p>		<p>Amount of Each Receipt this Period , 500.00</p>
<p>Occupation</p>		
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Amount of Each Receipt this Period , 500.00</p>
<p>Aggregate Year-to-Date ▼</p>		

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

, 1,500.00

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

FROM: JUNE 1 2014

**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 2 OF 2	
	<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

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. Fernandez Kane		Date of Receipt 10'30'2014
Mailing Address 91-246 Oihana St.		Amount of Each Receipt this Period , 1,000.00
City Kapolei	State HI	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) B. Putter, Alan		Date of Receipt 10'22'2014
Mailing Address 1620 E. State Hwy. 121 Bldg. C #500		Amount of Each Receipt this Period , 1,800.00
City Lewisville	State TX	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	, 1,180.00
TOTAL This Period (last page this line number only).....▶	, 2,680.00

FROM: JUNE 1 2014

**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 1 OF 1
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b			

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NAME OF COMMITTEE (In Full)
OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC

A. Full Name (Last, First, Middle Initial) Dan Newhouse for Congress		Date of Disbursement 10/16/2014
Mailing Address P.O. Box 10949		
City Yakima	State WA	Zip Code 98909
Purpose of Disbursement Campaign contribution	Amount of Each Disbursement this Period 4500.00	
Candidate Name Dan Newhouse	Category/Type 011	
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: WA	District:	

B. Full Name (Last, First, Middle Initial) Djou for Congress		Date of Disbursement 10/24/2014
Mailing Address P.O. Box 235280		
City Honolulu	State HI	Zip Code 96823
Purpose of Disbursement Campaign contribution	Amount of Each Disbursement this Period 1000.00	
Candidate Name Charles Djou	Category/Type 011	
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: HI	District:	

C. Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	Amount of Each Disbursement this Period	
Candidate Name	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:	

SUBTOTAL of Disbursements This Page (optional).....▶	5,500.00
TOTAL This Period (last page this line number only).....▶	5,500.00

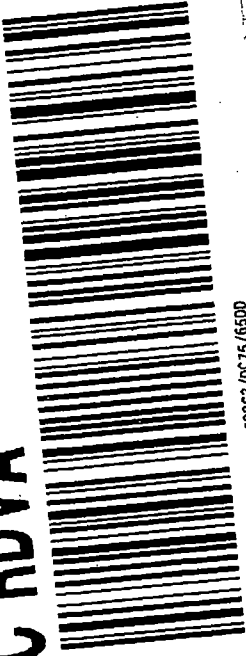
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RECEIVED

2014 DEC -4 AM 10:14

AIR MAIL CENTER

FedEx Package
Express US Airbill

From

Date 12/3/14

Sender's Name

Robert W. Johnson Phone 407 681-9444

Company OUTDOOR AMUSEMENT BUSINESS

Address 1025 S SEMORAN BLVD STE 1045A

City WINTER PARK

State FL

ZIP 32792-5512

2 Your Internal Billing Reference

3 To Recipient's Name

Phone 202 694-1100

Company Federal Election Commission

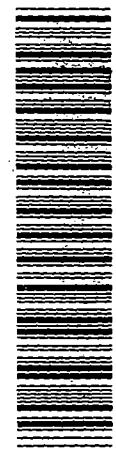
Address 999 E Street NW

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Address

City Washington State DC ZIP 205463

0114783518



8057 5177 7287

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FedEx First Overnight delivery to select locations. Friday shipments will be delivered Monday unless SATURDAY Delivery is selected.
- FedEx Priority Overnight
FedEx Priority Overnight delivery to select locations. Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected.
- FedEx Standard Overnight
FedEx Standard Overnight delivery to select locations. Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

5 Packaging * Declared value limit \$500.

- FedEx Envelope* FedEx Pak* FedEx Tube Other

6 Special Handling and Delivery Signature Options

- SATURDAY Delivery
NOT available for FedEx Standard Overnight, FedEx 2Day A.M. or FedEx Express Saver.
- No Signature Required
Package may be left without recipient's signature for delivery.
- Direct Signature
Signature required at delivery.
- Indirect Signature
If no one is available at recipient's address, someone at a neighboring residential address may sign for you.
- Does this shipment contain dangerous goods?
One box must be checked.
No Yes Yes No
Substance Declaration Subst. Declaration Not required Yes No
Dry Ice, 3 UN 1845 Dry Ice, 3 UN 1845 Cargo Aircraft Only

7 Payment Bill to:

- Sender Recipient Third Party Credit Card Cash/Check

Total Packages Total Weight:



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

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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed Ex</i>	Shipping Date <i>12/3/14</i>
	Next Business Day Delivery <input checked="" 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
(8/2013)

12/4/14
DATE PREPARED

12-03-14 10:01:01 AM