PAGE 1 / 13

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIVI 3X F	or Other Than An A	uthorized Committe	ee		Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typin over the lines.	ng, type	12FE4M:	5
OUTDOOR AMUSEME	NT BUSINESS AS	SSOCIATION INC	PAC		
ADDRESS (number and street) ▼	1305 Memorial Avenue				
Check if different than previously reported. (ACC)	West Springfield			MA	01089
2. FEC IDENTIFICATION NU	MBER ▼	CITY A	;	STATE A	ZIP CODE ▲
C C00163212	3.		N) OR	x AM (A)	ENDED
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Quarterly Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	Report Due On: M (c) 12-Day PRE-Election Report for the: (d) 30-Day POST-Election Report for the:	Primary (12P Convention (12P	12C)	Sep 2	in the State of
5. Covering Period 07	01 2021	I through	12	31/	2021
I certify that I have examined this Type or Print Name of Treasurer	Report and to the best Chiecko, Gregory, , ,	of my knowledge and b	pelief it is tru	e, correct and	complete.
Signature of Treasurer Chieck	co, Gregory, , ,	[Electronically	Filed]	vate 04	/ 15 / Y Y Y Y Y Y 2022
NOTE: Submission of false, errone	ous, or incomplete informa	tion may subject the pers	son signing th	nis Report to th	e penalties of 52 U.S.C. § 30109
Office Use					FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC

07 01 2021 12 31 2021 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 33510.65 January 1. 2021 (b) Cash on Hand at 34294.83 Beginning of Reporting Period..... 20674.66 41290.47 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 74801.12 54969.49 6(a) and 6(c) for Column B)..... 21479.24 41310.87 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 33490.25 33490.25 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 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. 05/2016)

Write or Type Committee Name

OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC

R	eport Covering the Period: From:		12 31 2021			
	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)	15021.00	35021.00			
	(ii) Unitemized(iii) TOTAL (add	100.00	100.00			
	Lines 11(a)(i) and (ii)	15121.00	35121.00			
	(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					
12.	Totals to Line 33, page 5) Transfers From Affiliated/Other	15121.00	35121.00			
	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.)					
16.	(Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00			
	to Federal Candidates and Other Political Committees	0.00	0.00			
17.	Other Federal Receipts	0.00	7 1 7 1 7 1 7 1 7 1			
18.	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds (a) Non-Federal Account	5553.66	6169.47			
	(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))▶	20674.66	41290.47			
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	20674.66	41290.47			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
21. Operating Expenditures:		iotai iiiis Feliou	Calendar fear-to-Date		
	(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	0.00	0.00		
	Expenditures (c) Total Operating Expenditures	0.00	0.00		
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00		
	Transfers to Affiliated/Other Party	3.00			
	Committees	0.00	0.00		
	Contributions to Federal Candidates/Committees	4 4			
	and Other Political Committees	20500.00	40000.00		
	Independent Expenditures				
	(use Schedule E)	0.00	0.00		
	(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	2.22		
	(use sofiedule i)	0.00	0.00		
	Loan Repayments Made	0.00	0.00		
	Loans Made	0.00	0.00		
	Refunds of Contributions To: (a) Individuals/Persons Other	4 4	4 4		
	Than Political Committees	0.00	0.00		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees	0.00	0.00		
	(such as PACs)	0.00	0.00		
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00			
	(add Lines 20(a), (b), and (c))	0.00	0.00		
	Other Disbursements (Including				
	Non-Federal Donations)	979.24	1310.87		
		4 4	4 4		
	Federal Election Activity (52 U.S.C. § 30101(2	0))			
	(a) Allocated Federal Election Activity				
	(from Schedule H6) (i) Federal Share	0.00	0.00		
	(i) I ederal offare	0.00	0.00		
	(ii) "Levin" Share	0.00	0.00		
	(b) Federal Election Activity Paid	45 45	4 4		
	Entirely With Federal Funds	0.00	0.00		
	(c) Total Federal Election Activity (add	7 7	4 4		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
		7	7 7 7		
	Total Disbursements (add Lines 21(c), 22,				
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	21479.24	41310.87		
	Total Endoral Diahuranmenta	4	7 7		
	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
	from Line 31)	24472.24			
		21479.24	41310.87		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	15121.00	35121.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15121.00	35121.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:					PAGE	6	OF	13		
(check only one)										
		X	11a		11b		11c	12	2	
			13		14		15	16	6	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 of Individual (Last, First, Middle Initial) or Full Organization Name KALIFF, MITCHELL, , , Date of Receipt Mailing Address 2009 NW Military Hwy. 20 2021 City State Zip Code Transaction ID: SA11AI.5090 TX SAN ANTONIO 78213 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) KALIFF INSURANCE Owner Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LEAVITT, CHARLENE, K, , Date of Receipt Mailing Address P.O. Box 10 11 2021 City State Zip Code Transaction ID: SA11AI.5098 ΑZ Laveen 85339 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) RAY CAMMACK SHOWS CHIEF OPERATING OFFICER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 5000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Reithoffer, Marianne, , , Date of Receipt Mailing Address 9022 Wiggins Rd.

City Gibsonton	State FL	Zip Code 33534	Transaction ID : SA11AI.5095
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) Reithoffer Shows, Inc. Receipt For: Primary General Other (specify)	Directo	oation (for Individual) or ear-to-Date ▼ 1000.00	Memo Item
JBTOTAL of Receipts This Page (optional). DTAL This Period (last page this line numb			

REITHOFFER SHOWS

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

FOR LINE NUMBER:					PAGE	7	OF	13		
(check only one)										
		X	11a		11b		11c	12	2	
			13		14		15	16	6	17

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 of Individual (Last, First, Middle Initial) or Full Organization Name REITHOFFER, RICHARD, H,, Date of Receipt Mailing Address 9022 WIGGINS RD 2021 17 City State Zip Code Transaction ID: SA11AI.5088 FL **GIBSONTON** 33534 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **REITHOFFER SHOWS CARNIVAL OWNER** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. REITHOFFER, RICHARD, H, Date of Receipt Mailing Address 9022 WIGGINS RD 11 2021 City State Zip Code Transaction ID: SA11AI.5092 **GIBSONTON** FL 33534 Amount of Each Receipt this Period FEC ID number of contributing 4000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual)

	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 5000.00	
C.	Full Name of Individual (Last, First, Middle In ROWLAND, DENNIS, D, , Mailing Address 1543 BARTOW RD City LAKELAND FEC ID number of contributing federal political committee. Name of Employer (for Individual) BARRETT'S EAST COAST FOODS Receipt For: Primary General Other (specify)	State FL C	Zip Code 33801 ation (for Individual) CONCESSION OWNER	Date of Receipt M M M O7 2021 Transaction ID : SA11AI.5087 Amount of Each Receipt this Period 1021.00 Memo Item
	UPTOTAL of Descints This Daws (antique)			6021.00

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

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

CARNIVAL OWNER

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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:					PAGE		8	OF		13
	(check only one)									
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		13	14		15		16			17

	the name and address of any political committee t	
NAME OF COMMITTEE (In Full)	IONICO ACCOCITICATOR	
/ OUTDOOR AMUSEMENT BU	JSINESS ASSOCIATION INC PAC	<u>, </u>
Full Name of Individual (Last, First, Middle SINCLAIR, JAMES, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 2721 Selena Circle		11 15 2021
City	State Zip Code	Transaction ID : SA11AI.5097
White Bear Lake	MN 55110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
MINNESOTA STATE FAIR	FAIR MANAGER	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1000.00	
Full Name of Individual (Last, First, Middle WOOD, MICHAEL, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 111 OSIANA DR		11 12 2021
City	State Zip Code	Transaction ID : SA11AI.5096
SAN ANTONIO	TX 78248	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer (for Individual) WOOD ENTERTAINMENT CO	Occupation (for Individual) RIDE OWNER	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name of Individual (Last, First, Middle	Initial) or Full Organization Name	Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Table of Each Floorpi tills Fellou
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify)		
SUBTOTAL of Receipts This Page (optional).		2000.00
TOTAL This Period (last page this line numb	er only)	15021.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: 13 **PAGE** 9 OF Use separate schedule(s) (check only one) for each category of the 11a 11b 12 11c Detailed Summary Page **X** 17 13 14 15 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 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name FRIENDS OF ROY BLUNT Date of Receipt Mailing Address PO BOX 10178 2021 06 City State Zip Code Transaction ID: SA17.5254 MO 65205 **COLUMBIA** Amount of Each Receipt this Period FEC ID number of contributing C C00304758 5000.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Refund of Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wells Fargo Advisors Date of Receipt Mailing Address 7900 Xerxes Ave S 31 2021 10th FL City Zip Code State Transaction ID: SA17.5119 Bloomington MN 55431 Amount of Each Receipt this Period FEC ID number of contributing 553.66 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Dividend income Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) ▼	1169.47			
Mailing Address	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address City State Zip Code			
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify)	Occupation (for Individual) Aggregate Year-to-Date ▼	Amount of Each Receipt this Period Memo Item		
	er only)	5553.66 5553.66 FEC Schedule A (Form 3X) Rev. 06/2		

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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 10 OF 1					
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	ly one)				
	Detailed Summary Page						
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Any information copied from such Reports and S or for commercial purposes, other than using the							
NAME OF COMMITTEE (In Full)	name and address of any pon	iloar committee to	Solicit contributions from such committee.				
OUTDOOR AMUSEMENT BUS	SINESS ASSOCIATIO	N INC PAC					
OOTBOOK AWOODINENT BOO	MINEOU AUUUUIATIO	IN INC I AC					
Full Name (Last, First, Middle Initial)							
A. BEN CLINE FOR CONGRESS,	INC.		Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address P.O. BOX 817			07 23 2021				
City	State Zip Code		FEC Identification Number				
LEXINGTON	VA 24450		FEC Identification Number				
Purpose of Disbursement		044	C C00661561				
Candidate Name		011	Transaction ID : SB23.5102				
CLINE, BENJAMIN LEE, , ,		Category/ Type	Amount of Each Disbursement this Period				
	ursement For: 2022	Турс	1000.00				
Senate	rimary General		7 7 7				
President	Other (specify) ▼		Memo Item				
State: VA District: 06							
Full Name (Last, First, Middle Initial) B. COLE FOR CONGRESS			Date of Disbursement				
B. COLE FOR CONGRESS							
Mailing Address P.O. BOX 722256	09 27 2021						
City		FEC Identification Number					
Purpose of Disbursement	NORMAN OK 73070 Purpose of Disbursement						
. 4.,500 0. 2.024.00		011	C C00379735				
Candidate Name		Category/	Transaction ID : SB23.5104 Amount of Each Disbursement this Period				
COLE, TOM, , ,		Type	Amount of Each bisburschicht this Toriod				
	ursement For: 2022		1000.00				
Senate President	Primary General						
State: OK District: 04	Other (specify)		Memo Item				
Full Name (Last, First, Middle Initial)							
C. JIMMY PANETTA FOR CONGI	RESS		Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address PO BOX 103			09 27 2021				
City	State Zip Code						
CARMEL VALLEY	CA 93924		FEC Identification Number				
Purpose of Disbursement			C C00592154				
		011	Transaction ID : SB23.5110				
Candidate Name		Category/	Amount of Each Disbursement this Period				
PANETTA, JIMMY, , , Office Sought: Y House Disb	ursement For: 2022	Туре	5000.00				
Office Sought: House Disb	Drimon, Conorol						
President	Other (specify)		Momo Itom				
State: CA District: 19			Memo Item				
SUBTOTAL of Disbursements This Page (option	nal)	·····	7000.00				
TOTAL This Period (last page this line number	only)						
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s) FOR LINE (check only	FOR LINE NUMBER: PAGE 11 OF 13								
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	e Concort only	22 X 23 26 27 28b 28c 29 30b								
Any information copied from such Reports and Statem or for commercial purposes, other than using the name											
NAME OF COMMITTEE (In Full) OUTDOOR AMUSEMENT BUSINE	ESS ASSOCIATIC	N INC PAC									
Full Name (Last, First, Middle Initial) A. RELY ON YOUR BELIEFS FUND Mailing Address ONE CONSTITUTION AVENUE STE	F 200		Date of Disbursement								
Mailing Address ONE CONSTITUTION AVE NE STE			10 06 2021								
WASHINGTON	State Zip Code 20003		FEC Identification Number C C00344648 Transaction ID: SB23.5258 Amount of Each Disbursement this Period								
Purpose of Disbursement Contribution Candidate Name		Category/									
Senate President	nent For: 2022 Primary General Other (specify)	Type	5000.00 Memo Item								
Full Name (Last, First, Middle Initial) B. TEAM GRAHAM INC Mailing Address PO BOX 1801	TEAM GRAHAM INC										
City COLUMBIA Purpose of Disbursement Candidate Name	011	FEC Identification Number C C00458828 Transaction ID : SB23.5103									
GRAHAM, LINDSEY O, , , Office Sought: House Disbursem x Senate x	nent For: 2026 Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period 1000.00 Memo Item								
Full Name (Last, First, Middle Initial) C. TEXANS FOR HENRY CUELLAR CO Mailing Address 1519 WASHINGTON STREET	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
SUITE 200 City S	State Zip Code TX 78040		FEC Identification Number								
Candidate Name CUELLAR, HENRY R., , ,	011 Category/ Type	C C00371302 Transaction ID : SB23.5113 Amount of Each Disbursement this Period									
Senate	nent For: 2022 Primary ☐ General Other (specify) ▼		2500.00 Memo Item								
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).		<u> </u>	8500.00								

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SCHEDULE B (FEC Form 3X)				FOR	FOR LINE NUMBER: PAGE 12 OF 13											
	EMIZED DISBURSEMENTS		rate schedule(s)	(check only one)			one)									
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	ly information copied from such Reports and Staten for commercial purposes, other than using the nam															
	NAME OF COMMITTEE (In Full)		, , ,													
$ \rangle$	OUTDOOR AMUSEMENT BUSINE	ESS ASS	SOCIATION	INC	PAC											
_	Full Name (Last, First, Middle Initial)															
A.	OE 2020					Date of Disbursement										
	M. W. A.L. 4040 THE ALAMEDA #7 000						10 20 2021									
	Mailing Address 1346 THE ALAMEDA #7-380 C/O CONTRIBUTION SOLUTIONS, LLC					10 20 2021										
	City			EEC Identification Number												
	SAN JOSE	CA 95126				FEC Identification Number										
	Purpose of Disbursement	didate Name 011				C C00693655 Transaction ID : SB23.5111 Amount of Each Disbursement this Period										
	Condidate Name															
	LOFGREN, ZOE, , ,															
	Office Sought: X House Disbursen	n22	Тур		5000.00											
							7	_		7						
	President	President Other (specify) ▼					emo Iten	n								
_	State: CA District: 19															
В.	Full Name (Last, First, Middle Initial)						Date of Disbursement									
Ь.																
	Mailing Address					M = M / D = D / Y = Y = Y										
	a.ing / aai ooc															
	City	State Zip Code				FEC Identification Number										
	Purpose of Disbursement															
	Turpose of Disbursement					C										
	Candidate Name Category/ Type Office Sought: Disbursement For:						Amount of Each Disbursement this Period									
	Senate Primary General															
	President Other (specify) State: District:						Memo Item									
_	Full Name (Last, First, Middle Initial)	_														
C.	Tan Hamo (East, First, Middle Illian)					Date o	f Disbur	sem	ent							
								■ D	7	Υ	Y	II Y				
	Mailing Address	ess														
	City	State Zip Code				FEC Identification Number										
	Purpose of Disbursement							_	_	—		1				
	urpose of Disbursement					C										
	andidate Name					Amoun	t of Fac	Each Disbursement this Period								
	Category/ Type						, another the Lacit Dispulsement this Fellou									
	Office Sought: House Disbursen							,								
	Senate	General														
	State: District:	Other (speci	ify) 🔻			Me	emo Iten	n								
	District.					_		_	_							
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SCHEDULE B (FEC Form 3X)			FOR LINE	FOR LINE NUMBER: PAGE 13 OF 13								
ITEMIZED DISBURSEMENTS	TEMIZED DISPLIPSEMENTS Use separate sched		Check only	INE NOMBER:								
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	Detailed	Julillary Page	28a	28b 28c x 29 30b								
Any information copied from such Reports and Stat												
or for commercial purposes, other than using the na	ame and add	ress of any politi	cal committee to	o solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	1500 40	000147101										
$ \hspace{.05cm} \rangle$ OUTDOOR AMUSEMENT BUSIN	NESS AS	SOCIATION	N INC PAC									
Full Name (Last, First, Middle Initial)												
A. AuthorizeNet	Date of Disbursement											
	12 02 2021											
Mailing Address P.O. Box 947	Mailing Address P.O. Box 947											
City	ity State Zip Code											
American Fork	UT	84003		FEC Identification Number								
Purpose of Disbursement	1			C								
Bank fees				Transaction ID : SB29.5117								
Candidate Name			Category/	Amount of Each Disbursement this Period								
Office Sought: House Disburs	ement For:		Type	306.28								
Senate	Primary	General		7 7 7								
President	Callett											
State: District:				_								
	Full Name (Last, First, Middle Initial)											
B. First Bank	Date of Disbursement											
Mailing Address 415 N Mathilda Ave	Mailing Address 415 N Mathilda Ave											
City Sunnyvale	State CA	Zip Code 94085		FEC Identification Number								
Purpose of Disbursement												
Bank fees		1::1	C Transaction ID : SB29.5118									
Candidate Name	Category/											
Office Sought: House Disburs	Type Sought: House Disbursement For:											
Office Sought: House Disburs Senate												
President	Other (spe			Memo Item								
State: District:												
Full Name (Last, First, Middle Initial)												
C. Wells Fargo Advisors		Date of Disbursement										
Mailing Address 7900 Xerxes Ave S		12 31 2021										
10th FL												
City	State MN	Zip Code 55431		FEC Identification Number								
Bloomington Purpose of Disbursement	C											
Unrealized loss 6/1/2021-12/31/2021												
Candidate Name	e Name Category											
	247.42											
Office Sought: House Disburs Senate	ement For: Primary	General		217.12								
President	Other (spe			Maria Nari								
State: District:		<i>>,</i> ₹		Memo Item								
SUBTOTAL of Disbursements This Page (optional))		·····•	933.43								
TOTAL This Desired (leaf gares 11. 1)	l)			933.43								
TOTAL This Period (last page this line number onli	ıy)			000.10								