

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="50049.01"/>	<input type="text" value="50049.01"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="41494.13"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="16040.08"/>	<input type="text" value="21305.90"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="57534.21"/>	<input type="text" value="71354.91"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="32160.35"/>	<input type="text" value="45981.05"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="25373.86"/>	<input type="text" value="25373.86"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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)

Page 3

Write or Type Committee Name

INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

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).....	10675.97	13362.17
(ii) Unitemized	364.11	2943.73
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	11040.08	16305.90
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	16040.08	21305.90
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)).....▶	16040.08	21305.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	16040.08	21305.90

DETAILED SUMMARY PAGE
of Disbursements

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	160.35	481.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	160.35	481.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	32000.00	45500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	32160.35	45981.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32160.35	45981.05

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)	16040.08	21305.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16040.08	21305.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	160.35	481.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	160.35	481.05

**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 6 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)
INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. Beckson, Denise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 W Andrews Ave
 City Wildwood State NJ Zip Code 08260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Morey's Piers Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.45

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11AI.4653
 Amount of Each Receipt this Period 57.69
 Memo Item
 July payroll contribution

B. Beckson, Denise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 W Andrews Ave
 City Wildwood State NJ Zip Code 08260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Morey's Piers Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 326.91

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11AI.4635
 Amount of Each Receipt this Period 38.46
 Memo Item
 August payroll deduction

C. Beckson, Denise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 W Andrews Ave
 City Wildwood State NJ Zip Code 08260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Morey's Piers Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 365.37

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11AI.4615
 Amount of Each Receipt this Period 38.46
 Memo Item
 September payroll contribution

SUBTOTAL of Receipts This Page (optional).....	134.61
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 7 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. BORMAN, GREGG, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27061 Aliso Creek Rd #100
 City Aliso Viejo State CA Zip Code 92656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APEX PARKS GROUP Occupation (for Individual) SVP - Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11AI.4633
 Amount of Each Receipt this Period 2000.00
 Memo Item

B. CLEARY, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1405 MARTIN AVENUE
 City CHERRY HILL State NJ Zip Code 08002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOREY'S PIERS Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.45

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11AI.4654
 Amount of Each Receipt this Period 57.69
 Memo Item
 July payroll contribution

C. CLEARY, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1405 MARTIN AVENUE
 City CHERRY HILL State NJ Zip Code 08002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOREY'S PIERS Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 326.91

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11AI.4636
 Amount of Each Receipt this Period 38.46
 Memo Item
 August payroll deduction

SUBTOTAL of Receipts This Page (optional).....	2096.15
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 8 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. CLEARY, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1405 MARTIN AVENUE
 City CHERRY HILL State NJ Zip Code 08002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOREY'S PIERS Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.37

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11AI.4616
 Amount of Each Receipt this Period 38.46
 Memo Item
 September payroll contribution

B. Davis, Randall, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1448 Duke Street
 City Alexandria State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IAAPA Occupation (for Individual) Sr. VP of Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1230.80

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.4603
 Amount of Each Receipt this Period 430.78
 Memo Item
 7/8-9/30 payroll contribution

C. FETT, FELICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1448 DUKE ST.
 City ALEXANDRIAV State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IAAPA Occupation (for Individual) Board and Committee Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.4604
 Amount of Each Receipt this Period 210.00
 Memo Item
 7/8-9/30 payroll contribution

SUBTOTAL of Receipts This Page (optional).....	679.24
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: PAGE 9 OF 27
(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 ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. Herschend Family Entertainment
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 399 Silver Dollar City Pkwy

City Branson	State MO	Zip Code 65616
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
736.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2016

Transaction ID : SA11AI.4650

Amount of Each Receipt this Period
66.00

Memo Item

B. Herschend Family Entertainment
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 399 Silver Dollar City Pkwy

City Branson	State MO	Zip Code 65616
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
802.00

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11AI.4649

Amount of Each Receipt this Period
66.00

Memo Item

C. Herschend Family Entertainment
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 399 Silver Dollar City Pkwy

City Branson	State MO	Zip Code 65616
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
868.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2016

Transaction ID : SA11AI.4652

Amount of Each Receipt this Period
66.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	198.00
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: PAGE 10 OF 27
(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 ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. Herschend Family Entertainment
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 399 Silver Dollar City Pkwy

City Branson	State MO	Zip Code 65616
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
934.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11AI.4651

Amount of Each Receipt this Period
66.00

Memo Item

B. Herschend Family Entertainment
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 399 Silver Dollar City Pkwy

City Branson	State MO	Zip Code 65616
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11AI.4629

Amount of Each Receipt this Period
66.00

Memo Item

C. Herschend Family Entertainment
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 399 Silver Dollar City Pkwy

City Branson	State MO	Zip Code 65616
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1066.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11AI.4628

Amount of Each Receipt this Period
66.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	198.00
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 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. JACKSON, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1448 DUKE ST.

City ALEXANDRIA	State VA	Zip Code 22314
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IAAPA	Occupation (for Individual) Vice President
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
403.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11AI.4605

Amount of Each Receipt this Period
141.12

Memo Item
7/8-9/30 payroll contribution

B. Mandt, David, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1448 Duke Street

City Alexandria	State VA	Zip Code 22314
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IAAPA	Occupation (for Individual) VP of Communications
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
384.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11AI.4607

Amount of Each Receipt this Period
134.61

Memo Item
7/8-9/30 payroll contribution

C. Morey, Jack, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 112 Ibis Lane

City Wildwood Crest	State NJ	Zip Code 08260
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Morey's Piers	Occupation (for Individual) Executive Vice Presidetrn
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2016

Transaction ID : SA11AI.4657

Amount of Each Receipt this Period
57.69

Memo Item
July payroll contribution

SUBTOTAL of Receipts This Page (optional).....	333.42
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 12 OF 27
<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 ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. Morey, Jack, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 Ibis Lane
 City Wildwood Crest State NJ Zip Code 08260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Morey's Piers Occupation (for Individual) Executive Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 326.91

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11AI.4639
 Amount of Each Receipt this Period 38.46
 Memo Item
 August payroll deduction

B. Morey, Jack, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 Ibis Lane
 City Wildwood Crest State NJ Zip Code 08260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Morey's Piers Occupation (for Individual) Executive Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.37

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11AI.4619
 Amount of Each Receipt this Period 38.46
 Memo Item
 September payroll contribution

C. Morey, Will, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8500 Bayview Drive
 City Wildwood Crest State NJ Zip Code 08260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Morey's Piers Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 288.45

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11AI.4658
 Amount of Each Receipt this Period 57.69
 Memo Item
 July payroll contribution

SUBTOTAL of Receipts This Page (optional).....	134.61
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 13 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. Morey, Will, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8500 Bayview Drive

City Wildwood Crest	State NJ	Zip Code 08260
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Morey's Piers	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
326.91

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11AI.4640

Amount of Each Receipt this Period
38.46

Memo Item
August payroll deduction

B. Morey, Will, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8500 Bayview Drive

City Wildwood Crest	State NJ	Zip Code 08260
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Morey's Piers	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11AI.4620

Amount of Each Receipt this Period
38.46

Memo Item
September payroll contribution

C. Mosedale, Susan, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1448 Duke Street

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IAAPA	Occupation (for Individual) Executive Vice President
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
403.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11AI.4608

Amount of Each Receipt this Period
141.12

Memo Item
7/8-9/30 payroll contribution

SUBTOTAL of Receipts This Page (optional).....	218.04
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 14 OF 27
<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 ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. Noland, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6065 Masters Blvd
 City Orlando State FL Zip Code 32819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RPN Associates Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 770.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11AI.4609
 Amount of Each Receipt this Period 269.50
 Memo Item
 7/8-9/30 payroll contribution

B. OWENS, RUSSELL, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4590 MacArthur Blvd #400
 City Newport Beach State CA Zip Code 92660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PALACE ENTERTAINMENT Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11AI.4634
 Amount of Each Receipt this Period 2000.00
 Memo Item

C. PATTISON, JIM, , , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7576 Kingspointe Pkwy #188
 City Orlando State FL Zip Code 32819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIPLEY ENTERTAINMENT INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11AI.4630
 Amount of Each Receipt this Period 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4269.50
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: PAGE 15 OF 27
(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 ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SCHOOLFIELD, JEREMY, , ,

Mailing Address 1448 DUKE ST.

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IAAPA	Occupation (for Individual) Editor
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11AI.4610

Amount of Each Receipt this Period
98.28

Memo Item
7/8-9/30 payroll contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Seay, James, , ,

Mailing Address 1000 East Pratt St.

City Baltimore	State MD	Zip Code 21202
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Premier Rides Inc.	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : SA11AI.4631

Amount of Each Receipt this Period
2000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SEE, STEPHANIE, , ,

Mailing Address 1448 DUKE ST.

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IAAPA	Occupation (for Individual) GOVERNMENT RELATIONS
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
403.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11AI.4611

Amount of Each Receipt this Period
141.12

Memo Item
7/8-9/30 payroll contribution

SUBTOTAL of Receipts This Page (optional).....	2239.40
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: PAGE 16 OF 27
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SULLIVAN, JULIE, , ,

Mailing Address **1448 DUKE ST.**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **IAAPA** Occupation (for Individual) **Senior Manager**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11AI.4612

Amount of Each Receipt this Period
175.00

Memo Item
 7/8-9/30 payroll contribution

B. 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. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

C. 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. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	10675.97

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

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

FOR LINE NUMBER: PAGE 17 OF 27
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. SeaWorld Park & Entertainment
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9205 South Park Center Loop
 Suite 400
 City Orlando State FL Zip Code 32819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 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
 07 / 07 / 2016
Transaction ID : SA11C.4648
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B.
 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. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

C.
 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. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

Full Name (Last, First, Middle Initial) A. Bank of America			Date of Disbursement MM / DD / YYYY 07 / 05 / 2016		
Mailing Address P.O. Box 25118			FEC Identification Number C [REDACTED] Transaction ID : SB21B.4542 Amount of Each Disbursement this Period [REDACTED] 53.45		
City Tampa	State FL	Zip Code 33622-5118	Category/Type 001		
Purpose of Disbursement monthly merchant service fee		Candidate Name			
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:	<input type="checkbox"/> Memo Item				
Full Name (Last, First, Middle Initial) B. Bank of America			Date of Disbursement MM / DD / YYYY 08 / 02 / 2016		
Mailing Address P.O. Box 25118			FEC Identification Number C [REDACTED] Transaction ID : SB21B.4543 Amount of Each Disbursement this Period [REDACTED] 53.45		
City Tampa	State FL	Zip Code 33622-5118	Category/Type 001		
Purpose of Disbursement monthly merchant service fee		Candidate Name			
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:	<input type="checkbox"/> Memo Item				
Full Name (Last, First, Middle Initial) C. Bank of America			Date of Disbursement MM / DD / YYYY 09 / 02 / 2016		
Mailing Address P.O. Box 25118			FEC Identification Number C [REDACTED] Transaction ID : SB21B.4545 Amount of Each Disbursement this Period [REDACTED] 53.45		
City Tampa	State FL	Zip Code 33622-5118	Category/Type 001		
Purpose of Disbursement monthly merchant processing fee		Candidate Name			
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:	<input type="checkbox"/> Memo Item				
SUBTOTAL of Disbursements This Page (optional).....▶			[REDACTED] 160.35		
TOTAL This Period (last page this line number only).....▶			[REDACTED] 160.35		

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. BILIRAKIS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 606

City TARPON SPRINGS State FL Zip Code 34688

Purpose of Disbursement 011 Category/Type

Candidate Name **BILIRAKIS FOR CONGRESS**

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 22 / 2016

FEC Identification Number: **C**

Transaction ID : **SB23.4557**

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. BILL NELSON FOR U S SENATE

Full Name (Last, First, Middle Initial)
Mailing Address 972 W WHITMIRE DRIVE

City MELBOURNE State FL Zip Code 32935

Purpose of Disbursement 011 Category/Type

Candidate Name **BILL NELSON FOR U S SENATE**

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 00

Date of Disbursement: 09 / 14 / 2016

FEC Identification Number: **C** C00344051

Transaction ID : **SB23.4591**

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. BILLY LONG FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 3246 E RIDGEVIEW ST

City SPRINGFIELD State MO Zip Code 65804

Purpose of Disbursement 011 Category/Type

Candidate Name **BILLY LONG FOR CONGRESS**

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: MO District: 07

Date of Disbursement: 09 / 13 / 2016

FEC Identification Number: **C** C00460063

Transaction ID : **SB23.4560**

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

Full Name (Last, First, Middle Initial) A. CARLOS CURBELO CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 14 / 2016	
Mailing Address 8724 SW 72ND ST		FEC Identification Number C 000546846 Transaction ID : SB23.4576 Amount of Each Disbursement this Period 2000.00	
City MIAMI	State FL	Zip Code 33173	Purpose of Disbursement 011 Category/Type
Candidate Name CARLOS CURBELO CONGRESS		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 26	<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) B. CASTRO FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 21 / 2016	
Mailing Address PO BOX 544		FEC Identification Number C 000497933 Transaction ID : SB23.4566 Amount of Each Disbursement this Period 1000.00	
City SAN ANTONIO	State TX	Zip Code 78292	Purpose of Disbursement 011 Category/Type
Candidate Name CASTRO FOR CONGRESS		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 20	<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) C. DIANA DEGETTE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 13 / 2016	
Mailing Address P.O. BOX 61337		FEC Identification Number C 000311639 Transaction ID : SB23.4562 Amount of Each Disbursement this Period 1000.00	
City DENVER	State CO	Zip Code 80206	Purpose of Disbursement 011 Category/Type
Candidate Name DIANA DEGETTE FOR CONGRESS		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 01	<input type="checkbox"/> Memo Item	
SUBTOTAL of Disbursements This Page (optional)..... ▶		4000.00	
TOTAL This Period (last page this line number only)..... ▶		[Empty Box]	

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. FRIENDS OF KELLY AYOTTE INC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 937

City MANCHESTER State NH Zip Code 03105

Purpose of Disbursement 011 Category/Type

Candidate Name
FRIENDS OF KELLY AYOTTE INC

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: NH District: 00

Date of Disbursement: 09 / 20 / 2016

FEC Identification Number: C00464297
Transaction ID : SB23.4564
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. FRIENDS OF ROY BLUNT

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 10178

City COLUMBIA State MO Zip Code 65205

Purpose of Disbursement 011 Category/Type

Candidate Name
FRIENDS OF ROY BLUNT

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: MO District: 00

Date of Disbursement: 09 / 14 / 2016

FEC Identification Number: C00304758
Transaction ID : SB23.4596
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. HOYER FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 700 13TH STREET NW SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement 011 Category/Type

Candidate Name
HOYER FOR CONGRESS

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: MD District: 05

Date of Disbursement: 09 / 09 / 2016

FEC Identification Number: C00140715
Transaction ID : SB23.4588
Amount of Each Disbursement this Period: 2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4000.00

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

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

Full Name (Last, First, Middle Initial) A. LOBIONDO FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 14 / 2016
Mailing Address P. O. BOX 550		FEC Identification Number C00269340 Transaction ID : SB23.4594
City VINELAND	State NJ	Zip Code 08362
Purpose of Disbursement	Category/Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name LOBIONDO FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NJ District: 02	

Full Name (Last, First, Middle Initial) B. LOIS FRANKEL FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 14 / 2016
Mailing Address PO BOX 812421		FEC Identification Number C00494856 Transaction ID : SB23.4584
City BOCA RATON	State FL	Zip Code 33481
Purpose of Disbursement	Category/Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name LOIS FRANKEL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: FL District: 21	

Full Name (Last, First, Middle Initial) C. MARCO RUBIO FOR SENATE 2016		Date of Disbursement MM / DD / YYYY 09 / 14 / 2016
Mailing Address PO BOX 661537		FEC Identification Number C00620518 Transaction ID : SB23.4600
City MIAMI	State FL	Zip Code 33266
Purpose of Disbursement	Category/Type 011	Amount of Each Disbursement this Period 2000.00
Candidate Name MARCO RUBIO FOR SENATE 2016	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: FL District: 00	

SUBTOTAL of Disbursements This Page (optional).....▶	4000.00
TOTAL This Period (last page this line number only).....▶	

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

Full Name (Last, First, Middle Initial) A. MARSHA BLACKBURN FOR CONGRESS, INC.		Date of Disbursement MM / DD / YYYY 09 / 14 / 2016	
Mailing Address PO BOX 3750		FEC Identification Number C C00376939 Transaction ID : SB23.4570 Amount of Each Disbursement this Period 1000.00	
City BRENTWOOD	State TN	Zip Code 37024	Category/ Type 011
Purpose of Disbursement			
Candidate Name MARSHA BLACKBURN FOR CONGRESS, INC.		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TN District: 07	<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) B. MORAN FOR KANSAS		Date of Disbursement MM / DD / YYYY 09 / 14 / 2016	
Mailing Address PO BOX 1151		FEC Identification Number C C00458315 Transaction ID : SB23.4598 Amount of Each Disbursement this Period 1000.00	
City HAYS	State KS	Zip Code 67601	Category/ Type 011
Purpose of Disbursement			
Candidate Name MORAN FOR KANSAS		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: KS District: 00	<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) C. POMPEO FOR KANSAS, INC.		Date of Disbursement MM / DD / YYYY 09 / 13 / 2016	
Mailing Address PO BOX 780146		FEC Identification Number C C00460402 Transaction ID : SB23.4568 Amount of Each Disbursement this Period 1000.00	
City WICHITA	State KS	Zip Code 67278	Category/ Type 011
Purpose of Disbursement			
Candidate Name POMPEO FOR KANSAS, INC.		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: KS District: 04	<input type="checkbox"/> Memo Item	
SUBTOTAL of Disbursements This Page (optional)..... ▶		3000.00	
TOTAL This Period (last page this line number only)..... ▶		[Empty Box]	

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. ROYCE CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 3249

City FULLERTON State CA Zip Code 92834

Purpose of Disbursement 011 Category/Type

Candidate Name
ROYCE CAMPAIGN COMMITTEE

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: CA District: 39

Date of Disbursement: 09 / 07 / 2016

FEC Identification Number: C00200865
Transaction ID : SB23.4558
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. RYAN FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1488

City JANESVILLE State WI Zip Code 53547

Purpose of Disbursement 011 Category/Type

Candidate Name
RYAN FOR CONGRESS, INC.

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: WI District: 01

Date of Disbursement: 09 / 14 / 2016

FEC Identification Number: C00330894
Transaction ID : SB23.4580
Amount of Each Disbursement this Period: 2000.00

Memo Item

C. SCALISE FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 23219

City JEFFERSON State LA Zip Code 70183

Purpose of Disbursement 011 Category/Type

Candidate Name
SCALISE FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: LA District: 01

Date of Disbursement: 09 / 14 / 2016

FEC Identification Number: C00394957
Transaction ID : SB23.4582
Amount of Each Disbursement this Period: 2000.00

Memo Item

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

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

5000.00

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

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. SCOTT PETERS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 22074

City SAN DIEGO State CA Zip Code 92192

Purpose of Disbursement 011 Category/Type

Candidate Name
SCOTT PETERS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: CA District: 52

Date of Disbursement: 09 / 14 / 2016

FEC Identification Number: C00503110
Transaction ID : SB23.4586
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. SUSAN DAVIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 84049

City SAN DIEGO State CA Zip Code 92138

Purpose of Disbursement 011 Category/Type

Candidate Name
DAVIS, SUSAN, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: CA District: 53

Date of Disbursement: 07 / 08 / 2016

FEC Identification Number: C00344671
Transaction ID : SB23.4678
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 70098

City MYRTLE BEACH State SC Zip Code 29572

Purpose of Disbursement 011 Category/Type

Candidate Name
TOM RICE FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: SC District: 07

Date of Disbursement: 09 / 12 / 2016

FEC Identification Number: C00506048
Transaction ID : SB23.4572
Amount of Each Disbursement this Period: 1000.00

Memo Item

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

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

3000.00

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

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FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

Full Name (Last, First, Middle Initial)

A. TOOMEY, PATRICK JOSEPH, , ,

Mailing Address 5250 WHEATLAND DR

City
ZIONSVILLE

State
PA

Zip Code
18092

Purpose of Disbursement

011

Category/
Type

Candidate Name

TOOMEY, PATRICK JOSEPH, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify) ▼

State: PA

District: 00

Date of Disbursement

MM / DD / YYYY
07 / 12 / 2016

FEC Identification Number

C S4PA00121

Transaction ID : SB23.4553

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TREY GOWDY FOR CONGRESS

Mailing Address PO BOX 3324

City
SPARTANBURG

State
SC

Zip Code
29304

Purpose of Disbursement

011

Category/
Type

Candidate Name

TREY GOWDY FOR CONGRESS

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify)

State: SC

District: 04

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2016

FEC Identification Number

C C00462523

Transaction ID : SB23.4574

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. VOLUNTEERS FOR SHIMKUS

Mailing Address PO BOX 661

City
COLLINSVILLE

State
IL

Zip Code
62234

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify) ▼

State: IL

District: 15

Date of Disbursement

MM / DD / YYYY
07 / 12 / 2016

FEC Identification Number

C C00258855

Transaction ID : SB23.4683

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

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

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

Full Name (Last, First, Middle Initial)

A. WALBERG FOR CONGRESS

Mailing Address PO BOX 1362

City JACKSON

State MI

Zip Code 49204

Purpose of Disbursement

011

Category/Type

Candidate Name

WALBERG FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MI District: 07

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2016

FEC Identification Number

C C00390724

Transaction ID : SB23.4578

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WALDEN FOR CONGRESS

Mailing Address PO BOX 1091

City HOOD RIVER

State OR

Zip Code 97031

Purpose of Disbursement

011

Category/Type

Candidate Name

Walden, Greg, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OR District:

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2016

FEC Identification Number

C C00333427

Transaction ID : SB23.4547

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

3000.00

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

32000.00