



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
America's Fairs, Carnivals and Circuses-PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	0	8									
0.00												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%;"><tr><td align="right">15951.00</td></tr></table>	15951.00										
15951.00												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%;"><tr><td align="right">44100.00</td></tr></table>	44100.00	<table border="1" style="width: 100%;"><tr><td align="right">68551.00</td></tr></table>	68551.00								
44100.00												
68551.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%;"><tr><td align="right">60051.00</td></tr></table>	60051.00	<table border="1" style="width: 100%;"><tr><td align="right">68551.00</td></tr></table>	68551.00								
60051.00												
68551.00												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%;"><tr><td align="right">3000.00</td></tr></table>	3000.00	<table border="1" style="width: 100%;"><tr><td align="right">11500.00</td></tr></table>	11500.00								
3000.00												
11500.00												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%;"><tr><td align="right">57051.00</td></tr></table>	57051.00	<table border="1" style="width: 100%;"><tr><td align="right">57051.00</td></tr></table>	57051.00								
57051.00												
57051.00												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
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**

Write or Type Committee Name  
America's Fairs, Carnivals and Circuses-PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	42900.00	67351.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	42900.00	67351.00
(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 Totals to Line 33, page 5) .....	42900.00	67351.00
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 .....	1200.00	1200.00
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 Transfer (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)) .....	44100.00	68551.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	44100.00	68551.00

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	11500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	3000.00	11500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3000.00	11500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	42900.00	67351.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	42900.00	67351.00
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 / 16  
(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)  
America's Fairs, Carnivals and Circuses-PAC

**A.**

Full Name (Last, First, Middle Initial)  
Agnes Arnold

Mailing Address 1140 Oak Terrace

City State Zip Code  
Traverse City MI 49686

FEC ID number of contributing federal political committee. C

Name of Employer: Arnold Amusements Occupation: Carnival Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
08 / 06 / 2008

**Transaction ID:** SA11AI.4112

Amount of Each Receipt this Period 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Karen Arnold

Mailing Address 1140 Oak Terrace

City State Zip Code  
Traverse City MI 49686

FEC ID number of contributing federal political committee. C

Name of Employer: Arnold's Amusements Occupation: Carnival Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
08 / 06 / 2008

**Transaction ID:** SA11AI.4105

Amount of Each Receipt this Period 1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Arnold

Mailing Address 1140 Oak Terrace

City State Zip Code  
Traverse City MI 49686

FEC ID number of contributing federal political committee. C

Name of Employer: Arnold's Amusements Occupation: Carnival Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
08 / 06 / 2008

**Transaction ID:** SA11AI.4110

Amount of Each Receipt this Period 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">3000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

**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 / 16
	<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)  
America's Fairs, Carnivals and Circuses-PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Nancy Bishop		Date of Receipt
	Mailing Address 850 FM 2537		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 07 / 2008
	City	State	Zip Code
	San Antonio	TX	78221
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4136
Name of Employer Bishop Amusement Rides		Occupation Ride Owner	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeff Blomsness		Date of Receipt
	Mailing Address 435 Winfield Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 28 / 2008
	City	State	Zip Code
	Barrington	IL	60010
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4150
Name of Employer North American Midway		Occupation Carnival Operator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Kris Brajevich		Date of Receipt
	Mailing Address 1761 Whispering Willow Place		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 27 / 2008
	City	State	Zip Code
	San Jose	CA	95125
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4154
Name of Employer Butler Amusements		Occupation Carnival Office Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 6000.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 / 16
	<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)  
America's Fairs, Carnivals and Circuses-PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Earl Butler	Date of Receipt MM / DD / YYYY 07 / 26 / 2008
	Mailing Address 1385 Dry Creek Road	<b>Transaction ID:</b> SA11AI.4118
	City State Zip Code Campbell CA 95008	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Butler Amusements Carnival Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Joseph Clair	Date of Receipt MM / DD / YYYY 08 / 07 / 2008
	Mailing Address 190 Ocean Key Way	<b>Transaction ID:</b> SA11AI.4116
	City State Zip Code Jupiter FL 33477	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Clair's Classic Foods Concessions Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jose De La Cruz	Date of Receipt MM / DD / YYYY 08 / 05 / 2008
	Mailing Address 2037 West Bullard Avenue Apt. 327	<b>Transaction ID:</b> SA11AI.4130
	City State Zip Code Fresno CA 93711	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Js Concessions Concession Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3000.00
<b>TOTAL</b> 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 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
America's Fairs, Carnivals and Circuses-PAC

**A.** Full Name (Last, First, Middle Initial)  
Irene Dugan  
Mailing Address 5019 Solitude Court  
City State Zip Code  
Alta Loma CA 91737  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Dugan Concessions Occupation Concessions Owner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt MM / DD / YYYY  
08 / 08 / 2008  
**Transaction ID:** SA11AI.4138  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Debbie Elliott  
Mailing Address P.O. Box 236  
City State Zip Code  
Mason MI 48854  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Elliott's Amusements Occupation Carnival Owner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt MM / DD / YYYY  
08 / 05 / 2008  
**Transaction ID:** SA11AI.4101  
Amount of Each Receipt this Period 2000.00

**C.** Full Name (Last, First, Middle Initial)  
Joe Even  
Mailing Address 5108 Marc Drive  
City State Zip Code  
Tampa FL 33619  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Arnold's Amusements Occupation Food Concessionaire  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt MM / DD / YYYY  
08 / 06 / 2008  
**Transaction ID:** SA11AI.4107  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 4000.00  
**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 / 16  
(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)  
America's Fairs, Carnivals and Circuses-PAC

**A.**

Full Name (Last, First, Middle Initial)  
Harold Fera

Mailing Address P.O. Box 338

City State Zip Code  
North Scituate RI 02857

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

Name of Employer Occupation  
Rockwell Amusements Carnival Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2008

**Transaction ID:** SA11AI.4152

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
John Hanschen

Mailing Address 4508 Cliffstone Cove

City State Zip Code  
Austin TX 78735

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

Name of Employer Occupation  
Thomas Carnival Carnival Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
08 / 03 / 2008

**Transaction ID:** SA11AI.4148

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
David Helm

Mailing Address 480 Agua Mansa Road

City State Zip Code  
Colton CA 92324

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

Name of Employer Occupation  
Helm and Son's Amusements Carnival Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2008

**Transaction ID:** SA11AI.4120

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6500.00**

**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 11 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
America's Fairs, Carnivals and Circuses-PAC

**A.** Full Name (Last, First, Middle Initial)  
Debbie Helm

Mailing Address 6853 Wegman Drive

City State Zip Code  
Riverside CA 92509

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

Name of Employer Occupation  
Helm and Sons Amusements Carnival Operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2008

**Transaction ID:** SA11AI.4122

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Jody Lopez

Mailing Address 3532 East Squawbush Place

City State Zip Code  
Phoenix AZ 85044

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

Name of Employer Occupation  
Lopez Concessions Concessions Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2008

**Transaction ID:** SA11AI.4124

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Lance Moyer

Mailing Address 15715 La Tierra Drive

City State Zip Code  
Morgan Hill CA 95037

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

Name of Employer Occupation  
Butler Amusements Carnival Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2008

**Transaction ID:** SA11AI.4140

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10500.00**

**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 12 / 16  
(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)  
America's Fairs, Carnivals and Circuses-PAC

**A.**

Full Name (Last, First, Middle Initial)  
Oran Neck

Mailing Address 15 Calle Anacua

City State Zip Code  
Brownsville TX 78520

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

Name of Employer Occupation  
Ormic Concessions Concessions Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
08 / 26 / 2008

Transaction ID: SA11AI.4145

Amount of Each Receipt this Period  
400.00

**B.**

Full Name (Last, First, Middle Initial)  
Anne Netherfield

Mailing Address P.O. Box 1438

City State Zip Code  
Land O' Lakes FL 34639

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

Name of Employer Occupation  
Netherfield's Popcorn Concessions Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
08 / 07 / 2008

Transaction ID: SA11AI.4114

Amount of Each Receipt this Period  
3000.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael Ousey

Mailing Address 1101-D Thorpe Apt. 622

City State Zip Code  
San Marcos TX 78666

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

Name of Employer Occupation  
Mad Hatter Concessions Concessions Operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2008

Transaction ID: SA11AI.4134

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3900.00

**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 13 / 16  
(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)  
America's Fairs, Carnivals and Circuses-PAC

**A.**

Full Name (Last, First, Middle Initial)  
Joy Pickett

Mailing Address 12671 South Honahlee Court

City State Zip Code  
Phoenix AZ 85044

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

Name of Employer Trinity Concessions Occupation Concessions Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 8 / 2 0 0 8

**Transaction ID:** SA11AI.4132

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Debbie Powers

Mailing Address 4216 Edward Hyde Place

City State Zip Code  
Wilmington NC 28405

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

Name of Employer Powers Great American Occupation Carnival Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 8

**Transaction ID:** SA11AI.4128

Amount of Each Receipt this Period  
3000.00

**C.**

Full Name (Last, First, Middle Initial)  
Richard Reithoffer

Mailing Address 9022 Wiggins Road

City State Zip Code  
Gibsonton FL 33534

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

Name of Employer Reithoffer Shows Occupation Carnival Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 8

**Transaction ID:** SA11AI.4126

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4500.00**

**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 14 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
America's Fairs, Carnivals and Circuses-PAC

**A.** Full Name (Last, First, Middle Initial)  
Julie Rice

Mailing Address 25926 Bridgewood Lane  
Apt. 61

City State Zip Code  
Brownstown MI 48134

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

Name of Employer Occupation  
Tim and Tom Midways Carnival Office Manager

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2008

**Transaction ID:** SA11AI.4103

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Terry Swyear

Mailing Address 2622 Kaiser Road

City State Zip Code  
New Athens IL 62264

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

Name of Employer Occupation  
Swyear Amusements Carnival Owner

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 02 / 2008

**Transaction ID:** SA11AI.4142

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

**TOTAL** This Period (last page this line number only) ..... ► **42900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 16
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
America's Fairs, Carnivals and Circuses-PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Committee to Re-Elect Nydia Velazquez		Date of Receipt
	Mailing Address 315 Inspiration Lane		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		<input type="text" value="C00271312"/>
Name of Employer		Occupation	Transaction ID: SA16.4171 Amount of Each Receipt this Period <input type="text" value="1200.00"/> refund of excessive contribution
Receipt For: 2002		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text" value="1200.00"/>	
	<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1200.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="1200.00"/>

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

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NAME OF COMMITTEE (In Full)  
America's Fairs, Carnivals and Circuses-PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Brian Bilbray for Congress</p> <p>Mailing Address P.O. Box 455</p> <p>City Rancho Santa Fe State CA Zip Code 92067</p> <p>Purpose of Disbursement Fundraising event on 9/18/2008</p> <p>Candidate Name Brian Bilbray for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4161</p> <p>Date of Disbursement 09 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Forbes for Congress</p> <p>Mailing Address P.O. Box 15100</p> <p>City Chesapeake State VA Zip Code 23328</p> <p>Purpose of Disbursement Fundraising event on 9/16/2008</p> <p>Candidate Name Forbes for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4159</p> <p>Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jim Costa for Congress</p> <p>Mailing Address 2037 West Bullard Suite 355</p> <p>City Fresno State CA Zip Code 93711</p> <p>Purpose of Disbursement fundraising event on 9/24/2008</p> <p>Candidate Name Jim Costa for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 20</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4163</p> <p>Date of Disbursement 09 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p>

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

3000.00

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

3000.00