

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC

ADDRESS (number and street) 1035 S SEMORAN BLVD
SUITE 1045A
WINTER PARK FL 32792
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00163212
3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31 (selected), July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31
(c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special
(d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 11 / 27 / 2018 through 12 / 31 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
JOHNSON, ROBERT, W, ,
Type or Print Name of Treasurer

Signature of Treasurer JOHNSON, ROBERT, W, , [Electronically Filed] Date 01 / 31 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC 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="2018"/>		127573.12
(b) Cash on Hand at Beginning of Reporting Period.....	94118.02	
(c) Total Receipts (from Line 19) .....	2200.00	14331.51
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	96318.02	141904.63
7. Total Disbursements (from Line 31).....	5159.01	50745.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	91159.01	91159.01
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	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

**OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC**

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

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).....	2200.00	13200.00
(ii) Unitemized .....	0.00	700.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2200.00	13900.00
(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) .....	2200.00	13900.00
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.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	431.51
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)).....▶	2200.00	14331.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2200.00	14331.51

**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 .....	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.....	5000.00	50000.00
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).....	159.01	745.62
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)) ..	5159.01	50745.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5159.01	50745.62

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2200.00	13900.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2200.00	13900.00
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: (check only one)	PAGE 6 OF 9
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A. JOHNSON, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 629 N FORREST AVE  
 City ARLINGTON HEIGHTS State IL Zip Code 60004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ARLINGTON'S BEST CONCESSIONS Occupation (for Individual) CONCESSION OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **12 / 06 / 2018**  
**Transaction ID : SA11AI.4837**  
 Amount of Each Receipt this Period 600.00  
 Memo Item

**B. Vivona, Dominic, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 Bradford Ln  
 City Plainsboro State NJ Zip Code 08536  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amusements of America Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 27 / 2018**  
**Transaction ID : SA11AI.4834**  
 Amount of Each Receipt this Period 600.00  
 Memo Item

**C. WOOD, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 OSIANA DR  
 City SAN ANTONIO State TX Zip Code 78248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WOOD ENTERTAINMENT CO Occupation (for Individual) RIDE OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **12 / 06 / 2018**  
**Transaction ID : SA11AI.4829**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2200.00
<b>TOTAL</b> This Period (last page this line number only).....	2200.00

**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"/> 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)  
**OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC**

Full Name (Last, First, Middle Initial)  
**A. TOGETHER HOLDING OUR MAJORITY PAC**

Mailing Address PO BOX 97275

City RALEIGH State NC Zip Code 27624

Purpose of Disbursement  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y  
11 / 30 / 2018

FEC Identification Number: **C** C00571323  
**Transaction ID : SB23.4833**

Amount of Each Disbursement this Period: 5000.00

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y

FEC Identification Number: **C**

Amount of Each Disbursement this Period

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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y

FEC Identification Number: **C**

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC**

Full Name (Last, First, Middle Initial)

**A. AuthorizeNet**

Mailing Address P.O. Box 947

City American Fork State UT Zip Code 84003

Purpose of Disbursement Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB29.4838

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. SunTrust Bank**

Mailing Address 303 Peachtree St NW

City Atlanta State GA Zip Code 30308

Purpose of Disbursement Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB29.4839

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. SunTrust Bank**

Mailing Address 303 Peachtree St NW

City Atlanta State GA Zip Code 30308

Purpose of Disbursement Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB29.4841

Amount of Each Disbursement this Period

Memo Item

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

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

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NAME OF COMMITTEE (In Full)

**OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC**

Full Name (Last, First, Middle Initial)

**A. SunTrust Bank**

Mailing Address 303 Peachtree St NW

City Atlanta State GA Zip Code 30308

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 19 / 2018

FEC Identification Number

C

Transaction ID : SB29.4842

Amount of Each Disbursement this Period

9.91

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

9.91

84.01