FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2016 APR 11 PM 12:14
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

☐ Check if different than previously reported. (ACC)

CITY ▲ WINTER PARK | STATE ▲ FL | ZIP CODE ▲ 32792-5512

2. FEC IDENTIFICATION NUMBER ▼ C06163212

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☒ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☐ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the:
☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)
Election on (MM/DD/YYYY) ____ in the State of ____

(d) 30-Day **POST**-Election Report for the:
☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)
Election on (MM/DD/YYYY) ____ in the State of ____

5. Covering Period 01/01/2016 through 03/31/2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert W Johnson

Signature of Treasurer Robert W Johnson Date 04/04/2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only							

FEC FORM 3X
Rev. 12/2004

FE8AN026

20160411HW26000

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name

OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC

Report Covering the Period: From: 01 / 01 / 2016 To: 03 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		12051945
(b) Cash on Hand at Beginning of Reporting Period	12051945	
(c) Total Receipts (from Line 19)	1182500	1182500
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	13234445	13234445
7. Total Disbursements (from Line 31)	145000	145000
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	13089445	13089445
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)		

☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3X** (Rev. 06/2004)

Write or Type Committee Name

OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC

Report Covering the Period: From: 01 01 2016 To: 03 31 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)	11,825.00	11,825.00
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶		
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)		
(b) Levin Funds (from Schedule H5)		
(c) Total Transfers (add 18(a) and 18(b))		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	11,825.00	11,825.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶		

24IW20000 INO 11-10-2016

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	200.00	200.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,250.00	1,250.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1450.00	1450.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶		

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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

2016041100000000

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 1 OF 5

☑ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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.
Full Name (Last, First, Middle Initial): Deborah Powers
Mailing Address: 4216 Edward Hyde Pl.
City: Wilmington State: NC Zip Code: 28405
FEC ID number of contributing federal political committee: C
Name of Employer: Powers Great American Midways
Occupation: carnival owner
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date:
Date of Receipt: 02/24/2016
Amount of Each Receipt this Period: 3,000.00

B.
Full Name (Last, First, Middle Initial): Michael Brajevich
Mailing Address: 1871 McBain Ave.
City: San Jose State: CA Zip Code: 95125
FEC ID number of contributing federal political committee: C
Name of Employer: Butler Amusements
Occupation: carnival owner
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date:
Date of Receipt: 02/24/2016
Amount of Each Receipt this Period: 5,000.00

C.
Full Name (Last, First, Middle Initial): Jessica Bessette
Mailing Address: 7631 147th Ln. NW
City: Ramsey State: MN Zip Code: 55303
FEC ID number of contributing federal political committee: C
Name of Employer: Gold Star Amusements
Occupation: ride owner
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date:
Date of Receipt: 02/24/2016
Amount of Each Receipt this Period: 10000

SUBTOTAL of Receipts This Page (optional) ▶ 8,100.00

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

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 2 OF 5

☑ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A.
Full Name (Last, First, Middle Initial): Sarah L. McAndrew
Mailing Address: 12 Point View Dr.
City: Central Square State: NY Zip Code: 13036
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date ▼
Date of Receipt: 02 / 24 / 2016
Amount of Each Receipt this Period: 1,025.00

B.
Full Name (Last, First, Middle Initial): Nicholas Strates
Mailing Address: 4609 Old National Pike
City: Mt. Airy State: MD Zip Code: 21771
FEC ID number of contributing federal political committee: C
Name of Employer: Strates Shows
Occupation: manager
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date ▼
Date of Receipt: 02 / 24 / 2016
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): Rob Miller
Mailing Address: 1865 Highway 25 NE
City: Foley State: MN Zip Code: 56329
FEC ID number of contributing federal political committee: C
Name of Employer: Miller Concessions
Occupation: owner
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date ▼
Date of Receipt: 02 / 24 / 2016
Amount of Each Receipt this Period: 10000

SUBTOTAL of Receipts This Page (optional) ▶ 1,225.00

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

6MW20000-NO-11-20-6-10-2

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 3 OF 5
(check only one)
☑ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A.
Full Name (Last, First, Middle Initial): Thomas J. Gaylin
Mailing Address: 7920 Gilmore Ave.
City: Baltimore State: MD Zip Code: 21237
FEC ID number of contributing federal political committee: C
Name of Employer: Rosedale Attractions
Occupation: carnival ower
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼
Date of Receipt: 02 / 24 / 2016
Amount of Each Receipt this Period: ,100.00

B.
Full Name (Last, First, Middle Initial): Joseph Gaylin
Mailing Address: 7920 Gilmore Ave.
City: Baltimore State: MD Zip Code: 21237
FEC ID number of contributing federal political committee: C
Name of Employer: Rosedale Attractions
Occupation: carnival worker
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼
Date of Receipt: 02 / 24 / 2016
Amount of Each Receipt this Period: ,100.00

C.
Full Name (Last, First, Middle Initial): Jason Gaylin
Mailing Address: 7920 Gilmore Ave.
City: Baltimore State: MD Zip Code: 21237
FEC ID number of contributing federal political committee: C
Name of Employer: Rosedale Attractions
Occupation: carnival worker
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼
Date of Receipt: 02 / 24 / 2016
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ ,300.00

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

14990600411-140-01-02

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 4 OF 5

☑ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC

A.
Full Name (Last, First, Middle Initial): Debbie Green
Mailing Address: 11044 US Hwy 431
City: Utica State: KY Zip Code: 42376
FEC ID number of contributing federal political committee: C
Name of Employer: Casey's Rides
Occupation: ride owner
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date:
Date of Receipt: 02 / 24 / 2016
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial): Mary Johnson
Mailing Address: 629 N. Forrest
City: Arlington Heights State: IL Zip Code: 60004
FEC ID number of contributing federal political committee: C
Name of Employer: Fantasy Amusement Co.
Occupation: treasurer
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date:
Date of Receipt: 03 / 02 / 2016
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): Don Massie
Mailing Address: 2648 Wild Timothy Rd.
City: Naperville State: IL Zip Code: 60564
FEC ID number of contributing federal political committee: C
Name of Employer: Alpine Amusement Co.
Occupation: carnival owner
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date:
Date of Receipt: 03 / 02 / 2016
Amount of Each Receipt this Period: 1,000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1,200.00

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

28970600000-140-11-02-2016

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 5 OF 5

☑ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC

A.
Full Name (Last, First, Middle Initial): Michael Wood
Mailing Address: 111 Osjana Dr.
City: San Antonio State: TX Zip Code: 78248
FEC ID number of contributing federal political committee: C
Name of Employer: Wood Entertainment
Occupation: amusements
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼
Date of Receipt: 03 / 02 / 2016
Amount of Each Receipt this Period: 1,000.00

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

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

SUBTOTAL of Receipts This Page (optional) ▶ 1,000.00

TOTAL This Period (last page this line number only) ▶ 11,825.00

SA11AI.2016020410000000

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)
☐ 21b ☐ 22 ☑ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 1 OF 1

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

A.
Full Name (Last, First, Middle Initial): TEAM RYAN
Mailing Address: c/o Susan Lily, 1005 Congress Ave. Ste. 920
City: Austin State: TX Zip Code: 78701
Purpose of Disbursement: campaign contribution
Candidate Name: Paul Ryan
Office Sought: ☐ House ☐ Senate ☐ President
State: TX District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Category/Type: 011
Date of Disbursement: 01 / 13 / 2016
Amount of Each Disbursement this Period: 1,000.00

B.
Full Name (Last, First, Middle Initial): Committee to Elect Dan Burke
Mailing Address: 2650 W. 51st St.
City: Chicago State: IL Zip Code: 60632
Purpose of Disbursement: campaign contribution
Candidate Name: Dan Burke
Office Sought: ☐ House ☐ Senate ☐ President
State: IL District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Category/Type: 011
Date of Disbursement: 01 / 29 / 2016
Amount of Each Disbursement this Period: 250.00

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: MM / DD / YYYY
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 1,250.00

TOTAL This Period (last page this line number only) ▶ 1,250.00

24N26000-N0-11-20161040

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)
☑ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 1 OF 1

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

A.
Full Name (Last, First, Middle Initial)
McDirmit Davis CPA
Mailing Address
934 N. Magnolia Ave. Ste. 100
City: Orlando State: FL Zip Code: 32803
Purpose of Disbursement: tax filing
Candidate Name:
Category/ Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 19 / 2016
Amount of Each Disbursement this Period: 20000

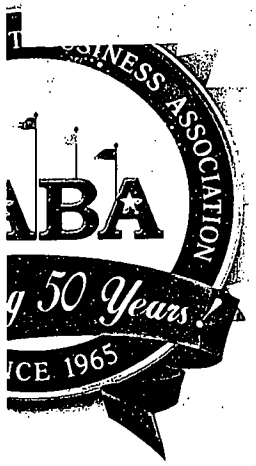
B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
Purpose of Disbursement
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: MM / DD / YYYY
Amount of Each Disbursement this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
Purpose of Disbursement
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: MM / DD / YYYY
Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶ 200.00

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

20160411030062421



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1 Blvd., Suite 1045A
ırk, FL 32792

Federal Election Commission
999 E Street, NW
Washington, DC 20463

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	Date of Receipt
☐ USPS First Class Mail	Postmarked / Date of Receipt
☑ USPS Registered/Certified	Postmarked (R/C) NONE
☐ USPS Priority Mail	Postmarked
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☐ Postmark Illegible	
☑ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery ☐
☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked
PREPARER	4/11/16 DATE PREPARED

(3/2015)

WASHINGTON DC 20463 2016 APR 11 PM 3:00