

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

ADDRESS (number and street) 1448 DUKE STREET
 Check if different than previously reported. (ACC)
ALEXANDRIA VA 22314

2. **FEC IDENTIFICATION NUMBER** C00144154
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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2007 through 12 31 2007

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 Mr. Thomas Fischetti

Signature of Treasurer Electronically Filed by Mr. Thomas Fischetti Date 05 14 2008

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)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 7 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To:

| | |
|---|---|
| M | M |
| 1 | 2 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| | 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>7</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 7 | | 15424.96 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 7 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 16636.60 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 8085.00 | 12485.00 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 24721.60 | 27909.96 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 1302.97 | 4491.33 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 23418.63 | 23418.63 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY 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**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

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

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 7 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To:

| | |
|---|---|
| M | M |
| 1 | 2 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| 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) | 7985.00 | 11485.00 |
| (ii) Unitemized | 100.00 | 1000.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 8085.00 | 12485.00 |
| (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) | 8085.00 | 12485.00 |
| 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 | 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)) | 8085.00 | 12485.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 8085.00 | 12485.00 |

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..... | 1000.00 | 4000.00 |
| 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..... | 302.97 | 491.33 |
| 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)).. | 1302.97 | 4491.33 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 1302.97 | 4491.33 |

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 | 8085.00 | 12485.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 8085.00 | 12485.00 |
| 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 / 15 |
| | <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)
INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

| | | | | |
|---|---|---|---|------------------------------------|
| A. | Full Name (Last, First, Middle Initial) Mr. Chip Cleary | | Date of Receipt MM / DD / YYYY 10 / 30 / 2007 | |
| | Mailing Address 17 Lost meadow Lane | | Transaction ID: SA11AI.4199 | |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | Port Jefferson | NY | 11777 | 800.00 |
| | FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Palace Entertainment | | Occupation Senior VP Water Park Division | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 800.00 | | |

| | | | | |
|---|---|------------------------------------|---|------------------------------------|
| B. | Full Name (Last, First, Middle Initial) Mr. Peter Herschend | | Date of Receipt MM / DD / YYYY 11 / 05 / 2007 | |
| | Mailing Address 100 Coporate Place | | Transaction ID: SA11AI.4201 | |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | Branson | MO | 65616 | 800.00 |
| | FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Herschend Family Entertainment | | Occupation Co-Founder | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 800.00 | | |

| | | | | |
|---|---|------------------------------------|---|------------------------------------|
| C. | Full Name (Last, First, Middle Initial) Mr. John Manby | | Date of Receipt MM / DD / YYYY 11 / 05 / 2007 | |
| | Mailing Address 640 Fall Lake Drive | | Transaction ID: SA11AI.4203 | |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | Alpharetta | GA | 30022 | 800.00 |
| | FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Herschend Family Entertainment | | Occupation President & CEO | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 800.00 | | |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2400.00 |
| 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 7 / 15 | | |
| | <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 |

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

| | | | | | | |
|-----------|---|-------|-------------------|---|--|--|
| A. | Full Name (Last, First, Middle Initial) Mr. John McReynolds | | | Date of Receipt MM / DD / YYYY 09 / 17 / 2007 | | |
| | Mailing Address 10039 Canopy Tree Ct. | | | Transaction ID: SA11AI.4206 | | |
| | City | State | Zip Code | Amount of Each Receipt this Period | | |
| | Orlando | FL | 32836 | 300.00 | | |
| | FEC ID number of contributing federal political committee. C | | | | | |
| | Name of Employer Universal Studios | | Occupation SVP | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

Aggregate Year-to-Date ▼
300.00

| | | | | | | |
|-----------|---|-------|-------------------|---|--|--|
| B. | Full Name (Last, First, Middle Initial) Mr. John McReynolds | | | Date of Receipt MM / DD / YYYY 09 / 28 / 2007 | | |
| | Mailing Address 10039 Canopy Tree Ct. | | | Transaction ID: SA11AI.4208 | | |
| | City | State | Zip Code | Amount of Each Receipt this Period | | |
| | Orlando | FL | 32836 | 185.00 | | |
| | FEC ID number of contributing federal political committee. C | | | | | |
| | Name of Employer Universal Studios | | Occupation SVP | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

Aggregate Year-to-Date ▼
485.00

| | | | | | | |
|-----------|---|-------|-------------------|---|--|--|
| C. | Full Name (Last, First, Middle Initial) Mr. John McReynolds | | | Date of Receipt MM / DD / YYYY 11 / 20 / 2007 | | |
| | Mailing Address 10039 Canopy Tree Ct. | | | Transaction ID: SA11AI.4209 | | |
| | City | State | Zip Code | Amount of Each Receipt this Period | | |
| | Orlando | FL | 32836 | 800.00 | | |
| | FEC ID number of contributing federal political committee. C | | | | | |
| | Name of Employer Universal Studios | | Occupation SVP | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

Aggregate Year-to-Date ▼
1285.00

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1285.00 |
| 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 8 / 15 |
| | <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. | Full Name (Last, First, Middle Initial) Jack Morey | | Date of Receipt |
| | Mailing Address 112 Ibis 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 |
| | City | State | Zip Code |
| | Wildwood Crest | NJ | 08260 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.4210 |
| Name of Employer Morey's Piers | | Occupation Executive VP | 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"/> 1000.00 |

| | | | |
|---|---|----------------------------|---|
| B. | Full Name (Last, First, Middle Initial) Jack Morey | | Date of Receipt |
| | Mailing Address 112 Ibis 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 |
| | City | State | Zip Code |
| | Wildwood Crest | NJ | 08260 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.4212 |
| Name of Employer Morey's Piers | | Occupation Executive VP | 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"/> 200.00 |

| | | | |
|---|---|-----------------------------|---|
| C. | Full Name (Last, First, Middle Initial) Mr. Will Morey | | Date of Receipt |
| | Mailing Address 8500 Batview Drive | | <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 |
| | City | State | Zip Code |
| | Wildwood Crest | NJ | 08260 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.4224 |
| Name of Employer Morey's Piers | | Occupation President/CEO | 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"/> 200.00 |

| | |
|--|------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 1400.00 |
| TOTAL 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: PAGE 9 / 15
(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)

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) Mr. Rob Norris</p> <p>Mailing Address 55 Manitou Beach Road</p> <p>City State Zip Code Hilton NY 14468</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Seabreeze Park President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p> | <p>Date of Receipt 07 / 25 / 2007</p> <p>Transaction ID: SA11AI.4213</p> <p>Amount of Each Receipt this Period 500.00</p> |
|---|--|

| | |
|---|--|
| <p>B. Full Name (Last, First, Middle Initial) Mr. Rob Norris</p> <p>Mailing Address 55 Manitou Beach Road</p> <p>City State Zip Code Hilton NY 14468</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Seabreeze Park President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 900.00</p> | <p>Date of Receipt 11 / 20 / 2007</p> <p>Transaction ID: SA11AI.4215</p> <p>Amount of Each Receipt this Period 400.00</p> |
|---|--|

| | |
|---|---|
| <p>C. Full Name (Last, First, Middle Initial) Mr. Jim Pattison</p> <p>Mailing Address 7576 Kingspointe Prwy #188</p> <p>City State Zip Code Orlando FL 32819</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Ripley Entertainment Executive Vice President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1100.00</p> | <p>Date of Receipt 10 / 30 / 2007</p> <p>Transaction ID: SA11AI.4216</p> <p>Amount of Each Receipt this Period 1000.00</p> |
|---|---|

| | |
|--|---|
| SUBTOTAL of Receipts This Page (optional) | 1900.00 |
| 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 / 15
(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.

Full Name (Last, First, Middle Initial)
Mr. Andy Quinn

Mailing Address 116 Rock Haven Lane

City State Zip Code
Pittsburgh PA 15228

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

Name of Employer Occupation
Kennywood Director of Community Outreach

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2007

Transaction ID: SA11AI.4217

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert Rippy

Mailing Address 136 Edgewater Lane

City State Zip Code
Wilmington NC 28403

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

Name of Employer Occupation
Jungle Rapids President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2007

Transaction ID: SA11AI.4219

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Clark Robinson

Mailing Address 3046 S 975 E

City State Zip Code
Bountiful UT 84010

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

Name of Employer Occupation
IAAPA Vice President of Global Outreach

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 12 / 2007

Transaction ID: SA11AI.4220

Amount of Each Receipt this Period
250.00

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1000.00 |
| TOTAL This Period (last page this line number only) | ▶ | 7985.00 |

**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)

PAGE 11 / 15

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)

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

A.

Full Name (Last, First, Middle Initial)
PORTER FOR CONGRESS

Mailing Address 900 Pavillion Center Drive #300

City Las Vegas State NV Zip Code 89144

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NV District: 03

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.4188

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 2 | | 2 | 0 | 0 | 7 |

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

**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)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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 checked="" 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. Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address P.O. Box 25118 <hr/> City Tampa State FL Zip Code 25118 <hr/> Purpose of Disbursement Bank Card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.4189 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 0 7 |
| | Amount of Each Disbursement this Period 34.95 |
| | Category/ Type |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address P.O. Box 25118 <hr/> City Tampa State FL Zip Code 25118 <hr/> Purpose of Disbursement Bank card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.4190 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 7 |
| | Amount of Each Disbursement this Period 34.95 |
| | Category/ Type |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address P.O. Box 25118 <hr/> City Tampa State FL Zip Code 25118 <hr/> Purpose of Disbursement Bank card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.4191 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 7 |
| | Amount of Each Disbursement this Period 41.41 |
| | Category/ Type |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ▶

111.31

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)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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 checked="" 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. Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address P.O. Box 25118 <hr/> City Tampa State FL Zip Code 25118 <hr/> Purpose of Disbursement Bank card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.4192 Date of Disbursement 10 / 01 / 2007 |
| | Amount of Each Disbursement this Period 72.16 |
| | Category/ Type |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address P.O. Box 25118 <hr/> City Tampa State FL Zip Code 25118 <hr/> Purpose of Disbursement Bank card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.4193 Date of Disbursement 10 / 03 / 2007 |
| | Amount of Each Disbursement this Period 5.95 |
| | Category/ Type |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address P.O. Box 25118 <hr/> City Tampa State FL Zip Code 25118 <hr/> Purpose of Disbursement Bank card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.4194 Date of Disbursement 11 / 01 / 2007 |
| | Amount of Each Disbursement this Period 41.30 |
| | Category/ Type |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ▶

119.41

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)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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 checked="" 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. | Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address P.O. Box 25118 <hr/> City Tampa State FL Zip Code 25118 <hr/> Purpose of Disbursement Bank card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.4195 Date of Disbursement 11 / 06 / 2007 <hr/> Amount of Each Disbursement this Period 5.95 |
| B. | Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address P.O. Box 25118 <hr/> City Tampa State FL Zip Code 25118 <hr/> Purpose of Disbursement Bank card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.4196 Date of Disbursement 11 / 23 / 2007 <hr/> Amount of Each Disbursement this Period 4.50 |
| C. | Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address P.O. Box 25118 <hr/> City Tampa State FL Zip Code 25118 <hr/> Purpose of Disbursement Bank card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.4197 Date of Disbursement 12 / 03 / 2007 <hr/> Amount of Each Disbursement this Period 51.35 |

SUBTOTAL of Disbursements This Page (optional) ▶

61.80

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)

PAGE 15 / 15

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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 checked="" 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.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address P.O. Box 25118

City
Tampa

State Zip Code
FL 25118

Purpose of Disbursement
Bank card Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.4198

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

10.45

SUBTOTAL of Disbursements This Page (optional)

10.45

TOTAL This Period (last page this line number only)

302.97