

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER
7005 JUL 25 2005

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) **PO BOX 582**

Check if different than previously reported. (ACC)

HOPKINS MN 55343-0582

2. FEC IDENTIFICATION NUMBER **00163212**

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) 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 (12S)

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 **01/01/2005** through **06/30/2005**

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. Foxson**

Signature of Treasurer **Robert W. Foxson** Date **07/19/2005**

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

2503333440

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Outdoor Amusement Business Association Inc PAC

Report Covering the Period: From: 01 ' 01 ' 2005 To: 06 ' 30 ' 2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2005</u>		<u>12938193</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>12938193</u>	
(c) Total Receipts (from Line 19).....	<u>000</u>	<u>000</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<u>12938193</u>	<u>12938193</u>
7. Total Disbursements (from Line 31).....	<u>122200</u>	<u>122200</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<u>12815993</u>	<u>12815993</u>
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

25038855441

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Outdoor Amusement Business Association Inc PAC

Report Covering the Period:

From:

01 ' 01 ' 2005

To:

06 ' 30 ' 2005

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).....
 - (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.....

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13. All Loans Received.....

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14. Loan Repayments Received.....

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15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

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16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

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17. Other Federal Receipts (Dividends, Interest, etc.).....

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18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....

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- (b) Levin Funds (from Schedule H5).....

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- (c) Total Transfers (add 18(a) and 18(b))..

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19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

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20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

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DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

	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	72200	72200
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	72200	72200
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	50000	50000
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)) ..	122200	122200
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	122200	122200

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex-
penditures

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) ▶

72200
72200

72200
72200

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**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 OF

<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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Wells Fargo Bank

Mailing Address

7900 Xerxes Ave. S.

City: Bloomington State: MN Zip Code: 55431

Purpose of Disbursement

bank service charge

Candidate Name

001

Category/Type

Date of Disbursement

01 / 10 / 2005

Amount of Each Disbursement this Period

200

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank

Mailing Address

7900 Xerxes Ave. S.

City: Bloomington State: MN Zip Code: 55431

Purpose of Disbursement

bank service charge

Candidate Name

001

Category/Type

Date of Disbursement

02 / 08 / 2005

Amount of Each Disbursement this Period

200

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank

Mailing Address

7900 Xerxes Ave. S.

City: Bloomington State: MN Zip Code: 55431

Purpose of Disbursement

bank service charge

Candidate Name

001

Category/Type

Date of Disbursement

03 / 08 / 2005

Amount of Each Disbursement this Period

200

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

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

600

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

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**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	OF
	<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 type="checkbox"/> 29	<input type="checkbox"/> 30b		

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NAME OF COMMITTEE (In Full)
Outdoor Amusement Business Association Inc. PAC

A. Minnesota Dept. of Revenue

Full Name (Last, First, Middle Initial)

Mailing Address: **Mail Station 1257**

City: **St. Paul** State: **MN** Zip Code: **55146-1257**

Purpose of Disbursement: **MN taxes - franchise tax**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: **03 / 11 / 2005**

Amount of Each Disbursement this Period: **59.00**

Category/Type: **001**

B. Wells Fargo Bank

Full Name (Last, First, Middle Initial)

Mailing Address: **7900 Xerxes Ave. S.**

City: **Bloomington** State: **MN** Zip Code: **55431**

Purpose of Disbursement: **federal taxes deposit**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **federal taxes 1120-POL**

State: _____ District: _____

Date of Disbursement: **03 / 14 / 2005**

Amount of Each Disbursement this Period: **2,100.00**

Category/Type: **001**

C. Wells Fargo Bank

Full Name (Last, First, Middle Initial)

Mailing Address: **7900 Xerxes Ave. S.**

City: **Bloomington** State: **MN** Zip Code: **55431**

Purpose of Disbursement: **bank service charge**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: **03 / 15 / 2005**

Amount of Each Disbursement this Period: **33.00**

Category/Type: **001**

SUBTOTAL of Disbursements This Page (optional) **3,020.00**

TOTAL This Period (last page this line number only) **3,020.00**

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**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 OF

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

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NAME OF COMMITTEE (In Full)

Outdoor Amusement Business Association Inc. PAC

Full Name (Last, First, Middle Initial)

A. Wells Fargo Bank

Date of Disbursement

04 / 08 / 2005

Mailing Address

1900 Xerxes Ave. S.

City State Zip Code

Bloomington MN 55431

Purpose of Disbursement

bank service charge

001
Category/
Type

Amount of Each Disbursement this Period

200

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank

Date of Disbursement

05 / 09 / 2005

Mailing Address

1900 Xerxes Ave. S.

City State Zip Code

Bloomington MN 55431

Purpose of Disbursement

001
Category/
Type

Amount of Each Disbursement this Period

200

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Graves, McKenna, Lundeen & Almqvist

Date of Disbursement

05 / 16 / 2005

Mailing Address

6800 France Ave. S.

City State Zip Code

Minneapolis MN 55435-2071

Purpose of Disbursement

tax preparation

001
Category/
Type

Amount of Each Disbursement this Period

410.00

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

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

41400

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

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NAME OF COMMITTEE (In Full)
Outdoor Amusement Business Association Inc. PAC

A Senator Bill Nelson Reelection Campaign

Date of Disbursement: 03 / 24 / 2005

Mailing Address: 500 Red Sail Way
City: Satellite Beach FL Zip Code: 32937

Purpose of Disbursement: reelection campaign
Candidate Name: Bill Nelson
Category/Type: 011

Amount of Each Disbursement this Period: 500.00

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

State: District:

B.

Date of Disbursement: / /

Mailing Address: / / /
City: State Zip Code

Purpose of Disbursement: /
Candidate Name: /
Category/Type: /

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

State: District:

C.

Date of Disbursement: / /

Mailing Address: / / /
City: State Zip Code

Purpose of Disbursement: /
Candidate Name: /
Category/Type: /

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

State: District:

SUBTOTAL of Disbursements This Page (optional): 500.00

TOTAL This Period (last page this line number only): 1222.00

250500053448

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.

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<input type="checkbox"/> USPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

QAO
 PREPARER
 (3/2005)

7/25/05
 DATE PREPARED

25030013448