

**FEC FORM 3X**

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

RECEIVED  
FEC MAIL ROOM  
2002 FEB 12 P 1:56

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Outdoor Amusement Business Association Inc  
PAC

ADDRESS (number and street)

P.O. Box 582

Check if different than previously reported. (ACC)

Hopkins

MM

55343-10582

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

000163212

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)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

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 2001

through

02 31 2001

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

01 25 2002

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 (Revised 1/01)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

Outdoor Amusement Business Association Inc. PAC

Report Covering the Period: From: 07 01 2001 To: 12 31 2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text"/>		<u>13412324</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>13440934</u>	
(c) Total Receipts (from Line 19).....	<u>1038477</u>	<u>1389387</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<u>14479411</u>	<u>14801711</u>
7. Total Disbursements (from Line 30).....	<u>103400</u>	<u>425700</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<u>14376011</u>	<u>14376011</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text"/>	

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 (Revised 1/01)

Page 3

Write or Type Committee Name

Outdoor Amusement Business Association Inc. PAC

Report Covering the Period:

From:

07 01 2001

To:

12 31 2001

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 32, page 4) .....		
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 36, page 4) .....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....		
17. Other Federal Receipts (Dividends, Interest, etc.) .....	10,384.77	13,893.87
18. Transfers from Nonfederal Account for Joint Activity .....		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	10,384.77	13,893.87
20. Total Federal Receipts (subtract Line 18 from Line 19) .....	10,384.77	13,893.87

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Revised 1/01)

Page 4

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 .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....	3400	325700
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3400	325700
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	100000	100000
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Expenditures Made by Party Committees (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. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) .....		
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30) .....		
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from Line 11(d), page 3) .....		
33. Total Contribution Refunds (from Line 28(d)) .....		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32) .....		
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3400	325700
36. Offsets to Operating Expenditures (from Line 15, page 3) .....		
37. Net Operating Expenditures (subtract Line 36 from Line 35) .....	3400	325700

**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"/> 29c <input type="checkbox"/> 29		

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**

Full Name (Last, First, Middle Initial) **Wells Fargo Bank** **INC PAR**

Mailing Address **7900 Xerxes Ave. So.**

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

Purpose of Disbursement **bank account fee**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement **07 10 2001**

Amount of Each Disbursement this Period **2.00**

Category/Type

Full Name (Last, First, Middle Initial) **Wells Fargo Bank**

Mailing Address **7900 Xerxes Ave. So.**

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

Purpose of Disbursement **bank account fee**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement **08 14 2001**

Amount of Each Disbursement this Period **2.00**

Category/Type

Full Name (Last, First, Middle Initial) **Wells Fargo Bank**

Mailing Address **7900 Xerxes Ave. So.**

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

Purpose of Disbursement **bank account fee**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement **09 11 2001**

Amount of Each Disbursement this Period **2.00**

Category/Type

SUBTOTAL of Disbursements This Page (optional) **6.00**

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 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

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NAME OF COMMITTEE (in Full)  
**Outdoor Amusement Business Assoc. Inc. PAC**

A. **Wells Fargo Bank**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **7900 Xerxes Ave. So.**  
 City: **Bloomington MN 55431**  
 State: **MN** Zip Code: **55431**  
 Purpose of Disbursement: **bank account fee**  
 Candidate Name: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **10/09/2001**  
 Amount of Each Disbursement this Period: **200**  
 Category/Type: \_\_\_\_\_

B. **Wells Fargo Bank**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **7900 Xerxes Ave. So.**  
 City: **Bloomington MN 55431**  
 State: **MN** Zip Code: **55431**  
 Purpose of Disbursement: **returned check fee**  
 Candidate Name: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **10/12/2001**  
 Amount of Each Disbursement this Period: **2200**  
 Category/Type: \_\_\_\_\_

C. **Citizens for Senator Judy Myers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **District 53 809 Oak St.**  
 City: **Danville IL 61832**  
 State: **IL** Zip Code: **61832**  
 Purpose of Disbursement: **contribution**  
 Candidate Name: **Judith A. Myers**  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: **IL** District: \_\_\_\_\_

Date of Disbursement: **10/16/2001**  
 Amount of Each Disbursement this Period: **50000**  
 Category/Type: \_\_\_\_\_

SUBTOTAL of Disbursements This Page (optional) ..... **52400**  
 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 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

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NAME OF COMMITTEE (In Full)

Outdoor Amusement Business Association Inc. PAC

A. Wells Fargo Bank

Mailing Address: 1900 Xerxes Ave. So.

City: Bloomington MN Zip Code: 55431

Purpose of Disbursement: bank account fee

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 7/1/08 2001

Amount of Each Disbursement this Period: 200

Category/Type:

B. Wells Fargo Bank

Mailing Address: 1900 Xerxes Ave. So.

City: Bloomington MN Zip Code: 55431

Purpose of Disbursement: bank account fee

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 7/2/08 2001

Amount of Each Disbursement this Period: 200

Category/Type:

C. Commissioner Charles H. Bronson Jr. Campaign

Mailing Address: Agriculture & Consumer Svcs. Dept. the Capitol

City: Tallahassee FL Zip Code: 32399-0810

Purpose of Disbursement: reelection contribution

Candidate Name: Charles H. Bronson Jr.

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: Florida District: 11

Date of Disbursement: 12/21/2001

Amount of Each Disbursement this Period: 5000.00

Category/Type:

SUBTOTAL of Disbursements This Page (optional) \_\_\_\_\_

TOTAL This Period (last page this line number only) \_\_\_\_\_

50400

103400

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

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

FOR LINE NUMBER: PAGE OF  
(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

Full Name (Last, First, Middle Initial)

A. Wells Fargo Investments

Mailing Address

7900 Xerxes Ave. S.

City Bloomington

State MN Zip Code 55431

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

12/11/2001

Amount of Each Receipt this Period

243.50

dividend reinvested  
in Wells Fargo  
Wealthbuilder

Full Name (Last, First, Middle Initial)

B. Wells Fargo Investments

Mailing Address

7900 Xerxes Ave. S.

City Bloomington

State MN Zip Code 55431

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

12/14/2001

Amount of Each Receipt this Period

199.97

dividend reinvested  
in Wells Fargo  
Wealthbuilder

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank

Mailing Address

7900 Xerxes Ave. S.

City Bloomington

State MN Zip Code 55431

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

12/31/2001

Amount of Each Receipt this Period

230

interest on  
Savings account

SUBTOTAL of Receipts This Page (optional)

2245.51

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 OF  
 (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**

Full Name (Last, First, Middle Initial)  
**A. Wells Fargo Bank**  
 Mailing Address  
**7900 Xerxes Ave. S.**  
 City **Bloomington** State **MN** Zip Code **55431**  
 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  
**11** / **30** / **2001**  
 Amount of Each Receipt this Period  
**3.40**  
 interest on savings account

Full Name (Last, First, Middle Initial)  
**B. Wells Fargo Bank**  
 Mailing Address  
**7900 Xerxes Ave. S.**  
 City **Bloomington** State **MN** Zip Code **55431**  
 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  
**11** / **30** / **2001**  
 Amount of Each Receipt this Period  
**0.4**  
 interest on money market account

Full Name (Last, First, Middle Initial)  
**C. Wells Fargo Investments**  
 Mailing Address  
**7900 Xerxes Ave. S.**  
 City **Bloomington** State **MN** Zip Code **55431**  
 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  
**12** / **11** / **2001**  
 Amount of Each Receipt this Period  
**6.4379**  
 dividend reinvested in Wells Fargo Wealthbuilder Growth

SUBTOTAL of Receipts This Page (optional) **6.4723**  
 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)  
 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)  
**Wells Fargo Bank**  
 Mailing Address  
**7900 Xerxes Ave. S.**  
 City **Bloomington** State **MN** Zip Code **55431**  
 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  
**09** **30** **2001**  
 Amount of Each Receipt This Period  
**478**  
*interest on savings acct.*

B. Full Name (Last, First, Middle Initial)  
**Wells Fargo Bank**  
 Mailing Address  
**7900 Xerxes Ave. S.**  
 City **Bloomington** State **MN** Zip Code **55431**  
 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  
**10** **31** **2001**  
 Amount of Each Receipt This Period  
**541**  
*interest on savings acct.*

C. Full Name (Last, First, Middle Initial)  
**Wells Fargo Bank**  
 Mailing Address  
**7900 Xerxes Ave. S.**  
 City **Bloomington** State **MN** Zip Code **55431**  
 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  
**10** **31** **2001**  
 Amount of Each Receipt This Period  
**33**  
*interest on money market account*

SUBTOTAL of Receipts This Page (optional) ..... **1052**  
 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 OF  
(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. Wells Fargo Investments**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**7900 Xerxes Ave. So.**  
 City **Bloomington** State **MN** Zip Code **55431**  
 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  
**09/21/2007**  
 Amount of Each Receipt this Period  
**3,630.00**  
 interest on CD

**B. Wells Fargo Bank**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**7900 Xerxes Ave. So.**  
 City **Bloomington** State **MN** Zip Code **55431**  
 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  
**09/28/2007**  
 Amount of Each Receipt this Period  
**24.33**  
 interest on money market account

**C. Wells Fargo Bank**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**7900 Xerxes Ave. So.**  
 City **Bloomington** State **MN** Zip Code **55431**  
 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  
**09/28/2007**  
 Amount of Each Receipt this Period  
**3.21**  
 interest on money market account

SUBTOTAL of Receipts This Page (optional) **9,657.54**  
 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		OF	
<input 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	<input type="checkbox"/> 18	<input type="checkbox"/> 19	<input type="checkbox"/> 20

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

A. Full Name (Last, First, Middle Initial)  
**Wells Fargo Bank**

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

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

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  
**07 31 2001**

Amount of Each Receipt this Period  
**476**  
interest-savings account

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

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

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

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  
**08 31 2001**

Amount of Each Receipt this Period  
**438**  
interest-savings account

C. Full Name (Last, First, Middle Initial)  
**Wells Fargo Bank**

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

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

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  
**08 31 2001**

Amount of Each Receipt this Period  
**4213**  
interest-money market account

SUBTOTAL of Receipts This Page (optional) ..... **5127**

TOTAL This Period (last page this line number only) ..... **5127**

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

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

FOR LINE NUMBER:		PAGE		OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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)  
**Wells Fargo Investments**

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

City  
**Bloomington MN 55431**

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  
**09 28 2001**

Amount of Each Receipt this Period  
**8429.89**

**WF Wealthbuilder  
unrealized loss**

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

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

City  
**Bloomington MN 55431**

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  
**10 31 2001**

Amount of Each Receipt this Period  
**5186.02**

**WF Wealthbuilder  
unrealized gain**

C. Full Name (Last, First, Middle Initial)  
**Wells Fargo Investments**

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

City  
**Bloomington MN 55431**

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  
**11 01 2001**

Amount of Each Receipt this Period  
**687.457**

**WF Wealthbuilder  
unrealized gain**

SUBTOTAL of Receipts This Page (optional) ..... **3630.63**

TOTAL This Period (last page this line number only) ..... **3630.63**

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

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

FOR LINE NUMBER:		PAGE		OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 13c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<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)

Full Name (Last, First, Middle Initial)

A. Wells Fargo Investments

Mailing Address

7900 Xerxes Ave. S.

Bloomington <sup>State</sup> MN <sup>Zip Code</sup> 55431

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

12 / 31 / 2001

Amount of Each Receipt this Period

1,420.7

Unrealized gain  
on WF Wealth-  
builder

Full Name (Last, First, Middle Initial)

B. 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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. 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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ▶

1,420.7

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

1,038.477

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 1/25/02
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>S.M.K.</i>	 2/12/02
PREPARER	DATE PREPARED