PAGE 1 / 16

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other Than A	n Authorized Commit	tee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typover the lines.	ping, type 12FE4	M5
OUTDOOR AMUSE	MENT BUSINESS	S ASSOCIATION IN	C PAC	
ADDRESS (number and street ▼	1035 S SEMORAN SUITE 1045A	BLVD		
Check if different than previously reported. (ACC)	WINTER PARK		FL	32792
2. FEC IDENTIFICATION	NUMBER ▼	CITY ▲	STATE ▲	ZIP CODE ▲
C C00163212		3. IS THIS REPORT		AMENDED (A)
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)	Jun 20 (M6) S	ug 20 (M8)
April 15 Quarterly Repoil July 15 Quarterly Repoil Cottober 15 Quarterly Repoil January 31	rt (Q2) (c) 12-Day PRE-Elec Report fo	r the: Convention		III tilo
Year-End Report July 31 Mid-Year Report (Non-ele Year Only) (MY Termination Rep (TER)	ar (d) 30-Day POST-Ele Report fo	` ·	OG) Runof	f (30R) Special (30S) in the State of
5. Covering Period	07 01 Y	2016 through	M M / D D 0 30	2016
I certify that I have examine Type or Print Name of Treas	JOHNSON, ROBER		belief it is true, correct	and complete.
Signature of Treasurer	OHNSON, ROBERT, W, ,	[Electronica	<i>Ily Filed]</i> Date 10	0 06 7 2016
NOTE: Submission of false, e	rroneous, or incomplete inf	ormation may subject the pe	erson signing this Report to	o the penalties of 52 U.S.C. § 30109
Office Use Only				FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC

R	Report Covering the Period: From: 07	7 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	09 30 2016
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		120519.45
	(b) Cash on Hand at Beginning of Reporting Period	101394.45	
	(c) Total Receipts (from Line 19)	17150.00	28975.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	118544.45	149494.45
' .	Total Disbursements (from Line 31)	16000.00	46950.00
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	102544.45	102544.45
).	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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. 05/2016)

Write or Type Committee Name

OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC

R	eport Covering the Period: From:	01 2016 To:	09 30 7 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)	16550.00	27575.00			
	(ii) Unitemized(iii) TOTAL (add	600.00	1400.00			
	Lines 11(a)(i) and (ii)	17150.00	28975.00			
	(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)▶	17150.00	28975.00			
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00			
13.	All Loans Received	0.00	0.00			
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00			
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00			
	to Federal Candidates and Other Political Committees	0.00	0.00			
	Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00			
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00			
	(b) Levin Funds (from Schedule H5)	0.00	0.00			
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00			
19.	Total Receipts (add Lines 11(d),					
	12, 13, 14, 15, 16, 17, and 18(c))▶	17150.00	28975.00			
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	17150.00	28975.00			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B		
	perating Expenditures:	iotal IIIIS Fellod	Calendar Year-to-Date		
(a)	Allocated Federal/Non-Federal Activity (from Schedule H4)				
	(i) Federal Share	0.00	0.00		
	(ii) Non-Federal Share	0.00	0.00		
(b)	1 0	0.00	200.00		
(0)	Expenditures	0.00	200.00		
(c)	Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	0.00	200.00		
Tre	ansfers to Affiliated/Other Party	0.00	200.00		
	ommittees	0.00	0.00		
	ontributions to	4 4	4 4		
an	deral Candidates/Committees d Other Political Committees	16000.00	46500.00		
Inc	dependent Expenditures	4 4 4			
(us	se Schedule E) ordinated Party Expenditures	0.00	0.00		
(52	2 U.S.C. § 30116(d))	200			
(us	se Schedule F)	0.00	0.00		
١.	on Donoumento Made	0.00			
LO	an Repayments Made	0.00	0.00		
Lo	ans Made	0.00	0.00		
Re	funds of Contributions To:	0.00	5.00		
(a)	Individuals/Persons Other Than Political Committees	0.00	0.00		
		0.00			
(b)	Political Party Committees	0.00	0.00		
(c)	Other Political Committees	4 4			
	(such as PACs)	0.00	0.00		
(d)	Total Contribution Refunds		4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00		
		4 4	4 4		
	her Disbursements (Including				
NC	n-Federal Donations)	0.00	250.00		
Fe	deral Election Activity (52 U.S.C. § 30101(2	0))			
	Allocated Federal Election Activity	"			
	(from Schedule H6)				
	(i) Federal Share	0.00	0.00		
			4 4 4		
	(ii) "Levin" Share	0.00	0.00		
(b)	,		11111111		
/->	Entirely With Federal Funds	0.00	0.00		
(c)	, ,				
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Το	tal Disbursements (add Lines 21(c), 22,				
	, 24, 25, 26, 27, 28(d), 29 and 30(c))		10050 00		
20	, 21, 20, 20, 21, 20(a), 20 and 00(b))	16000.00	46950.00		
То	tal Federal Disbursements				
(sı	ubtract Line 21(a)(ii) and Line 30(a)(ii)				
	m Line 31)	16000.00	46950.00		
	·	4 4 1 4	+0350.00		

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 05/2016)

of Disbursements

1 20 1 0111	11 ON (1101: 00/2010)		i ago 🐱
	Contributions/ g Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	ions (other than loans)	17150.00	28975.00
34. Total Contribution (from Line 28(ion Refunds d))	0.00	0.00
	ons (other than loans) 34 from Line 33)	17150.00	28975.00
	Operating Expenditures a)(i) and Line 21(b))	0.00	200.00
37. Offsets to Ope (from Line 15,	rating Expenditures page 3)	0.00	0.00
38. Net Operating (subtract Line s	Expenditures 37 from Line 36)	0.00	200.00

ı	FOR LINE NUMBER:					PAGE	=	6	OF	16	
ı	(check only one)										
ı		×	11a		11b		11c		12	2	
ı			13		14		15		16	6	17

	Statements may not be sold or used by any per the name and address of any political committee						
NAME OF COMMITTEE (In Full) OUTDOOR AMUSEMENT BU	ISINESS ASSOCIATION INC PAC						
Full Name of Individual (Last, First, Middle I BISHOP, NANCY, , , Mailing Address 850 FM 2537	nitial) or Full Organization Name	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City SAN ANTONIO	State Zip Code TX 78221	Transaction ID : SA11AI.4380 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	1000.00					
Name of Employer (for Individual) BISHOP AMUSEMENT RIDES Receipt For: Primary General	Occupation (for Individual) INDEPENDENT RIDE OWNER Aggregate Year-to-Date ▼	Memo Item					
Other (specify) ▼	1000.00						
Full Name of Individual (Last, First, Middle I BRADBURY, JACQUELINE, , , Mailing Address 20987 N JOHN WAYNE PK		Date of Receipt 08 18 2016					
City MARICOPA	State Zip Code AZ 85139	Transaction ID : SA11AI.4376 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	500.00					
Name of Employer (for Individual) SWEET CHEEKS	Occupation (for Individual) CONCESSION OWNER	Memo Item					
Receipt For: Primary General Other (specify) ▼							
Full Name of Individual (Last, First, Middle I BURBACK, RONALD, , ,	nitial) or Full Organization Name	Date of Receipt					
Mailing Address 1202 SE CHELSEA AVE		08 23 2016					
City VANCOUVER	State Zip Code 98664	Transaction ID : SA11AI.4386 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	1000.00					
Name of Employer (for Individual) FUNTASTIC SHOWS Receipt For:	Occupation (for Individual) CARNIVAL OWNER	Memo Item					
Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00						
SUBTOTAL of Receipts This Page (optional)	>	2500.00					
TOTAL This Period (last page this line number	er only)						

FOR LINE NUMBER:					PAGE	7	OF	16	
(check only one)									
	×	11a		11b		11c	12	2	
		13		14		15	16	6	17

	I Statements may not be sold or used by any pers the name and address of any political committee to					
NAME OF COMMITTEE (In Full)						
angle OUTDOOR AMUSEMENT BL	JSINESS ASSOCIATION INC PAC					
Full Name of Individual (Last, First, Middle	Initial) or Full Organization Name					
A. CHARLESTON, STEVE, , ,		Date of Receipt				
Mailing Address 25811 N 101ST AVE		08 23 2016				
City	State Zip Code	Transaction ID : SA11AI.4387				
PHOENIX	AZ 85383	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	750.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
CHARLESTON CONCESSIONS	CONCESSION OWNER	_				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General	, agrogato Total to Dato .					
Other (specify) ▼	750.00					
Full Name of Individual (Last, First, Middle 3. CLAIR, JOSEPH, , ,	Initial) or Full Organization Name	Date of Receipt				
Mailing Address 190 OCEAN KEY WAY		08 04 2016				
City	State Zip Code	Transaction ID : SA11AI.4366				
JUPITER	FL 33477	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	500.00				
Name of Employer (for Individual) LUEHRS IDEAL RIDES	Occupation (for Individual) CARNIVAL	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00					
Full Name of Individual (Last, First, Middle CREASON, BRYAN, A, ,	Initial) or Full Organization Name	Date of Receipt				
Mailing Address 641 S KENWOOD LN		08 19 2016				
City	State Zip Code	Transaction ID : SA11AI.4381				
CHANDLER	AZ 85226	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	300.00				
Name of Employer (for Individual) RAY CAMMACK SHOWS	Occupation (for Individual) AMUSEMENTS WORKER	Memo Item				
Receipt For:						
Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00					
SUBTOTAL of Receipts This Page (optional).		1550.00				
TOTAL This Period (last page this line number	er only)					

FOR LINE NUMBER:					PAGE	8	OF	16	
(check only one)									
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		13		14		15	16	6	17

Any information copied from such Reports and or for commercial purposes, other than using			rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) OUTDOOR AMUSEMENT BL	JSINESS AS	SOCIATION INC PA	
Full Name of Individual (Last, First, Middle GUADAGNO, SHARON, , , Mailing Address 12842 VALLEY VIEW ST S		anization Name	Date of Receipt
			09 15 2016
CARDEN CROVE	State CA	Zip Code	Transaction ID : SA11AI.4399
GARDEN GROVE	CA	92845	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer (for Individual) GUADAGNO & SONS AMUSEMENTS	Occupa CARNI	ation (for Individual) VAL	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 500.00	
Other (specify) ▼		000.00	
Full Name of Individual (Last, First, Middle HANSCHEN, JOHN, , ,	Initial) or Full Orga	anization Name	Date of Receipt
Mailing Address 4508 CLIFFSTONE COVE	09 09 2016		
City AUSTIN	State TX	Zip Code 78735	Transaction ID : SA11Al.4396 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) THOMAS CARNIVAL		ation (for Individual) IVAL OWNER	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 1000.00	
Full Name of Individual (Last, First, Middle C. HANSCHEN, JOHN, , ,	Initial) or Full Orga	anization Name	Date of Receipt
Mailing Address 4508 CLIFFSTONE COVE			09 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City AUSTIN	State TX	Zip Code 78735	Transaction ID : SA11AI.4406
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) THOMAS CARNIVAL	'	ation (for Individual)	Memo Item
Receipt For:	Aggregate Ye		-
Primary General Other (specify)	Aggregate 1e	1100.00	
SUBTOTAL of Receipts This Page (optional)		>	1600.00
TOTAL This Period (last page this line numb	er only)		

KALIFF INSURANCE

General

Primary

Other (specify)

Receipt For:

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:					PAGE	9	OF	16	
(check only one)									
	X	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 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HUSTON, BLAKE, , , Date of Receipt Mailing Address 11811 E COUNTY RD 350 N 2016 City Zip Code State Transaction ID: SA11AI.4408 IN **ALBANY** 47320 Amount of Each Receipt this Period FEC ID number of contributing C 1400.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) MID AMERICA SHOWS **CARNIVAL** Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JAMIESON, STACEY, , , Date of Receipt Mailing Address 191 COCKSHUTT RD 09 15 2016 City State Zip Code Transaction ID: SA11AI.4404 PORT DOVER ZZ N0A 1N1 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) WORLD'S FINEST SHOWS **CARNIVAL** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. KALIFF, MITCHELL, , , Date of Receipt Mailing Address 247 FOX HALL LN 26 2016 City Zip Code State Transaction ID: SA11AI.4389 TX SAN ANTONIO 78213 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual)

SUBTOTAL of Receipts This Page (optional)	·····				,			7		240	0.00	
TOTAL This Period (last page this line number	only)		_	_	<u></u>	_	_	<u></u>	_	_	<u>.</u>	
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500.00

INSURANCE

Aggregate Year-to-Date ▼

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may n he name and addre	ot be sold or used by any peess of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) OUTDOOR AMUSEMENT BU	ISINESS ASS	SOCIATION INC PA	
Full Name of Individual (Last, First, Middle I OUSEY, MICHAEL, , , Mailing Address 211 CLAREMONT	nitial) or Full Orgar	nization Name	Date of Receipt
			08 31 2016
City	State TX	Zip Code	Transaction ID : SA11AI.4395
SAN MARCOS	17	78666	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) MAD HATTER	I .	tion (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ur-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle I PELINO, NICHOLAS, , , Mailing Address 12440 HIGH MEADOW DR	nitial) or Full Orgar	nization Name	Date of Receipt
			09 15 2016
City	State	Zip Code	Transaction ID : SA11AI.4402
DALLAS	TX	75244	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) SHOWTIME RIDES	Occupat CARNIN	tion (for Individual) VAL	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ur-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle I	nitial) or Full Orgar	nization Name	Date of Receipt
Mailing Address 2604 31ST ST			08
City SANTA MONICA	State CA	Zip Code 90405	Transaction ID : SA11AI.4382
	J	30403	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual) CAPRICE	Occupat CARNIV	ion (for Individual) 'AL	Memo Item
Receipt For:	Aggregate Yea	ur-to-Date ▼	
Primary General Other (specify)	7	250.00	
SUBTOTAL of Receipts This Page (optional)		·····	1000.00
TOTAL This Period (last page this line number	er only)		

FOR LINE NUMBER:					PAGE	 11	OF	16	
(0	che	ck only	or	ne)					
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		13		14		15	16		17

	y information copied from such Reports and Si for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) OUTDOOR AMUSEMENT BUS	INESS A	SSOCIATION INC PA	C
Α.	Full Name of Individual (Last, First, Middle Init PICKETT, BENJAMIN, , , Mailing Address 12671 S HONAHLEE CRT	ial) or Full O	rganization Name	Date of Receipt
	011	10	7: 0 !	08 16 2016
	City PHOENIX	State AZ	Zip Code 85044	Transaction ID : SA11AI.4370
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 500.00
	Name of Employer (for Individual) RAY CAMMACK SHOWS		upation (for Individual) RNIVAL	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
В.	Full Name of Individual (Last, First, Middle Init SALERNO JR, ANTHONY, , , Mailing Address 215 WEST ST	ial) or Full O	rganization Name	Date of Receipt
	City	State	Zip Code	08 26 2016
	GENEVA	IL	60134	Transaction ID : SA11AI.4391 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer (for Individual) WINDY CITY AMUSEMENTS		upation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
	Full Name of Individual (Last, First, Middle Init SCHRODER, BRAD, , ,	ial) or Full O	rganization Name	Date of Receipt
	Mailing Address 16281 AMES WAY			08 18 2016
	City FARIBAULT	State MN	Zip Code 55021	Transaction ID : SA11AI.4378 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1500.00
	Name of Employer (for Individual) SCHRODER CONCESSIONS		upation (for Individual) ICESSION OWNER	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1500.00	
s	UBTOTAL of Receipts This Page (optional)		>	3000.00
Т	OTAL This Period (last page this line number of	only)	>	

FOR LINE NUMBER:					PAGE	 12	OF	16	
(0	che	ck only	or	ne)					
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		13		14		15	16		17

Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) OUTDOOR AMUSEMENT BU	SINESS ASSOCIA	TION INC PAC	
Full Name of Individual (Last, First, Middle In SINCLAIR, JAMES, , , Mailing Address 3150 CHRISTOPHER LN	nitial) or Full Organization N	lame	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Cod	e	Transaction ID : SA11AI.4384
SHOREVIEW	MN 55126	<u> </u>	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer (for Individual) MINNESOTA STATE FAIR	Occupation (for I FAIR MANAGER	,	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	1000.00	
Full Name of Individual (Last, First, Middle Ir SMILEY-KALIFF, BRUCE, , , Mailing Address 247 FOX HALL LN	nitial) or Full Organization N	Name	Date of Receipt
			09 09 2016
City SAN ANTONIO	State Zip Cod TX 78213	e	Transaction ID : SA11AI.4397
FEC ID number of contributing federal political committee.	C 78213		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) KALIFF INSURANCE	Occupation (for I	ndividual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	1000.00	
Full Name of Individual (Last, First, Middle Ir VANDERVORSTE, STEVE, , ,	nitial) or Full Organization N	Name	Date of Receipt
Mailing Address PO BOX 310641			09 20 2016
City NEW BRAUNFELS	State Zip Cod TX 78131	e 	Transaction ID : SA11AI.4407
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer (for Individual) SJ ENTERTAINMENT	Occupation (for I	ndividual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	1000.00	
SUBTOTAL of Receipts This Page (optional)			3000.00
TOTAL This Period (last page this line number	only)		

FOR LINE NUMBER:					PAGE	 13	OF	16	
(check only one)									
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		13		14		15	16	;	17

	Statements may not be sold or used by any persole name and address of any political committee to	
NAME OF COMMITTEE (In Full) OUTDOOR AMUSEMENT BUS	SINESS ASSOCIATION INC PAC	
Full Name of Individual (Last, First, Middle Ir WISDOM, KYLE, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address PO BOX 903		08 29 2016
City STERLING	State Zip Code CO 80751	Transaction ID : SA11AI.4393
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer (for Individual) WISDOM INDUSTRIES Receipt For: Primary General	Occupation (for Individual) MANUFACTURING Aggregate Year-to-Date ▼	Memo Item
Other (specify) ▼	1000.00	
Full Name of Individual (Last, First, Middle Ir WOOD, MICHAEL, , , Mailing Address 111 OSIANA DR	nitial) or Full Organization Name	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SAN ANTONIO	State Zip Code TX 78248	Transaction ID : SA11AI.4401 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer (for Individual) WOOD ENTERTAINMENT CO	Occupation (for Individual) RIDE OWNER	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name of Individual (Last, First, Middle Ir	nitial) or Full Organization Name	Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	, ,
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number	only)	16550.00

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SCHEDULE B (FEC Form 3X)	11	alula ()	FOR LINE NUMBER: PAGE 14 OF				
ITEMIZED DISBURSEMENTS	Use separate sche for each category	of the	(check only	nly one)			
	Detailed Summary	Page	28a	28b 28c 29 30b			
Any information copied from such Reports and Statem							
or for commercial purposes, other than using the nam	e and address of an	ny political	committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)		יי יא אוד.					
OUTDOOR AMUSEMENT BUSINE	:33 A33UCIA	NI ION II	NO PAC				
Full Name (Last, First, Middle Initial)				B			
A. BOUSTANY, CHARLES W. DR. JF	₹.			Date of Disbursement			
Mailing Address PO BOX 80218				08 23 2016			
,	State Zip Cod	de		FEC Identification Number			
LAFAYETTE Purpose of Disbursement	LA 70598						
CAMPAIGN CONTRIBUTION				C Transaction ID 4 SD22 4429			
Candidate Name			Category/	Transaction ID: SB23.4420 Amount of Each Disbursement this Period			
Office Cought	ant Far		Туре	1000.00			
Office Sought: House Disburser		eneral		1000.00			
President	Other (specify) ▼			Memo Item			
State: LA District: 03				ш			
Full Name (Last, First, Middle Initial) B. HARRIS, ANDREW P, , ,				Date of Disbursement			
HARRIO, ANDILLIV F, , ,				M M / D D / Y Y Y Y			
Mailing Address PO BOX 604				09 13 2016			
,	State Zip Cod			FEC Identification Number			
BEL AIR Purpose of Disbursement	MD 21404			С			
CAMPAIGN CONTRIBUTION				Transaction ID : SB23.4423			
Candidate Name			Category/	Amount of Each Disbursement this Period			
Office Sought: 🙀 House Disbursem	nent For:		Туре	1000.00			
	Primary General			4			
<u> </u>	Other (specify)			Memo Item			
State: MD District: 01				<u> </u>			
Full Name (Last, First, Middle Initial) C. ISSA, DARRELL, , ,				Date of Disbursement			
				M M / D D / Y Y Y Y			
Mailing Address PO BOX 760				07 07 2016			
	State Zip Cod			FEC Identification Number			
VISTA Purpose of Disbursement	CA 92085	<u> </u>					
CAMPAIGN CONTRIBUTION				Transaction ID : SD22 4445			
Candidate Name			Category/ Type	Transaction ID: SB23.4415 Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For:		Турс	2500.00			
Senate	,	eneral					
	Other (specify) ▼			Memo Item			
State: CA District: 49							
SUBTOTAL of Disbursements This Page (optional)			······	4500.00			
TOTAL This Period (last page this line number only).			_				

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s					
TEMPLE DIODONOLINEIRIO	for each category of the Detailed Summary Page	21b 28a	22 x 23 26 27 28c 29 30b			
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NAME OF COMMITTEE (In Full) OUTDOOR AMUSEMENT BUSINE	,					
Full Name (Last, First, Middle Initial) A. LONG, BILLY MR., , ,			Date of Disbursement			
Mailing Address 3923 E GLEN ABBEY DRIVE			07 07 2016			
,	State Zip Code MO 65809		FEC Identification Number			
CAMPAIGN CONTRIBUTION Candidate Name		Category/	Transaction ID : SB23.4413 Amount of Each Disbursement this Period			
	nent For: Primary General Other (specify) ▼	Туре	1000.00 Memo Item			
Full Name (Last, First, Middle Initial) B. LONG, BILLY MR., , , Mailing Address 3923 E GLEN ABBEY DRIVE			Date of Disbursement Date of Disbursement Date of Disbursement 2016			
,	State Zip Code MO 65809		FEC Identification Number			
Candidate Name		Category/ Type	Transaction ID : SB23.4424 Amount of Each Disbursement this Period			
	nent For: Primary General Other (specify)		1000.00 Memo Item			
Full Name (Last, First, Middle Initial) C. MAJORITY AMERICA POLITICAL	ORG		Date of Disbursement			
Mailing Address PO BOX 22928			08 23 2016			
City ALEXANDRIA Purpose of Disbursement	State Zip Code VA 22928		FEC Identification Number C Transaction ID : SB23.4417			
Candidate Name		Category/ Type	Amount of Each Disbursement this Period			
	nent For: Primary General Other (specify) ▼		5000.00 Memo Item			
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TOTAL This Period (last page this line number only).						

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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 SCALISE, STEVE, , , Mailing Address 317 15TH ST NE City Chy Chy State Disbursement For: Cardedate Name Category/ Type Distors Full Name (Last, First, Middle Initial) Office Sought: Full Name (Last, First, Middle Initial) VELA, FILEMON MIR., , Mailing Address 275 CALIE JACARANDA ST City State Disbursement For: Chy State Disbursement For: Category/ Type Transaction to: S823.4421 Amount of Each Disbursement this Period Transaction to: S823.4421 Amount of Each Disbursement this Period Transaction to: S823.4421 Amount of Each Disbursement this Period Transaction to: S823.4421 Amount of Each Disbursement this Period Transaction to: S823.4421 Amount of Each Disbursement this Period Category/ Type Transaction to: S823.4421 Amount of Each Disbursement this Period Memo Item State: The Distinct: State: The Distinct: State: Distinct: Memo Item Memo Item Memo Item Memo Item State: State: State: State: Distinct: State: Distinct: State: Distinct: State: Distinct: State: Distinct: State: State: Distinct: State: State: State: State: State: State: State: State: State: State				1 ` ′					
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