PAGE 1 / 15

#### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORW 3X	For Othe	r Than An Auth	norized Comm	ittee		Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR	PRINT ▼	Example: If to		12FE4M	5	
OUTDOOR AMUS	SEMENT BU	SINESS ASS	OCIATION I	NC PAC	1 1 1 1 1		
ADDRESS (number and stre		emorial Avenue					
Check if different than previously reported. (ACC)		pringfield			MA L	01089	
2. <b>FEC IDENTIFICATIO</b>	N NUMBER <b>V</b>	CIT	Y 🛦		STATE <b>A</b>	ZIP CO	DE 🛦
C C00163212			S THIS EPORT	NEW (N) <b>OR</b>	AM (A)	ENDED	
4. TYPE OF REPOR (Choose One)  (a) Quarterly Reports:  April 15	Re Du	port Mar	20 (M2) 20 (M3) 20 (M4)	May 20 (M5)  Jun 20 (M6)  Jul 20 (M7)	Sep	20 (M8) 20 (M9) 20 (M10)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
Quarterly Rep July 15 Quarterly Rep October 15	port (Q2)	12-Day PRE-Election Report for the:	Primary (		General (		Runoff (12R)
Quarterly Rep January 31 Year-End Rep		Electio	n on	/ D = D /	Y Y Y	in the State o	f
July 31 Mid-\ Report (Non- Year Only) (N	election (u)	30-Day  POST-Election  Report for the:	General (	30G)	Runoff (3	0R)	Special (30S)
Termination F (TER)	Report	Electio	n on	/ D D /	Y = Y = Y	in the State o	f
5. Covering Period	M M / D 0		throug	h 06	30	2021	
I certify that I have examin Type or Print Name of Tre	Chiecko	and to the best of , Gregory, , ,	my knowledge ar	nd belief it is tru	ue, correct and	complete.	
Signature of Treasurer	Chiecko, Gregory	,,	[Electronic	cally Filed] [	Date 07	/ D D / 28	2021
NOTE: Submission of false,	erroneous, or inc	complete information	n may subject the	person signing t	his Report to th	e penalties of 52	U.S.C. § 30109
Office Use						FEC FOR Rev. 05/20	

### 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

01 01 2021 06 30 2021 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 26160.27 January 1, 2021 (b) Cash on Hand at 26160.27 Beginning of Reporting Period..... 20677.74 20677.74 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 46838.01 46838.01 6(a) and 6(c) for Column B)..... 19831.33 19831.33 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 27006.68 27006.68 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

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

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC PAC

R	eport Covering the Period: From:		06 30 7 2021				
	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)	20000.00	20000.00				
	(ii) Unitemized(iii) TOTAL (add	0.00	0.00				
	Lines 11(a)(i) and (ii)	20000.00	20000.00				
	(b) Political Party Committees	0.00	0.00				
	(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)▶	20000.00	20000.00				
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				
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00				
10.	to Federal Candidates and Other Political Committees	0.00	0.00				
17.	Other Federal Receipts (Dividends, Interest, etc.)	677.74	677.74				
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 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))▶	20677.74	20677.74				
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	20677.74	20677.74				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	Total This Period						
. Operating Expenditures: —  (a) Allocated Federal/Non-Federal  Activity (from Schedule H4)		Calendar Year-to-Date					
(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					
Transfers to Affiliated/Other Party Committees	0.00	0.00					
Contributions to Federal Candidates/Committees and Other Political Committees	19500.00	19500.00					
Independent Expenditures (use Schedule E)	0.00	0.00					
Coordinated Parfy Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00					
Loan Repayments Made	0.00	0.00					
Loans Made	0.00	0.00					
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					
Other Disbursements (Including Non-Federal Donations)	331.33	331.33					
Federal Election Activity (52 U.S.C. § 30101(20)  (a) Allocated Federal Election Activity  (from Schedule H6)	))						
(i) Federal Share	0.00	0.00					
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00					
Entirely With Federal Funds	0.00	0.00					
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00					
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	19831.33	19831.33					
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)							
from Line 31)	19831.33	19831.33					

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

12010111 011 (1101. 00/2010)		i ago 🗸
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)	20000.00	20000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20000.00	20000.00
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:				PAGE	6	OF	15	
	(che	ck only	one)					
	×	11a	11b		11c	12		
		13	14		15	16		17

Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by an the name and address of any political common	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) OUTDOOR AMUSEMENT BU	JSINESS ASSOCIATION INC	PAC
Full Name of Individual (Last, First, Middle Corl, Stephanie, , ,  Mailing Address 904 Potomac Dr	Initial) or Full Organization Name	Date of Receipt
City	Chata 7:- Cada	06 02 2021
City Wilmington	State Zip Code NC 28411	Transaction ID : SA11AI.5052
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer (for Individual)  Powers Great American Midways  Receipt For:  Primary General  Other (specify) ▼	Occupation (for Individual) Carnival Executive  Aggregate Year-to-Date ▼  1000.00	Memo Item
Full Name of Individual (Last, First, Middle Corl, Susan, E, ,  Mailing Address 1204 Shenandoah St	Initial) or Full Organization Name	Date of Receipt  06 02 2021
City Wilmington	State Zip Code NC 28411	Transaction ID : SA11AI.5050  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer (for Individual) Heavenly Treats	Occupation (for Individual) Carnival Executive	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1000.00	
Full Name of Individual (Last, First, Middle Dean, Sheila, B, ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address PO Box 181		06 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Elkton	State Zip Code 22827	Transaction ID : SA11AI.5049
FEC ID number of contributing federal political committee.	C 22021	Amount of Each Receipt this Period  2000.00
Name of Employer (for Individual)  Dean Travel LLC	Occupation (for Individual) Carnival Executive	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  2000.00	
SUBTOTAL of Receipts This Page (optional).		4000.00
TOTAL This Period (last page this line number	er only)	

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

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

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

	he name and address of any po	used by any person for the purpose of soliciting contributions olitical committee to solicit contributions from such committee.
Full Name of Individual (Last, First, Middle Ianni, Steven, , ,  Mailing Address 11705 Boyette Rd  Suite 474  City  Riverview  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Red Carpet Amusements, Inc.  Receipt For:  Primary  General  Other (specify)	State Zip Code FL 33589  C  Occupation (for Indivication Carnival Executive Aggregate Year-to-Date   Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name of Individual (Last, First, Middle  Metcalf, Patricia, M, ,  Mailing Address 1543 Bartow Road Suite 218  City Lakeland  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Powers Great American Midway  Receipt For:  Primary General Other (specify) ▼	State Zip Code FL 33801  C  Occupation (for Indiv Carnival Executive  Aggregate Year-to-Date   Aggregate Year-to-Date	Date of Receipt  06 01 2021  Transaction ID: SA11AI.5046  Amount of Each Receipt this Period  2000.00
Full Name of Individual (Last, First, Middle POWERS, DEBORAH, , , Mailing Address 4216 EDWARD HYDE PL  City WILMINGTON  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) POWERS GREAT AMERICAN MIDWAYS Receipt For:  Primary Other (specify)	State Zip Code NC 28405  C  Occupation (for Indivication Carnival Owner Aggregate Year-to-Date V	Date of Receipt  M 06
SUBTOTAL of Receipts This Page (optional).  TOTAL This Period (last page this line number		10000.00

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

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

FOR LINE NUMBER:					PAGE	8	OF	15		
	(check only one)									
		X	11a		11b		11c	12	2	
			13		14		15	16	6	17

Any information copied from such Reports an or for commercial purposes, other than using	d Statements may n the 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 BI	USINESS ASS	SOCIATION INC PA	C
Full Name of Individual (Last, First, Middle Reisinger, Whitney, N, ,  Mailing Address 97221 Laffites Way	Initial) or Full Organ	nization Name	Date of Receipt
			06 02 2021
City Yulee	State FL	Zip Code 32097	Transaction ID : SA11AI.5048
	I L	32097	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2000.00
Name of Employer (for Individual) Dixie Enterprises, Inc.		tion (for Individual) I Executive	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ur-to-Date ▼ 2000.00	
Full Name of Individual (Last, First, Middle Strates, E. Jay, , ,  Mailing Address 1700 W. Fawsett Rd	Initial) or Full Organ	nization Name	Date of Receipt
	10: :	Zin Onda	02 18 2021
City Winter Park	State FL	Zip Code 32789	Transaction ID : SA11AL5045
FEC ID number of contributing federal political committee.	C	32703	Amount of Each Receipt this Period  1600.00
Name of Employer (for Individual) Strates Shows	Occupat Executi	tion (for Individual) ve	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	tr-to-Date ▼ 1600.00	
Full Name of Individual (Last, First, Middle	Initial) or Full Organ	nization Name	Date of Receipt
Mailing Address 10065 RAPP RD			01 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City NEW MIDDLETOWN	State OH	Zip Code 44442	Transaction ID : SA11AI.5043  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		400.00
Name of Employer (for Individual) HITCH-HIKER MFG	Occupat OWNER	tion (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Yea	ur-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)	)		4000.00
TOTAL This Period (last page this line numb	per only)		

#### 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	15		
	(check only one)										
		X	11a		11b		11c		12		
			13		14		15		16	6	17

or for commercial purposes, other than using	the name and address of any political committee	
NAME OF COMMITTEE (In Full) OUTDOOR AMUSEMENT BI	USINESS ASSOCIATION INC PAC	<b>&gt;</b>
Full Name of Individual (Last, First, Middle Wheelock, Stephanie, S, ,  Mailing Address 117 Pacer Way	Initial) or Full Organization Name	Date of Receipt
City	State Zip Code NY 13164	06 02 2021  Transaction ID : SA11AI.5051
Warners  FEC ID number of contributing federal political committee.	NY 13164	Amount of Each Receipt this Period  2000.00
Name of Employer (for Individual) Big Daddy's Concessions	Occupation (for Individual) Carnival Executive	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2000.00	
Full Name of Individual (Last, First, Middle  Mailing Address	Initial) or Full Organization Name	Date of Receipt
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 ▼	
Full Name of Individual (Last, First, Middle	Initial) 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)	· · · · · · · · · · · · · · · · · · ·	2000.00
TOTAL This Period (last page this line numb	per only)	20000.00

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

	F	FOR LINE NUMBER: PAGE 10 OF									15	
Use separate schedule(s)		(check only one)										
for each category of the Detailed Summary Page			11a		11b		11c		12			
			13		14		15		16		X	15 17 s
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.												

	ny information copied from such Reports and Sta for commercial purposes, other than using the									
	NAME OF COMMITTEE (In Full) OUTDOOR AMUSEMENT BUSI									
Α.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wells Fargo Advisors  Date of Receipt									
	Mailing Address 7900 Xerxes Ave S  10th FL	M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y								
	City Bloomington	State MN	Zip Code 55431	Transaction ID : SA17.5079  Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		615.81						
	Name of Employer (for Individual)	Memo Item Change in value 1/1-6/30/2021								
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼							
В.	Full Name of Individual (Last, First, Middle Initi-Wells Fargo Advisors	al) or Full Org	anization Name	Date of Receipt						
	Mailing Address 7900 Xerxes Ave S  10th FL	06 30 2021								
	City Bloomington	State MN	Zip Code 55431	Transaction ID : SA17.5084  Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		38.16						
	Name of Employer (for Individual)	Occup	ation (for Individual)	Memo Item Dividend income						
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼							
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi	al) or Full Org	anization Name	Date of Receipt						
Ο.	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.	С		Tallouin of Each Floorpi and Forest						
	Name of Employer (for Individual)	Occup	ation (for Individual)	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼							
S	SUBTOTAL of Receipts This Page (optional)		·····	653.97						
T	OTAL This Period (last page this line number o	nlv)		653.97						

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SCHEDULE B (FEC Form 3X)		FOR LINE	E NUMBER: PAGE 11 OF 15				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 28a					
Any information copied from such Reports and Statem							
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) OUTDOOR AMUSEMENT BUSINE	•		solicit contributions from such committee.				
A. ANDY HARRIS FOR CONGRESS  Mailing Address PO BOX 426			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	N		2021				
STEVENSVILLE	State Zip Code MD 21666		FEC Identification Number				
Purpose of Disbursement  Candidate Name		011 Category/	C C00435974  Transaction ID : SB23.5074  Amount of Each Disbursement this Period				
Senate x	nent For: 2022 Primary General Other (specify) ▼	Туре	2500.00				
State: MD District: 01	Other (Speeny)		Memo Item				
B. ANN WAGNER FOR CONGRESS  Mailing Address PO BOX 50		Date of Disbursement  Date of Disbursement  Date of Disbursement  Date of Disbursement					
BALLWIN Purpose of Disbursement	State Zip Code MO 63022	011	FEC Identification Number  C C00495846  Transaction ID : SB23.5078				
Senate	Category/ Type  nent For: 2022 Primary General Other (specify)		Amount of Each Disbursement this Period  1000.00  Memo Item				
Full Name (Last, First, Middle Initial)  C. BILLY LONG FOR CONGRESS			Date of Disbursement				
Mailing Address 3246 E RIDGEVIEW ST			04 14 2021				
,	State Zip Code MO 65804	011	FEC Identification Number  C C00460063  Transaction ID : SB23.5073				
LONG, BILLY MR., , ,		Category/ Type	Amount of Each Disbursement this Period				
Senate	nent For: 2022 Primary General Other (specify)		5000.00  Memo Item				
			8500.00				
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)			7 7				

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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 12 OF 15					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	v one) 22 <b>x</b> 23 26 27				
	1, 1, 1,	28a	28b 28c 29 30b				
Any information copied from such Reports and State or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)	me and address of any politic	cai committee to	o solicit continuutions from such committee.				
OUTDOOR AMUSEMENT BUSIN	ESS ASSOCIATION	INC PAC					
Full Name (Last, First, Middle Initial)							
A. DAN NEWHOUSE FOR CONGRE	ESS 		Date of Disbursement				
Mailing Address PO BOX 10949			05 19 2021				
City YAKIMA	State Zip Code WA 98909		FEC Identification Number  C C00559393				
Purpose of Disbursement	30909						
•		011					
Candidate Name		Category/	Transaction ID : SB23.5076  Amount of Each Disbursement this Period				
NEWHOUSE, DAN, , ,		Type	2500.00				
Office Sought: House Disburse Senate	ment For: 2022 Primary General						
President State: District:	Other (specify) ▼		Memo Item				
Full Name (Last, First, Middle Initial)							
B. DEFAZIO FOR CONGRESS	Date of Disbursement						
Mailing Address PO BOX 1316	_		05 19 2021				
City	State Zip Code		FEC Identification Number				
SPRINGFIELD Purnose of Dishursement	SPRINGFIELD OR 97477 Purpose of Disbursement						
raipose of Bisbarcement	C C00215905						
Candidate Name		Category/	Transaction ID : SB23.5075  Amount of Each Disbursement this Period				
DEFAZIO, PETER A, , ,		Type	Amount of Each bisbursement this renou				
	ment For: 2022		1000.00				
Senate x	Primary General						
State: OR District: 04	Other (specify)		Memo Item				
Full Name (Last, First, Middle Initial)							
C. FRIENDS OF JIM CLYBURN			Date of Disbursement				
Mailing Address POST OFFICE BOX 12567			03 16 2021				
City	State Zip Code		FEC Identification Number				
COLUMBIA	SC 29211						
Purpose of Disbursement		044	C C00255562				
Candidate Name		011	Transaction ID : SB23.5072				
CLYBURN, JAMES E., , ,		Category/ Type	Amount of Each Disbursement this Period				
	ement For: 2022	Type	2500.00				
Senate x	Primary General		4 4				
President	Other (specify) ▼		Memo Item				
State: SC District: 06			William Italii				
SUBTOTAL of Disbursements This Page (optional).			6000.00				
TOTAL This Period (last page this line number only	′)						

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SCHEDULE B (FEC Form 3X)			L FOR LINE	NUMBER: PAGE 13 OF 15			
ITEMIZED DISBURSEMENTS	Use separate s		FOR LINE NUMBER: PAGE 13 OF (check only one)				
II LIVIIZED DIODONOLIVILIVIO	for each catego Detailed Summ		21b	22 🗶 23 26 27			
	Detailed SuiTilli		28a	28b 28c 29 30b			
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)		a., pontiou	30	The second secon			
OUTDOOR AMUSEMENT BUSIN	ESS ASSOC	IATION	INC PAC				
Full Name (Look First Middle Initial)							
Full Name (Last, First, Middle Initial)  A. PINGREE FOR CONGRESS				Date of Disbursement			
- INGREET OR CONCRESS				M M / D D / Y Y Y Y			
Mailing Address PO BOX 17613				05 19 2021			
City	State Zip (	Code		FEC Identification Number			
PORTLAND	ME 041	12					
Purpose of Disbursement		l r	011	C C00433391			
Candidate Name				Transaction ID: SB23.5077			
PINGREE, CHELLIE, , ,			Category/ Type	Amount of Each Disbursement this Period			
	ment For: 2022			5000.00			
Senate x	,	General					
State: District:	Other (specify)	7		Memo Item			
Full Name (Last, First, Middle Initial)							
B.				Date of Disbursement			
				M = M / D = D / Y = Y = Y			
Mailing Address							
City	State Zip (	Code		FEC Identification Number			
Purpose of Disbursement							
Fulpose of Disbursement				C			
Candidate Name			Category/	Amount of Each Disbursement this Period			
	Type nent For:						
Office Sought: House Disburser				4 4			
Senate President	Other (specify)	General					
State: District:	Other (specify)			Memo Item			
Full Name (Last, First, Middle Initial)							
C.				Date of Disbursement			
Mailing Address				M M / D D / Y Y Y Y			
Mailing Address							
City	State Zip (	Code		FEC Identification Number			
Purpose of Disbursement				С			
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburser	ment For:		.,,,,				
Senate	Primary	General					
President	Other (specify)	7		Memo Item			
State: District:				_			
SUBTOTAL of Disbursements This Page (optional)				5000.00			
CODICIAL OF DISDUISEMENTS THIS Fage (optional)							
TOTAL This Period (last page this line number only)	)			19500.00			

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SCHEDULE B (FEC Form 3X)		FOR LINE	LINE NUMBER: PAGE 14 OF 15				
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	) (check only	v one)				
	Detailed Summary Page	21b 28a	22 23 26 27 28b 28c <b>x</b> 29 30b				
Any information copied from such Departs and Chate-	monte may not be cold or ::		, , , , , , , , , , , , , , , , , , ,				
Any information copied from such Reports and State or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)							
$ \; angle$ OUTDOOR AMUSEMENT BUSIN	ESS ASSOCIATIO	N INC PAC					
Full Name (Look First Middle India)							
Full Name (Last, First, Middle Initial)  A. Bank of America			Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address 100 North Tryon Street			04 02 2021				
City	State Zip Code						
Charlotte	NC 28255		FEC Identification Number				
Purpose of Disbursement	l .	1	C				
Investment advisory fee  Candidate Name		001	Transaction ID : SB29.5061				
Candidate Ivanie		Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disbursel	ment For:	1,750	30.00				
Senate	Primary General						
State: District:	Other (specify) ▼		Memo Item				
Full Name (Last, First, Middle Initial)							
B. Bank of America			Date of Disbursement				
	M = M / D = D / Y = Y = Y						
Mailing Address 100 North Tryon Street			04 30 2021				
City	State Zip Code		FFC Identification Number				
Charlotte	FEC Identification Number						
Purpose of Disbursement April 21 advisory fee	April 04 and in a multipa						
Candidate Name	andidate Name						
	Category/ Type	Amount of Each Disbursement this Period					
	ment For:  Primary General		46.48				
Senate President							
State: District:	Other (specify)		Memo Item				
Full Name (Last, First, Middle Initial)							
C. Bank of America			Date of Disbursement				
Moiling Address 400 North Trees Office			05 18 2021				
Mailing Address 100 North Tryon Street			03 10 2021				
,	State Zip Code		FEC Identification Number				
Charlotte Purpose of Dishursement	Charlotte NC 28255  Purpose of Disbursement Investment advisory fee						
Candidate Name		Category/	Transaction ID: SB29.5062  Amount of Each Disbursement this Period				
Office Country		Туре	20.00				
Office Sought: House Disburser Senate	ment For:  Primary General		30.00				
President	Other (specify)		Mome Item				
State: District:			Memo Item				
SUBTOTAL of Disbursements This Page (optional)		·····•	106.48				
TOTAL This Period (last page this line number only)	)						

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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 15				
ITEMIZED DISBURSEMENTS		parate schedule(s) a category of the	(orlook orn)	□ 00 □ 07			
		Summary Page	21b 28a	22 23 28b 28c	26 27 29 30b		
Any information copied from such Reports and Stat	emente may	not be sold or us			<b>^</b>		
or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)							
$ \:  angle$ OUTDOOR AMUSEMENT BUSIN	NESS AS	SSOCIATION	I INC PAC				
Full Name (Last, First, Middle Initial)							
A. Bank of America				Date of Disburs	sement		
				M M / D	D / Y Y Y Y Y		
Mailing Address 100 North Tryon Street				05	31 2021		
City	State	Zip Code					
Charlotte	NC	28255		FEC Identificati	on Number		
Purpose of Disbursement Overnight check fee			004				
Candidate Name			001	Transaction ID : SB29.5057			
Candidate Name			Category/ Type	Amount of Eac	h Disbursement this Period		
Office Sought: House Disburs	ement For:				15.00		
Senate	Primary	General					
President State: District:	Other (sp	ecify) ▼		Memo Item	l .		
Full Name (Last, First, Middle Initial)							
B. Bank of America				Date of Disburs	sement		
	Mailing Address 100 North Tryon Street				D / Y Y Y Y Y		
Mailing Address 100 North Tryon Street					06 02 2021		
City	State NC	Zip Code		FEC Identificati	on Number		
Purpose of Disbursement	20200						
Investment advisory fee	ory fee			C Transaction ID : SB29.5063			
Candidate Name		Category/	Amount of Each Disbursement this Period				
Office Sought: House Disburs	ement For:		Туре	30.00			
Senate				4	4		
President	Other (sp	ecify)		Memo Item			
State: District:				Ц			
Full Name (Last, First, Middle Initial)  C.				Date of Disburs	sement		
<b>.</b>					D / Y Y Y Y		
Mailing Address							
City	State	Zip Code		FEC Identificati	on Number		
Purpose of Disbursement							
raipodo di Biobaldoment				C			
Candidate Name	Candidate Name Category/			Amount of Each Disbursement this Period			
Office Sought: House Disburs			Type				
Office Sought: House Disburs Senate	ement For:  Primary	General					
President	Other (sp			Memo Item			
State: District:				I WIGHTO ITEM			
SUPTOTAL of Disburgoments This Dose (artists)	_				45.00		
SUBTOTAL of Disbursements This Page (optional)		•••••	······	7	7		
TOTAL This Period (last page this line number only	v)				151.48		