

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

JAN 11 8 15 AM '95

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In Full) C00132480 031590 M 22 ALFRED B LAGASSE III INTERNATIONAL TAXICAB ASSOCIAT ION POLITICAL ACTION COMMITTEE 3849 FARRAGUT AVE KENSINGTON MD 20895	2. FEC IDENTIFICATION NUMBER 3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
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4. TYPE OF REPORT

- (a) April 15 Quarterly Report Monthly Report Due On:
- July 15 Quarterly Report February 20 June 20 October 20
 October 15 Quarterly Report March 20 July 20 November 20
 January 31 Year End Report April 20 August 20 December 20
 July 31 Mid Year Report (Non-election Year Only) May 20 September 20 January 31
- Twelfth day report preceding _____
(Type of Election)
 election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
 in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>11/29/94</u> through <u>12/31/94</u>		
6. (a) Cash on Hand January 1, 18 <u>94</u>		\$ 34,626.31
(b) Cash on Hand at Beginning of Reporting Period	\$ 15,408.31	
(c) Total Receipts (from Line 19)	\$ 4,326.00	\$ 10,102.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 11,734.31	\$ 49,748.31
7. Total Disbursements (from Line 30)	\$ 1,000.00	\$ 31,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 10,734.31	\$ 18,748.31
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ —	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9590 Local 202-218-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ —	

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: ALFRED LAGASSE

Signature of Treasurer: *[Handwritten Signature]* Date: 1/9/95

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM SX

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
NATIONAL ASSOCIATION OF GOVERNMENT EMPLOYEES UNION LOCAL 4240		FROM	TO
		11/29/94	12/31/94
		COLUMN A	COLUMN B
		Total This Period	Calendar Year
I. Receipts			
11.	Contributions (other than loans) From:		
a.	Individual/Persons Other Than Political Committees		
i.	Itemized (use Schedule A)	4120	
ii.	Unitemized	200	12,730
iii.	Total (add i and ii) >	4320	2,472
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contributions (add a iii, b and c) >		15,162
12.	Transfers From Affiliated/Other Party Committees		
13.	All Loans Received		
14.	Loan Repayments Received		
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17.	Other Federal Receipts (Dividends, Interest, etc.)		
18.	Transfers from Nonfederal Account for Joint Activity		
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	4320	15,162
20.	Total Federal Receipts (subtract line 13 from line 19) >	4320	15,162
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share		
ii.	Non-Federal Share		
b.	Other Federal Operating Expenditures		
c.	Total Operating Expenditures (add a i, a ii, and b) >		
22.	Transfers to Affiliated/Other Party Committees		
23.	Contributions to Federal Candidates/Committees and Other Political Committees	1,000	31,000
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 a, b and c) >		
29.	Other Disbursements		
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	1,000	31,000
31.	Total Federal Disbursements (subtract line 21 a) from line 30) >	1,000	31,000
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	4,320	15,162
33.	Total Contribution Refunds (from line 28d)		
34.	Net Contributions (other than loans)(subtract line 33 from 32)		
35.	Total Federal Operating Expenditures (add 21 a) and 21 b) >		
36.	Offsets to Operating Expenditures (from line 15)		
37.	Net Operating Expenditures (subtract line 36 from 35) >		

9503956704

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF FOR LINE NUMBER

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

International Tapestry and Lining Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Bernard Zane 517 Clark St. Dalton, GA 30726	Dalton Tape Occupation: Printer	11/30/91	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Ward 629 York St. Newport, RI 02841	Yellow Cab Occupation: Driver	11/30/94	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Local Line Sales 1200 N. Hudson St Washington, VA 22304	Red Top Cab Occupation: Driver	12/21/91	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Francis 222 Park Ave, D 41-E New York, NY 10017	Ramart Occupation: Train Mgt.	12/21/94	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur Lawrence 17417 Lawrence Plaza N Long Beach, CA 90801	Ramart Occupation: Printer	12/21/94	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Judith Kitter 154 South Blvd Lake Wales, FL 33852	Yellow Cab Occupation: Driver	12/21/94	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Clara Butler 214 W. 47th St Kansas City, MO 64116	Walt Disney Company Occupation: Printer	12/21/94	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 460.00			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

National Tenant and Housing Organization Political Action Committee

9 5 0 3 4 1 0 0

A. Full Name, Mailing Address and ZIP Code James R. Davis 9306 Marsh St Weymouth MA 02302	Name of Employer East Coast plumbers Occupation Plumber	Date (month, day, year) 12/29/94	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code Larry S. Brown 1341 Commerce Ave Newport, RI 02840	Name of Employer Lalor Cab Occupation Plumber	Date (month, day, year) 12/29/94	Amount of Each Receipt This Period 110.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 410.00	
C. Full Name, Mailing Address and ZIP Code Larry Brown 1341 Commerce St Weymouth, MA 02302	Name of Employer Cracker Cab Occupation Plumber	Date (month, day, year) 12/29/94	Amount of Each Receipt This Period 350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code Jim Bell 100 Industrial Rd Weymouth, MA 02302	Name of Employer Bell Cab Occupation Plumber	Date (month, day, year) 12/29/94	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code Steve Dutton 11721, Portland Ave Hartford, CT 06111	Name of Employer Blue Bird Cab Occupation Plumber	Date (month, day, year) 12/29/94	Amount of Each Receipt This Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code Henry Moore 11721, Portland Ave Hartford, CT 06111	Name of Employer C.W.S. Transport Occupation Plumber	Date (month, day, year) 12/29/94	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code Mitchell House 2139 W. Main St Hartford, CT 06104	Name of Employer C.W.S. Transport Occupation Plumber	Date (month, day, year) 12/29/94	Amount of Each Receipt This Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	4,410.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Republican Support and Training Committee
Political Action Committee

93039063907

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Postcard in 1994 Committee</i> <i>P.O. Box 71115</i> <i>Washington, D.C. 20016</i>	<i>1994 election</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>12/20/94</i>	<i>\$1,000.00</i>
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	<i>\$1,000.00</i>

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.

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and/or DATE OF RECEIPT


PREPARER

1-11-95
DATE PREPARED

95037061100