

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER 2006 JUL 11 A 9:35 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 Taxicab, Limousine & Paratransit Association Political Action Committee

ADDRESS (number and street) 3849 Farragut Avenue Check it different than previously reported. (ACC) Kensington M D 20895

2. FEC IDENTIFICATION NUMBER C 00132480 CITY STATE ZIP CODE 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15 (X), October 15, January 31, July 31 Mid-Year Report (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), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Convention (12C), Special (12S) Election on In the State of (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S) Election on In the State of

5. Covering Period 04 01 2006 through 06 30 2006

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 07 10 2006

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 table with columns for tracking and FEC FORM 3X (Revised 1/01)

25071862057

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

Taxicab, Limousine & Paratransit Association Political Action Committee

Report Covering the Period: From: **04** ' **01** ' **2006** To: **06** ' **30** ' **2006**

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, 2006 | | 42627.15 |
| (b) Cash on Hand at Beginning of Reporting Period | 41752.15 | |
| (c) Total Receipts (from Line 19) | 9600.00 | 10725.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 51352.15 | 53352.15 |
| 7. Total Disbursements (from Line 30) | 3000.00 | 5000.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 48352.15 | 48352.15 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

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

Taxicab, Limousine & Paratransit Association Political Action Committee

Report Covering the Period: From:

04 ' 01 ' 2006

To:

06 ' 30 ' 2006

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)

9,275.00

(ii) Unitemized

3,250.00

(iii) TOTAL (add Lines 11(a)(i) and (ii)

9,600.00

10,725.00

(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)

9,600.00

10,725.00

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.)

18. Transfers from Nonfederal Account for Joint Activity

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

9,600.00

10,725.00

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

9,600.00

10,725.00

29029112059

DETAILED SUMMARY PAGE
of Disbursements

| 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 | | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | | |
| 22. Transfers to Affiliated/Other Party Committees | | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 3,000.00 | 5,000.00 |
| 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) | 3,000.00 | 5,000.00 |
| 31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) | 3,000.00 | 5,000.00 |
| III. Net Contributions/Operating Expenditures | | |
| 32. Total Contributions (other than loans) (from Line 11(d), page 3) | 9,600.00 | 10,725.00 |
| 33. Total Contribution Refunds (from Line 28(d)) | | |
| 34. Net Contributions (other than loans) (subtract Line 33 from Line 32) | 9,600.00 | 10,725.00 |
| 35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | | |
| 36. Offsets to Operating Expenditures (from Line 15, page 3) | | |
| 37. Net Operating Expenditures (subtract Line 36 from Line 35) | | |

26030112000

**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 1 OF 6 | |
| | <input checked="" 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 |

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)
Taxicab, Limousine & Paratransit Association Political Action Committee

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. <u>Hunt, Brian</u> | | Date of Receipt <u>04</u> / <u>17</u> / <u>2006</u> |
| Mailing Address <u>1400 E. Mission Blvd</u> | | Amount of Each Receipt this Period <u>5,000.00</u> <u>50000</u> |
| City <u>Pomona</u> | State Zip Code <u>CA 91766</u> | |
| FEC ID number of contributing federal political committee. <u>C</u> | | |
| Name of Employer <u>Yellow Cab of Pomona</u> | Occupation <u>President</u> | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <u>1,000.00</u> | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. <u>Mellegard, Harlan W.</u> | | Date of Receipt <u>04</u> / <u>17</u> / <u>2006</u> |
| Mailing Address <u>194 Dartford St.</u> | | Amount of Each Receipt this Period <u>5,000.00</u> |
| City <u>Hercules</u> | State Zip Code <u>CA 94547</u> | |
| FEC ID number of contributing federal political committee. <u>C</u> | | |
| Name of Employer <u>Yellow Cab Co-Op</u> | Occupation <u>General Mgr.</u> | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <u>5,000.00</u> | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. <u>Turner, Raymond K.</u> | | Date of Receipt <u>04</u> / <u>17</u> / <u>2006</u> |
| Mailing Address <u>1406 Naya St.</u> | | Amount of Each Receipt this Period <u>4,000.00</u> |
| City <u>Houston</u> | State Zip Code <u>TX 77009</u> | |
| FEC ID number of contributing federal political committee. <u>C</u> | | |
| Name of Employer <u>Greater Houston Transportation</u> | Occupation <u>Pres.</u> | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <u>5,000.00</u> | |

| | |
|---|------------------|
| SUBTOTAL of Receipts This Page (optional) | <u>19,000.00</u> |
| TOTAL This Period (last page this line number only) | |

2006112051

**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 2 OF 6 | |
| | <input checked="" 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 |

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NAME OF COMMITTEE (In Full)
Taxicab, Limousine & Paratransit Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Hughes, Craig

Mailing Address
6421 E. Lafayette Blvd.

City State Zip Code
Scottsdale AZ 85251

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
Total Transit Pres.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
05 ' 09 ' 2006

Amount of Each Receipt this Period
500.00
25.00

B. Full Name (Last, First, Middle Initial)
Mackin, Craig L.

Mailing Address
445 E. Market St.

City State Zip Code
Louisville KY 40202

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
Louisville Transportation Co Vice Pres.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 ' 09 ' 2006

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Palmeri, Anthony

Mailing Address
1833 Altosano Dr.

City State Zip Code
El Cajon CA 92020

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 ' 09 ' 2006

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) 1525.00

TOTAL This Period (last page this line number only)

200309112052

**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 3 OF 6 | |
| | <input checked="" 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 |

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NAME OF COMMITTEE (In Full)
Taxicab, Limousine & Paratransit Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Smarelli, Mary

Mailing Address
1707 N. Prospect Ave.

City *Milwaukee* State *WI* Zip Code *53207*

FEC ID number of contributing federal political committee. *C*

Name of Employer *Transit Express* Occupation *Pres*

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / *09* / *2006*

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Watson, Sheri

Mailing Address
1105 NE Moss Point Rd

City *Lee's Summit* State *MO* Zip Code *64064*

FEC ID number of contributing federal political committee. *C*

Name of Employer *Checker Transportation Group* Occupation *Pres*

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / *09* / *2006*

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Wier, R. Brian

Mailing Address
28449 N. 63rd St

City *Cave Creek* State *AZ* Zip Code *85331*

FEC ID number of contributing federal political committee. *C*

Name of Employer *Super Shuttle* Occupation *Pres*

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / *09* / *2006*

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) *1500.00*

TOTAL This Period (last page this line number only)

250398112005

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 **4** OF **6**

| | | | |
|---|------------------------------|------------------------------|---|
| <input checked="" 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 |

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NAME OF COMMITTEE (In Full)

TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. McBride, Brian A.

Mailing Address

2069 W. Third St.

City

Cleveland

State

OH

Zip Code

44113

FEC ID number of contributing federal political committee.

C

Name of Employer

Yellow Cab

Occupation

Pres.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,000.00

Date of Receipt

05 / 09 / 2006

Amount of Each Receipt this Period

1,000.00

Full Name (Last, First, Middle Initial)

B. Campolongo, James D.

Mailing Address

1307 Royal Ct.

City

Jefferson Hills

State

PA

Zip Code

15025

FEC ID number of contributing federal political committee.

C

Name of Employer

Pittsburgh Transportation Group

Occupation

Pres.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

5,000.00

Date of Receipt

05 / 30 / 2006

Amount of Each Receipt this Period

5,000.00

Full Name (Last, First, Middle Initial)

C. Hewatt, Richard C.

Mailing Address

2796 Roanoke Rd

City

Cumming

State

GA

Zip Code

30041

FEC ID number of contributing federal political committee.

C

Name of Employer

Chester Cab

Occupation

Pres.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

5,000.00

Date of Receipt

05 / 30 / 2006

Amount of Each Receipt this Period

5,000.00

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

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

20,000.00

20,000.00

26039112064

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

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

FOR LINE NUMBER: PAGE 5 OF 6

(check only one)

| | | | |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" 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 |

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NAME OF COMMITTEE (In Full)

Taxicab, Limousine & Paratransit Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. *Lopez, John M*

Mailing Address

208 El Molino Dr.

City

Clayton

State

CA

Zip Code

94517

FEC ID number of contributing federal political committee.

C

Name of Employer

Taxi Cab

Occupation

Pres.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / *30* / *2006*

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. *Thompson, Jo-Anne*

Mailing Address

3 Mayflower Cir.

City

Framingham

State

MA

Zip Code

01702

FEC ID number of contributing federal political committee.

C

Name of Employer

Tommy's Taxi

Occupation

Pres.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / *30* / *2006*

Amount of Each Receipt this Period

850.00

Full Name (Last, First, Middle Initial)

C. *Gaddis, Jesse P*

Mailing Address

2430 Sunrise Key Blvd

City

FT. Lauderdale

State

FL

Zip Code

33304

FEC ID number of contributing federal political committee.

C

Name of Employer

Yellow Cab Co.

Occupation

Pres.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / *30* / *2006*

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1850.00

TOTAL This Period (last page this line number only)

1850.00

**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 6 OF 6

| | | | |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" 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 | | | |

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NAME OF COMMITTEE (In Full)

Taxicab, Limousine & Paratransit Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Nichols, Neal C.

Mailing Address

3251 Washington Blvd

City

Arlington

State

VA

Zip Code

22201

FEC ID number of contributing federal political committee.

C

Date of Receipt

05 / 30 / 2006

Amount of Each Receipt this Period

500.00

Name of Employer

Transportation General

Occupation

Pres

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Date of Receipt

/ /

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Date of Receipt

/ /

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

8,925.00

200309112055

**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)

| | | | | |
|------------------------------|-----------------------------|--|------------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 |
| <input type="checkbox"/> 26 | <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c |
| <input type="checkbox"/> 29 | | | | |

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NAME OF COMMITTEE (In Full)

Taxicab, Limousine & Paratransit Association Political Action Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

A.

Duncan For Congress

05 / 03 / 2006

Mailing Address

1318 Dawitt Ave.

City: *Alexandria* State: *VA* Zip Code: *22301*

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement

contribution

011

Candidate Name

John Duncan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: *TN* District: *2*

Full Name (Last, First, Middle Initial)

Date of Disbursement

B.

Majority In Congress PAC

06 / 30 / 2006

Mailing Address

616 E ST, NW Suite 802

City: *Washington* State: *DC* Zip Code: *20004*

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

contribution

Full Name (Last, First, Middle Initial)

Date of Disbursement

C.

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

3000.00

25030112067

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

| | |
|---|--|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
| <input type="checkbox"/> USPS First Class Mail | Postmarked |
| <input type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) |
| <input type="checkbox"/> USPS Priority Mail | Postmarked |
| Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/> | |
| <input type="checkbox"/> USPS Express Mail | Postmarked |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> No Postmark | |
| <input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>FEDEX</i> | Shipping Date <i>7/10/06</i> |
| | Next Business Day Delivery <input checked="" type="checkbox"/> |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |

JS
 PREPARER

7/11/06
 DATE PREPARED

2005071112050