

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 National Limousine Association Political Action Committee

ADDRESS (number and street) 49 South Maple Avenue Check if different than previously reported. (ACC) Marlton NJ 08053

2. FEC IDENTIFICATION NUMBER C C00359380 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1), July 15 Quarterly Report (Q2), X October 15 Quarterly Report (Q3), January 31 Year-End Report (YE), July 31 Mid-Year Report (Non-election Year Only) (MY), Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11) (Non-Election Year Only), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12) (Non-Election Year Only), Apr 20 (M4), Jul 20 (M7), Oct 20 (M10), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) Election on M M / D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S) Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 01 2013 through 09 30 2013

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 Philip Jagiela

Signature of Treasurer Philip Jagiela [Electronically Filed] Date 10 15 2013

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

National Limousine Association Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="55565.47"/>	<input type="text" value="55565.47"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="72284.52"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="8865.00"/>	<input type="text" value="35225.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="81149.52"/>	<input type="text" value="90790.47"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1244.61"/>	<input type="text" value="10885.56"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="79904.91"/>	<input type="text" value="79904.91"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Write or Type Committee Name

National Limousine Association Political Action Committee

Report Covering the Period: From: / / To: / /

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).....	7825.00	27775.00
(ii) Unitemized	1040.00	7450.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	8865.00	35225.00
(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)	8865.00	35225.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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))..... ▶	8865.00	35225.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	8865.00	35225.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(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) Other Federal Operating Expenditures	244.61	885.56
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	244.61	885.56
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	10000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1244.61	10885.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1244.61	10885.56

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	8865.00	35225.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8865.00	35225.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	244.61	885.56
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	244.61	885.56

**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 26
(check only one)
 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)
National Limousine Association Political Action Committee

A. Ahmed Atris
 Full Name (Last, First, Middle Initial)
 Mailing Address 42897 Vestals Gap Drive
 City Ashburn State VA Zip Code 20148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US Sedan Service, Inc. Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00
 Date of Receipt 07 / 16 / 2013
Transaction ID : SA11AI.5476
 Amount of Each Receipt this Period 100.00

B. Ahmed Atris
 Full Name (Last, First, Middle Initial)
 Mailing Address 42897 Vestals Gap Drive
 City Ashburn State VA Zip Code 20148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US Sedan Service, Inc. Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00
 Date of Receipt 08 / 15 / 2013
Transaction ID : SA11AI.5509
 Amount of Each Receipt this Period 100.00

C. Ahmed Atris
 Full Name (Last, First, Middle Initial)
 Mailing Address 42897 Vestals Gap Drive
 City Ashburn State VA Zip Code 20148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US Sedan Service, Inc. Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00
 Date of Receipt 09 / 17 / 2013
Transaction ID : SA11AI.5543
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

A. Richard Azzolino
 Full Name (Last, First, Middle Initial)
 Mailing Address 1550 Gilbreth Road
 City Burlingame State CA Zip Code 94010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gateway Limousines Worldwide Occupation Second Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2013
Transaction ID : SA11AI.5469
 Amount of Each Receipt this Period
 100.00

B. Richard Azzolino
 Full Name (Last, First, Middle Initial)
 Mailing Address 1550 Gilbreth Road
 City Burlingame State CA Zip Code 94010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gateway Limousines Worldwide Occupation Second Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2013
Transaction ID : SA11AI.5502
 Amount of Each Receipt this Period
 100.00

C. Richard Azzolino
 Full Name (Last, First, Middle Initial)
 Mailing Address 1550 Gilbreth Road
 City Burlingame State CA Zip Code 94010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gateway Limousines Worldwide Occupation Second Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2013
Transaction ID : SA11AI.5535
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 26
<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)
National Limousine Association Political Action Committee

A. Kevin Bevers
Full Name (Last, First, Middle Initial)
Mailing Address 2409 Rorimer Drive

City Riverside	State CA	Zip Code 92509
-------------------	-------------	-------------------

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

Name of Employer A and A Livery	Occupation Manager
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2013

Transaction ID : SA11AI.5466

Amount of Each Receipt this Period
50.00

B. Kevin Bevers
Full Name (Last, First, Middle Initial)
Mailing Address 2409 Rorimer Drive

City Riverside	State CA	Zip Code 92509
-------------------	-------------	-------------------

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

Name of Employer A and A Livery	Occupation Manager
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2013

Transaction ID : SA11AI.5501

Amount of Each Receipt this Period
50.00

C. Kevin Bevers
Full Name (Last, First, Middle Initial)
Mailing Address 2409 Rorimer Drive

City Riverside	State CA	Zip Code 92509
-------------------	-------------	-------------------

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

Name of Employer A and A Livery	Occupation Manager
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2013

Transaction ID : SA11AI.5534

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 26
<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)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial) A. James Brown		Date of Receipt MM / DD / YYYY 07 / 16 / 2013 Transaction ID : SA11AI.5473
Mailing Address 651 Aldo Avenue		Amount of Each Receipt this Period 100.00
City Santa Clara	State CA	Zip Code 95054
FEC ID number of contributing federal political committee. C	Name of Employer El Paseo Worldwide	Occupation General Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. James Brown		Date of Receipt MM / DD / YYYY 08 / 14 / 2013 Transaction ID : SA11AI.5506
Mailing Address 651 Aldo Avenue		Amount of Each Receipt this Period 100.00
City Santa Clara	State CA	Zip Code 95054
FEC ID number of contributing federal political committee. C	Name of Employer El Paseo Worldwide	Occupation General Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. James Brown		Date of Receipt MM / DD / YYYY 09 / 16 / 2013 Transaction ID : SA11AI.5538
Mailing Address 651 Aldo Avenue		Amount of Each Receipt this Period 100.00
City Santa Clara	State CA	Zip Code 95054
FEC ID number of contributing federal political committee. C	Name of Employer El Paseo Worldwide	Occupation General Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 26
<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)
National Limousine Association Political Action Committee

A. Michael Callahan
Full Name (Last, First, Middle Initial)

Mailing Address 63 Whitehall Way

City Bellingham State MA Zip Code 01748

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

Name of Employer Able Limousine Inc. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2013

Transaction ID : SA11AI.5493

Amount of Each Receipt this Period
 50.00

B. Michael Callahan
Full Name (Last, First, Middle Initial)

Mailing Address 63 Whitehall Way

City Bellingham State MA Zip Code 01748

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

Name of Employer Able Limousine Inc. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2013

Transaction ID : SA11AI.5529

Amount of Each Receipt this Period
 50.00

C. Javid Chaudhry
Full Name (Last, First, Middle Initial)

Mailing Address 896 Bee Street

City New York State NY Zip Code 11580

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

Name of Employer NY Global (NYG Limousine) Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2013

Transaction ID : SA11AI.5489

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 26
<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)
National Limousine Association Political Action Committee

A. Javid Chaudhry
Full Name (Last, First, Middle Initial)

Mailing Address 896 Bee Street

City New York State NY Zip Code 11580

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

Name of Employer NY Global (NYG Limousine) Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **08 / 21 / 2013**

Transaction ID : SA11AI.5525

Amount of Each Receipt this Period **50.00**

B. Javid Chaudhry
Full Name (Last, First, Middle Initial)

Mailing Address 896 Bee Street

City New York State NY Zip Code 11580

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

Name of Employer NY Global (NYG Limousine) Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **09 / 23 / 2013**

Transaction ID : SA11AI.5556

Amount of Each Receipt this Period **50.00**

C. Kevin Cronin
Full Name (Last, First, Middle Initial)

Mailing Address 28 Marshall Street

City Canton State MA Zip Code 02021

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

Name of Employer Above All Transportation Occupation Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2350.00**

Date of Receipt **07 / 15 / 2013**

Transaction ID : SA11AI.5471

Amount of Each Receipt this Period **450.00**

SUBTOTAL of Receipts This Page (optional)..... **550.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

A. Kevin Cronin
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 Marshall Street
 City Canton State MA Zip Code 02021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Above All Transportation Occupation Executive Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2800.00**

Date of Receipt **08 / 13 / 2013**
Transaction ID : SA11AI.5504
 Amount of Each Receipt this Period **450.00**

B. Kevin Cronin
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 Marshall Street
 City Canton State MA Zip Code 02021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Above All Transportation Occupation Executive Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **3250.00**

Date of Receipt **09 / 13 / 2013**
Transaction ID : SA11AI.5537
 Amount of Each Receipt this Period **450.00**

C. Jon Epstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Greenfield Hill
 City Sparta State NJ Zip Code 07871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Royal Coachman Worldwide Occupation President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **700.00**

Date of Receipt **07 / 02 / 2013**
Transaction ID : SA11AI.5460
 Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **1000.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 26
<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)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Jon Epstein		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 30 / 2013 Transaction ID : SA11AI.5492
Mailing Address 14 Greenfield Hill		Amount of Each Receipt this Period 100.00
City Sparta	State NJ	Zip Code 07871
FEC ID number of contributing federal political committee. C	Name of Employer Royal Coachman Worldwide	Occupation President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) B. Jon Epstein		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 27 / 2013 Transaction ID : SA11AI.5527
Mailing Address 14 Greenfield Hill		Amount of Each Receipt this Period 100.00
City Sparta	State NJ	Zip Code 07871
FEC ID number of contributing federal political committee. C	Name of Employer Royal Coachman Worldwide	Occupation President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) C. Jon Epstein		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 24 / 2013 Transaction ID : SA11AI.5559
Mailing Address 14 Greenfield Hill		Amount of Each Receipt this Period 100.00
City Sparta	State NJ	Zip Code 07871
FEC ID number of contributing federal political committee. C	Name of Employer Royal Coachman Worldwide	Occupation President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 OF 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

A. Marguerite Farrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 East 20th Street
 City New York State NY Zip Code 10003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Farrell Limousine Service Occupation Managing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 17 / 2013
Transaction ID : SA11AI.5481
 Amount of Each Receipt this Period
 400.00

B. Marguerite Farrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 East 20th Street
 City New York State NY Zip Code 10003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Farrell Limousine Service Occupation Managing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2013
Transaction ID : SA11AI.5514
 Amount of Each Receipt this Period
 400.00

C. Marguerite Farrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 East 20th Street
 City New York State NY Zip Code 10003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Farrell Limousine Service Occupation Managing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2013
Transaction ID : SA11AI.5546
 Amount of Each Receipt this Period
 400.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Diane Forgy		Date of Receipt MM / DD / YYYY 07 / 02 / 2013 Transaction ID : SA11AI.5462
Mailing Address 10515 Ensley Lane		Amount of Each Receipt this Period 250.00
City Leawood	State KS	Zip Code 66206
FEC ID number of contributing federal political committee. C	Name of Employer Overland Limousine	
Occupation Owner		Aggregate Year-to-Date ▼ 1250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Diane Forgy		Date of Receipt MM / DD / YYYY 07 / 31 / 2013 Transaction ID : SA11AI.5494
Mailing Address 10515 Ensley Lane		Amount of Each Receipt this Period 250.00
City Leawood	State KS	Zip Code 66206
FEC ID number of contributing federal political committee. C	Name of Employer Overland Limousine	
Occupation Owner		Aggregate Year-to-Date ▼ 1500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Diane Forgy		Date of Receipt MM / DD / YYYY 09 / 03 / 2013 Transaction ID : SA11AI.5530
Mailing Address 10515 Ensley Lane		Amount of Each Receipt this Period 250.00
City Leawood	State KS	Zip Code 66206
FEC ID number of contributing federal political committee. C	Name of Employer Overland Limousine	
Occupation Owner		Aggregate Year-to-Date ▼ 1750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 26
<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)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Zaragoza Garza		Date of Receipt MM / DD / YYYY 07 / 17 / 2013 Transaction ID : SA11AI.5482
Mailing Address 2828 N. Dayside Avenue		Amount of Each Receipt this Period 50.00
City Meridian	State IN	Zip Code 83646
FEC ID number of contributing federal political committee. C		
Name of Employer Diamond Limousine	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Zaragoza Garza		Date of Receipt MM / DD / YYYY 08 / 19 / 2013 Transaction ID : SA11AI.5515
Mailing Address 2828 N. Dayside Avenue		Amount of Each Receipt this Period 50.00
City Meridian	State IN	Zip Code 83646
FEC ID number of contributing federal political committee. C		
Name of Employer Diamond Limousine	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Zaragoza Garza		Date of Receipt MM / DD / YYYY 09 / 17 / 2013 Transaction ID : SA11AI.5547
Mailing Address 2828 N. Dayside Avenue		Amount of Each Receipt this Period 50.00
City Meridian	State IN	Zip Code 83646
FEC ID number of contributing federal political committee. C		
Name of Employer Diamond Limousine	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 26
<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)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Charlie Grimm

Mailing Address P.O Box 243742

City Anchorage	State AK	Zip Code 99524
-------------------	-------------	-------------------

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

Name of Employer BAC Trans	Occupation President & CEO
-------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	17	/	2013

Transaction ID : SA11AI.5483

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)
B. Charlie Grimm

Mailing Address P.O Box 243742

City Anchorage	State AK	Zip Code 99524
-------------------	-------------	-------------------

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

Name of Employer BAC Trans	Occupation President & CEO
-------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	19	/	2013

Transaction ID : SA11AI.5516

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)
c. Charlie Grimm

Mailing Address P.O Box 243742

City Anchorage	State AK	Zip Code 99524
-------------------	-------------	-------------------

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

Name of Employer BAC Trans	Occupation President & CEO
-------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2013

Transaction ID : SA11AI.5548

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 18 OF 26
(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)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Mary Harrell-Paul

Mailing Address 2440 South Wolf

City Des Plaines	State IL	Zip Code 60018
---------------------	-------------	-------------------

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

Name of Employer Crown Cars & Limousines	Occupation Owner
---	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2013

Transaction ID : SA11AI.5464

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Mary Harrell-Paul

Mailing Address 2440 South Wolf

City Des Plaines	State IL	Zip Code 60018
---------------------	-------------	-------------------

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

Name of Employer Crown Cars & Limousines	Occupation Owner
---	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

Transaction ID : SA11AI.5496

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Mary Harrell-Paul

Mailing Address 2440 South Wolf

City Des Plaines	State IL	Zip Code 60018
---------------------	-------------	-------------------

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

Name of Employer Crown Cars & Limousines	Occupation Owner
---	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	03	/	2013

Transaction ID : SA11AI.5532

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 26
<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)
National Limousine Association Political Action Committee

A. Richard Kane
Full Name (Last, First, Middle Initial)

Mailing Address 9524 Purcell Drive

City Potomac	State MD	Zip Code 20854
-----------------	-------------	-------------------

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

Name of Employer International Limousine Servic	Occupation Owner
--	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2013

Transaction ID : SA11AI.5510

Amount of Each Receipt this Period
250.00

B. Richard Kane
Full Name (Last, First, Middle Initial)

Mailing Address 9524 Purcell Drive

City Potomac	State MD	Zip Code 20854
-----------------	-------------	-------------------

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

Name of Employer International Limousine Servic	Occupation Owner
--	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2013

Transaction ID : SA11AI.5542

Amount of Each Receipt this Period
250.00

C. Mark Mollica
Full Name (Last, First, Middle Initial)

Mailing Address 25 Bond Street

City Haverhill	State MA	Zip Code 01835
-------------------	-------------	-------------------

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

Name of Employer Black Tie Limousine	Occupation President
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	03	/	2013

Transaction ID : SA11AI.5467

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 26
	<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)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Jerry Robbins		Date of Receipt MM / DD / YYYY 07 / 26 / 2013 Transaction ID : SA11AI.5491
Mailing Address 16 Edgewater Lane P.O. Box 278		Amount of Each Receipt this Period 100.00
City Hampstead	State NH	
Zip Code 03841		Aggregate Year-to-Date ▼ 650.00
FEC ID number of contributing federal political committee. C		
Name of Employer Weldon Worldwide	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jerry Robbins		Date of Receipt MM / DD / YYYY 08 / 27 / 2013 Transaction ID : SA11AI.5528
Mailing Address 16 Edgewater Lane P.O. Box 278		Amount of Each Receipt this Period 100.00
City Hampstead	State NH	
Zip Code 03841		Aggregate Year-to-Date ▼ 750.00
FEC ID number of contributing federal political committee. C		
Name of Employer Weldon Worldwide	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jerry Robbins		Date of Receipt MM / DD / YYYY 09 / 26 / 2013 Transaction ID : SA11AI.5560
Mailing Address 16 Edgewater Lane P.O. Box 278		Amount of Each Receipt this Period 100.00
City Hampstead	State NH	
Zip Code 03841		Aggregate Year-to-Date ▼ 850.00
FEC ID number of contributing federal political committee. C		
Name of Employer Weldon Worldwide	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 21 OF 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

A. Jonna Sabroff
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 6960
 City State Zip Code
 Beverly Hills CA 90212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Integrated Transportation Serv President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2013
Transaction ID : SA11AI.5472
 Amount of Each Receipt this Period
 100.00

B. Jonna Sabroff
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 6960
 City State Zip Code
 Beverly Hills CA 90212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Integrated Transportation Serv President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2013
Transaction ID : SA11AI.5505
 Amount of Each Receipt this Period
 100.00

C. Jonna Sabroff
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 6960
 City State Zip Code
 Beverly Hills CA 90212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Integrated Transportation Serv President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2013
Transaction ID : SA11AI.5539
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 OF 26
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Dave Shaw		Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 Transaction ID : SA11AI.5463
Mailing Address 6183 South Westview Drive		Amount of Each Receipt this Period 100.00
City Homosassa	State FL	Zip Code 34448
FEC ID number of contributing federal political committee.	C	
Name of Employer Olympus Limousine	Occupation Operations Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Dave Shaw		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 Transaction ID : SA11AI.5495
Mailing Address 6183 South Westview Drive		Amount of Each Receipt this Period 100.00
City Homosassa	State FL	Zip Code 34448
FEC ID number of contributing federal political committee.	C	
Name of Employer Olympus Limousine	Occupation Operations Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Dave Shaw		Date of Receipt M M / D D / Y Y Y Y Y 09 / 03 / 2013 Transaction ID : SA11AI.5531
Mailing Address 6183 South Westview Drive		Amount of Each Receipt this Period 100.00
City Homosassa	State FL	Zip Code 34448
FEC ID number of contributing federal political committee.	C	
Name of Employer Olympus Limousine	Occupation Operations Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 23 OF 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Michael Solomon

Mailing Address 10636 49th Street NW

City State Zip Code
 Chuqiak AK 99567

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

Name of Employer Occupation
 USA Transportation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2013

Transaction ID : SA11AI.5487

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. Michael Solomon

Mailing Address 10636 49th Street NW

City State Zip Code
 Chuqiak AK 99567

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

Name of Employer Occupation
 USA Transportation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2013

Transaction ID : SA11AI.5523

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
C. Michael Solomon

Mailing Address 10636 49th Street NW

City State Zip Code
 Chuqiak AK 99567

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

Name of Employer Occupation
 USA Transportation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2013

Transaction ID : SA11AI.5555

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 24 OF 26
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

A. Shane Stickel
Full Name (Last, First, Middle Initial)

Mailing Address 8295 E. 28th Avenue

City Denver	State CO	Zip Code 80238
----------------	-------------	-------------------

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

Name of Employer Presidential Worldwide Transpo	Occupation Owner
--	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2013

Transaction ID : SA11AI.5533

Amount of Each Receipt this Period
25.00

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	25.00
TOTAL This Period (last page this line number only).....▶	7825.00

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens Bank

Mailing Address 791 E. Route 70

City Marlton State NJ Zip Code 08053

Purpose of Disbursement
Merchant Bnkcd Fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2013

Transaction ID : SB21B.5459

Amount of Each Disbursement this Period

73.10

Full Name (Last, First, Middle Initial)

B. Citizens Bank

Mailing Address 791 E. Route 70

City Marlton State NJ Zip Code 08053

Purpose of Disbursement
Merchant Bnkcd Fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 05 / 2013

Transaction ID : SB21B.5499

Amount of Each Disbursement this Period

83.52

Full Name (Last, First, Middle Initial)

C. Citizens Bank

Mailing Address 791 E. Route 70

City Marlton State NJ Zip Code 08053

Purpose of Disbursement
Merchant Bnkcd Fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2013

Transaction ID : SB21B.5563

Amount of Each Disbursement this Period

87.99

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

244.61

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

244.61

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	<input type="checkbox"/> 30b

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)

National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. CORY BOOKER FOR SENATE

Mailing Address PO BOX 32237

City NEWARK State NJ Zip Code 07102

Purpose of Disbursement
Contribution to Cory Booker for Senate

011

Category/
Type

Candidate Name

CORY BOOKER FOR SENATE

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Special-Primary

State: NJ District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2013

Transaction ID : SB23.5561

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

1000.00

1000.00
