

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED  
FED MAIL  
OPERATIONS CENTER

2002 OCT 25 A 11:11 b

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12FE4365

Taxicab, Limousine & Paratransit Association Political Action Committee

ADDRESS (number and street)

3849 Farragut Avenue

Check if different than previously reported. (ACC)

Kennington

MD

20895

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C 00132480

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- 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)
- 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) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on

11 05 2002

In the State of

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

11 05 2002

In the State of

6. Covering Period

10 01 2002

through

10 16 2002

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 LAHASSE

Signature of Treasurer

Date

10 23 2002

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 6457g.

Office Use Only

FEC FORM 3X (Revised 1/01)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Write or Type Committee Name  
Taxicab, Limousine & Paratransit Association Political Action Committee

Report Covering the Period: From: 10 01 2002 To: 10 16 2002

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, 2002   |                         | 43579.65                          |
| (b) Cash on Hand at Beginning of Reporting Period   | 36979.65                |                                   |
| (c) Total Receipts (from Line 19)   | 1400.00                 | 12950.00                          |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)      | 38379.65                | 56529.65                          |
| 7. Total Disbursements (from Line 30)   | 0.00                    | 18150.00                          |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))                 | 38379.65                | 38379.65                          |
| 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)

Write or Type Committee Name

Taxicab, Limousine & Paratransit Association Political Action Committee

Report Covering the Period: From: 10 01 2002

To: 10 16 2002

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees<br>(i) Itemized (use Schedule A) .....         | 14,000.00                     |                                   |
| (ii) Unitemized .....  |                               |                                   |
| (b) TOTAL (add Lines 11(a)(i) and (ii) .....   | 14,000.00                     | 12,950.00                         |
| (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) .....   | 14,000.00                     | 12,950.00                         |
| 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 Accounts for Joint Activity .....  |                               |                                   |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....                             | 14,000.00                     | 12,950.00                         |
| 20. Total Federal Receipts (subtract Line 16 from Line 19) .....                                       | 14,000.00                     | 12,950.00                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Revised 1/01)

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....          | 0.00                          | 18,150.00                         |
| 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) .....           | 0.00                          | 18,150.00                         |
| 31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30) .....                      | 0.00                          | 18,150.00                         |
| <b>III. Net Contributions/Operating Expenditures</b>   |                               |                                   |
| 32. Total Contributions (other than loans) (from Line 11(d), page 3) .....                       | 14,000.00                     | 12,950.00                         |
| 33. Total Contribution Refunds (from Line 28(d)) .....   |                               |                                   |
| 34. Net Contributions (other than loans) (subtract Line 33 from Line 32) .....                   | 14,000.00                     | 12,950.00                         |
| 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) .....                             |                               |                                   |

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

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 1 OF 2  
 (check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sent 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. Campalongo, James D.

Mailing Address

1307 Royal Ct.

City

Jefferson Hills

State

PA

Zip Code

15025

FEC ID number of contributing federal political committee

C

Date of Receipt

10 / 15 / 2002

Amount of Each Receipt this Period

500.00

Name of Employer

Pittsburgh Transportation

Occupation

Vice Pres

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

B. Worth, Robert M.

Mailing Address

5414 Thetford Place

City

Alexandria

State

VA

Zip Code

22310

FEC ID number of contributing federal political committee

C

Date of Receipt

10 / 15 / 2002

Amount of Each Receipt this Period

300.00

Name of Employer

Diamond Transportation

Occupation

Pres

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Full Name (Last, First, Middle Initial)

C. McJannet, James J.

Mailing Address

8206 Meade Street

City

Alexandria

State

VA

Zip Code

22308

FEC ID number of contributing federal political committee

C

Date of Receipt

10 / 15 / 2002

Amount of Each Receipt this Period

300.00

Name of Employer

Southeast Transit Mgt.

Occupation

Pres

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

SUBTOTAL of Receipts This Page (optional) ▶

1,100.00

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)

|   |                              |                              |                             |
|---|------------------------------|------------------------------|-----------------------------|
| <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. Dart, James S.

Mailing Address

1700 N. Florida Mango Rd.

City

W. Palm Beach

State

FL

Zip Code

33409

FEC ID number of contributing federal political committee

C

Date of Receipt

10 / 15 / 2002

Amount of Each Receipt this Period

300.00

Name of Employer

Palm Beach Transportation

Occupation

General Mgr.

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

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) ▶

300.00

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

1400.00

# 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)

PAGE 1 OF 1

|                              |                             |  |                              |                             |
|------------------------------|-----------------------------|--|------------------------------|-----------------------------|
| <input type="checkbox"/> 21a | <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"/> 29 |

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NAME OF COMMITTEE (In Full)

Taxicab, Limousine & Paratransit Association Political Action Committee

Full Name (Last, First, Middle Initial)

A.

Date of Disbursement

|    |    |      |
|----|----|------|
| MM | DD | YYYY |
|----|----|------|

Mailing Address

Amount of Each Disbursement this Period

|        |
|--------|
| Amount |
|--------|

City State Zip Code

Purpose of Disbursement

|               |
|---------------|
| Category/Type |
|---------------|

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

|    |    |      |
|----|----|------|
| MM | DD | YYYY |
|----|----|------|

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Amount of Each Disbursement this Period

|        |
|--------|
| Amount |
|--------|

City State Zip Code

Purpose of Disbursement

|               |
|---------------|
| Category/Type |
|---------------|

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

|    |    |      |
|----|----|------|
| MM | DD | YYYY |
|----|----|------|

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Amount of Each Disbursement this Period

|        |
|--------|
| Amount |
|--------|

City State Zip Code

Purpose of Disbursement

|               |
|---------------|
| Category/Type |
|---------------|

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) .....

|          |
|----------|
| Subtotal |
| Total    |

