

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

AUG 8 1 45 PM '97

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (No. full) C00132480 101689  
ALFRED B LAGASSE III  
INTERNATIONAL TAXICAB ASSOCIAT  
ION POLITICAL ACTION COMMITTEE  
3849 FARRAGUT AVE  
KENSINGTON MD 20895

2. FEC IDENTIFICATION NUMBER

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

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report

### Monthly Report Due On:

- February 20  June 20  October 20  
 March 20  July 20  November 20  
 April 20  August 20  December 20  
 May 20  September 20  January 31

- 12-Day Pre-Election Report for the \_\_\_\_\_  
(Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- 30-Day Post-Election Report following the General Election  
on \_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

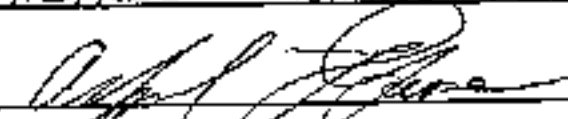
SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>1/1/97</u> through <u>6/30/97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>		\$ 16,878.31
(b) Cash on Hand at Beginning of Reporting Period	\$ 16,878.31	
(c) Total Receipts (from Line 19)	\$ 8,200.00	\$ 8,200.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 25,078.31	\$ 25,078.31
7. Total Disbursements (from Line 30)	\$ 17,500.00	\$ 17,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 7,578.31	\$ 7,578.31
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ - 0 -	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ - 0 -	

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



Date

7/31/97

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

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FEC FORM 3X  
(revised 9/93)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
<i>International Taxpayers and Young Associates Political Action Committee</i>	FROM	TO	
	<i>Jan 1, 1997</i>	<i>June 30, 1997</i>	
Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	8,800 <sup>00</sup>	8,200 <sup>00</sup>	11(a)
ii. Unitemized			11(b)
iii. Total (add i and ii) >			11(c)
b. Political Party Committees			11(d)
c. Other Political Committees (such as PACs)			11(e)
d. Total Contributions (add a ii, b and c) >	8,200 <sup>00</sup>	8,200 <sup>00</sup>	11(f)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	8,200 <sup>00</sup>	8,200 <sup>00</sup>	19
20. Total Federal Receipts (subtract line 18 from line 19) >	8,200 <sup>00</sup>	8,200 <sup>00</sup>	20
<b>Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	17,500 <sup>00</sup>	17,500 <sup>00</sup>	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	17,500 <sup>00</sup>	17,500 <sup>00</sup>	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	17,500 <sup>00</sup>	17,500 <sup>00</sup>	31
<b>Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d)	8,200 <sup>00</sup>	8,200 <sup>00</sup>	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans) (subtract line 33 from 32)	8,200 <sup>00</sup>	8,200 <sup>00</sup>	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) >			37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE      OF       
FOR LINE NUMBER

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

NAME OF COMMITTEE (In Full)  
*International Taxicab and Trolley Association Political Action Committee*

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
<i>Michael Levine, 22-09 Queens Plaza N. Long Island City, NY 11101</i>	<i>Ronart Leasing Corp</i>	<i>1/31/97</i>	<i>1,000<sup>00</sup></i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>G.M.</i>	Aggregate Year-to-Date > \$	
<i>Perrais Karim 330 S. Geneva St. Waukegan, IL 60079</i>	<i>Lake County Transportation System</i>	<i>1/31/97</i>	<i>300<sup>00</sup></i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres</i>	Aggregate Year-to-Date > \$	
<i>Carl Wood 629 York St Newport, KY 41071</i>	<i>Yellow Cab Co.</i>	<i>1/31/97</i>	<i>500<sup>00</sup></i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres</i>	Aggregate Year-to-Date > \$	
<i>Ellis Houston 7202 Irvington Blvd Houston, TX 77022</i>	<i>United Cab Co.</i>	<i>2/14/97</i>	<i>500<sup>00</sup></i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres.</i>	Aggregate Year-to-Date > \$	
<i>Neal Nichols 3251 Washington Blvd. Arlington, VA 22201</i>	<i>Transportation General, Inc</i>	<i>2/14/97</i>	<i>2,500<sup>00</sup></i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres</i>	Aggregate Year-to-Date > \$	
<i>Lee Barnes 4900 Nicholson Ct. Kensington, MD 20895</i>	<i>Barwood</i>	<i>2/28/97</i>	<i>2,500<sup>00</sup></i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>EX. V.P.</i>	Aggregate Year-to-Date > \$	
<i>William Knaus P.O. Box 201 Bethel Park, PA 15102</i>	<i>Colonial</i>	<i>6/13/97</i>	<i>300<sup>00</sup></i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>consultant</i>	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) ..... *7,600*

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE      OF       
FOR LINE NUMBER

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**NAME OF COMMITTEE (In Full)**

*International Taxicab and Limousine Association Political Action Committee*

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
<i>Alfred L. Hase 3349 Farragut Ave Kensington, MD 20895</i>	<i>Int'l Taxicab &amp; Limousine Assn Occupation: <i>EX. U.P.</i></i>	<i>6/13/97</i>	<i>300<sup>00</sup></i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
<i>Jocelyn Upate 259 South Blvd. Oak Park, IL 60302</i>	<i>Blue Cab Occupation: <i>Pres</i></i>	<i>6/30/97</i>	<i>300<sup>00</sup></i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

**SUBTOTAL** of Receipts This Page (optional) ..... *600<sup>00</sup>*

**TOTAL** This Period (last page this line number only) ..... *8,200<sup>00</sup>*

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	FOR LINE NUMBER	

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NAME OF COMMITTEE (In Full)  
*International Taxicab and Limousine Association Political Action Committee*

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>The Bud Shuster for Congress Comm. P.O. Box 25703 Alexandria, VA 22313</i>	<i>support re-election to House -- PA</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>1/15/97 6/4/97</i>	<i>2,000<sup>00</sup> 1,000<sup>00</sup></i>
<i>The Jan Christensen for Congress Comm. 12127 Darnley Rd Woodbridge, VA 22192</i>	<i>support re-election to House -- NE</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>1/31/97 4/24/97</i>	<i>2,000<sup>00</sup> 1,000<sup>00</sup></i>
<i>Friends of Jennifer Dunn P.O. Box 70513 Washington, DC 20024</i>	<i>support re-election to House -- WA</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>1/31/97</i>	<i>1,000<sup>00</sup></i>
<i>Tom Davis for Congress P.O. Box 483 Dunn Farm, VA 22027</i>	<i>support re-election to House -- VA</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>1/31/97</i>	<i>5,000<sup>00</sup></i>
<i>Christopher Cox Congressional Comm. P.O. Box 8088 Newport Beach, CA 92658</i>	<i>support re-election to House -- CA</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>1/31/97</i>	<i>1,000<sup>00</sup></i>
<i>Tom DeJoy Congressional Comm. c/o Craig Richardson 901 N. Stuart St. #250, Arlington VA 22203</i>	<i>support re-election to House -- TX</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>2/24/97</i>	<i>1,000<sup>00</sup></i>
<i>Petri for Congress 4451 Brookfield Rd #200 Chantilly, VA 20151</i>	<i>support re-election to House -- WI</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>4/24/97</i>	<i>1,000<sup>00</sup></i>
<i>Hutchinson for Senate 4451 Brookfield Dr # 200 Chantilly, VA 20151</i>	<i>support re-election to Senate -- AR</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/12/97</i>	<i>1,500<sup>00</sup></i>
<i>Friends of Senator D'Amato 6 Highland Ave. Dix Hills, NY 11746</i>	<i>support re-election to Senate -- NY</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>6/4/97</i>	<i>1,000<sup>00</sup></i>

SUBTOTAL of Disbursements This Page (optional) .....	
TOTAL This Period (last page this line number only) .....	<i>17,500<sup>00</sup></i>

