

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2008 DEC -5 PM 1:34
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

TAXI CAB LIMOUSINE & PARATRANSIT ASSOCIATION
POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

3200 TOWER OAKS BLVD SUITE 220

Check if different than previously reported. (ACC)

ROCKVILLE MD 20852

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00132480

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

Election on

MM / DD / YYYY

in the State of

XX

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

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

Election on

MM / DD / YYYY

in the State of

XX

5. Covering Period

10 / 01 / 2008

through

11 / 24 / 2008

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

12 / 04 / 2008

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

FEC FORM 3X
Rev. 12/2004

28039942341

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 10 / 01 / 2008 To: 11 / 24 / 2008

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2008		67,232.15
(b) Cash on Hand at Beginning of Reporting Period.....	74,525.55	
(c) Total Receipts (from Line 19)	46,750.00	26,450.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	79,200.55	93,682.15
7. Total Disbursements (from Line 31)	56,209.40	20,102.54
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	73,579.61	73,579.61
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

28039942342

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 08/2004)

Page 3

Write or Type Committee Name

TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: **10** ' **01** ' **2008** To: **11** ' **24** ' **2008**

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).....	3750.00	25500.00
(ii) Unitemized.....	925.00	950.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4675.00	26450.00
(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 33, page 5).....▶	4675.00	26450.00
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 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	4675.00	26450.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4675.00	26450.00

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DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

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		
(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.....	5,620.94	20,102.54
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (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. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5,620.94	20,102.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5,620.94	20,102.54

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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)	4,675.00	26,450.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4,675.00	26,450.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

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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 3	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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. Gaddis, Michael		Date of Receipt 11 / 05 / 2008
Mailing Address P.O. Box 950		Amount of Each Receipt this Period 500.00
City FT. Lauderdale	State Zip Code FL 33302	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 500.00
Name of Employer Yellow Cab Co.	Occupation Transportation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Hauck, Gene R		Date of Receipt 11 / 05 / 2008
Mailing Address 4952 N. Arrow Crest Way		Amount of Each Receipt this Period 500.00
City Boise	State Zip Code ID 83703	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 500.00
Name of Employer SuperShuttle	Occupation Transportation Exec.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Joseph, Mark L.		Date of Receipt 11 / 05 / 2008
Mailing Address 2100 Huntingdon Ave.		Amount of Each Receipt this Period 750.00
City Baltimore	State Zip Code MD 21211	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 750.00
Name of Employer Veolia Transportation	Occupation Transportation Exec.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

28039942346

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE <u>2</u> OF <u>3</u>							
	(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. **Rakestraw, Stanley C.**

Mailing Address
8801 S. Greenwood Ave.

City **Chicago** State **IL** Zip Code **60619**

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

Name of Employer **SCR Medical Transp.** Occupation **Transportation Executive**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **500.00**

Date of Receipt
11 / **05** / **2008**

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. **Werth, Robert M.**

Mailing Address
7311 B. Highland St

City **Springfield** State **VA** Zip Code **22150**

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

Name of Employer **Diamond Transportation** Occupation **Transport. Exec.**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **500.00**

Date of Receipt
11 / **05** / **2008**

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. **Suzystan, Judith O.**

Mailing Address
6304 Sewells Point Rd.

City **Norfolk** State **VA** Zip Code **23513**

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

Name of Employer **Black & White Cars** Occupation **Transport. Exec.**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **1500.00**

Date of Receipt
11 / **07** / **2008**

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶ **500.00**

TOTAL This Period (last page this line number only).....▶ **500.00**

28039942347

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

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

FOR LINE NUMBER: PAGE 3 OF 3
(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

A. Full Name (Last, First, Middle Initial)
Rosenberg, Murray

Mailing Address
3401 Winchester Ave

City *Atlantic City* State *NJ* Zip Code *08401*

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

Name of Employer *Yellow Cab* Occupation *Transportation Executive*

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 18 / 2008

Amount of Each Receipt this Period
500.00

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

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

Amount of Each Receipt this Period

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

TOTAL This Period (last page this line number only).....▶ **3750.00**

28039942348

**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 2

<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

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NAME OF COMMITTEE (In Full)

TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A.

Duncan for Congress
Mailing Address
c/o Don Walker, 1318 Dewitt Ave.
City *Alexandria* State *VA* Zip Code *22301*
Purpose of Disbursement *contribution*
Candidate Name *John Duncan*
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ∇
State: *TN* District: *2*

Date of Disbursement
10 / **28** / **2008**
Amount of Each Disbursement this Period
2000.00
Category/Type
011

B.

Costello for Congress Committee
Mailing Address
P.O. Box 8250
City *Belleville* State *IL* Zip Code *62222*
Purpose of Disbursement *contribution*
Candidate Name *Ferry Costello*
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ∇
State: *IL* District: *12*

Date of Disbursement
10 / **28** / **2008**
Amount of Each Disbursement this Period
3000.00
Category/Type
011

C.

Taxicab, Limousine & Paratransit Assn.
Mailing Address
3200 Tower Oaks Blvd. #220
City *Rochville* State *MD* Zip Code *20852*
Purpose of Disbursement *in-kind contribution*
Candidate Name *Ferry Costello*
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ∇
State: *IL* District: *12*
in-kind contribution for catering

Date of Disbursement
11 / **24** / **2008**
Amount of Each Disbursement this Period
3104.7
Category/Type
003

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

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

.....
.....

28039942349

**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 2 OF 2				
	<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

A.

Full Name (Last, First, Middle Initial)
Typicat, Limousine & Paratransit Assn

Date of Disbursement
MM / DD / YYYY
11 / 24 / 2008

Mailing Address
3200 Tower Oaks Blvd. # 220

City
Rockville State
MD Zip Code
20852

Purpose of Disbursement
in-kind contribution

Candidate Name
John Duncan Category/Type
003

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) *in-kind contribution category*

State: *TN* District: *2*

Amount of Each Disbursement this Period
31047

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period

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

TOTAL This Period (last page this line number only).....▶ **562094**

28039942350

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *FedEx* Shipping Date
12/4/08
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

Jms *12/5/08*
 PREPARER DATE PREPARED
 (3/2005)

28039942351