

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER

2002 DEC 9 3:05

1. NAME OF COMMITTEE (a) (b) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines. 12PE4M5

Taxicab, Limousine & Paratransit Association Political Action Committee

ADDRESS (number and street) 3869 Farragut Avenue

Check if different than previously reported. (ACC) Kensington M.D. 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 (TR)

- (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11)
Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12)
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 in the State of

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on in the State of

5. Covering Period 10/17/2002 through 11/25/2002

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 LAGASSE

Signature of Treasurer Date 12/09/2002

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 6437g.

Office Use Only FEC FORM 3X (Revised 1/01)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form SX (Revised 1/01)

Page 2

Write or Type Committee Name

Taxicab, Limousine & Paratransit Association Political Action Committee

Report Covering the Period:

From:

10 17 2002

To:

11 25 2002

COLUMN A
This Period

COLUMN B
Calendar Year-to-Date

8. (a) Cash on Hand January 1, 2002		43579.65
(b) Cash on Hand at Beginning of Reporting Period	38379.65	
(c) Total Receipts (from Line 19)	3529.00	16479.00
(d) Subtotal (add Lines 8(b) and 8(c) for Column A and Lines 8(a) and 8(c) for Column B)	41908.65	60058.65
7. Total Disbursements (from Line 30)	2000.00	20150.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))	39908.65	39908.65
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:

10/17/2002

To:

11/25/2002

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)	2600.00	
(ii) Unitemized	729.00	
(ii) TOTAL (add Lines 11(a)(i) and (ii)	3529.00	16479.00
(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)	3529.00	16479.00
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	3529.00	16479.00
20. Total Federal Receipts (subtract Line 18 from Line 19)	3529.00	16479.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4):		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	2,000.00	20,150.00
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)	2,000.00	20,150.00
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)	2,000.00	20,150.00

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans) (from Line 11(d), page 3)	3,529.00	16,479.00
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	3,529.00	16,479.00
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 1

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (in full)

Taxicab, Limousine & Paratransit Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. *Mongello, Guy J.*

Mailing Address

5982 106th Terr. N.

City

Pinellas Park

State

FL

Zip Code

33782

FEC ID number of contributing federal political committee

C

Date of Receipt

10 / 24 / 2002

Amount of Each Receipt This Period

300.00

Name of Employer

Paradise Limousine Co.

Occupation

Pres.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Full Name (Last, First, Middle Initial)

B. *Genovese, Frank J.*

Mailing Address

8903 Pine Lane

City

Magnolia

State

TX

Zip Code

77354

FEC ID number of contributing federal political committee

C

Date of Receipt

10 / 24 / 2002

Amount of Each Receipt This Period

300.00

Name of Employer

Coch USA

Occupation

Vice Pres

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Full Name (Last, First, Middle Initial)

C. *Barnes, H. Lee*

Mailing Address

5708 Trafton Place

City

Bethesda

State

MD

Zip Code

20817

FEC ID number of contributing federal political committee

C

Date of Receipt

10 / 24 / 2002

Amount of Each Receipt This Period

2000.00

Name of Employer

Barnard Inc.

Occupation

Pres.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2600.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28	<input type="checkbox"/> 29	<input type="checkbox"/> 30
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 29a	<input type="checkbox"/> 29b	<input type="checkbox"/> 30

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NAME OF COMMITTEE (In Full)

Taxicab, Limousine & Paratransit Association Political Action Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. Allard for Senate

10 / 27 / 2002

Mailing Address

507 Capital Ct, NE #100

City State Zip Code

Washington DC 20002

Amount of Each Disbursement this Period

2,000.00

Purpose of Disbursement

re-election fundraiser

011

Category/Type

Candidate Name

Wayne Allard

Office Sought

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: CO

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

B.

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

C.

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/Type

Candidate Name

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)

2,000.00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 12/19/02
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	12/19/02 DATE PREPARED