

2006 FEB -7 A 1 47

Office Use Only

**FEC  
FORM 3X**

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

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)

3849 FARRAGUT AVENUE

Check if different than previously reported. (ACC)

KENSINGTON

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

Election on

MM / DD / YYYY

in the State of

CA

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

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

Election on

MM / DD / YYYY

in the State of

CA

5. Covering Period

07 / 01 / 2005

through

12 / 31 / 2005

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

01 / 31 / 2006

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

260338441

**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: 07 / 01 / 2005 To: 12 / 31 / 2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">2005</span>		<span style="border: 1px solid black; padding: 2px;">3160865</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">2579621</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">2160000</span>	<span style="border: 1px solid black; padding: 2px;">2652500</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<span style="border: 1px solid black; padding: 2px;">4739621</span>	<span style="border: 1px solid black; padding: 2px;">5813365</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">476906</span>	<span style="border: 1px solid black; padding: 2px;">1550650</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">4262715</span>	<span style="border: 1px solid black; padding: 2px;">4262715</span>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">000</span>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">000</span>	

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

260386442

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

**TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE**

Report Covering the Period: From: **07** ' **01** ' **2005** To: **07** ' **01** ' **2005**

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).....	17,900.00	22,600.00
(ii) Unitemized.....	3,700.00	3,925.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	21,600.00	26,525.00
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(ii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	21,600.00	26,525.00
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)).....▶	21,600.00	26,525.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	21,600.00	26,525.00

2603898443

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	650	650
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	650	650
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	476256	15500.00
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 .....	476906	1550650
(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))..	476906	1550650
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		

2603898444

**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) .....		
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4,769.56	15,500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	650	650
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....		

250388445

**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 11	
	<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

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. **ARRIGHI, Thomas**

Mailing Address  
**1001 Bedford St.**

City **Bridgewater** State **MA** Zip Code **02324**

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

Name of Employer **A & A Metro Transportation** Occupation **Pres.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**09 / 22 / 2005**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
B. **BARNES, H. LEE**

Mailing Address  
**4900 Nicholson Ct.**

City **Kensington, 1** State **MD** Zip Code **20895**

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

Name of Employer **Barwood Inc** Occupation **Pres.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**11 / 05 / 2005**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
C. **BARR, James**

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**

Name of Employer **Palm Beach Transportation** Occupation **Sales Manager**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**11 / 05 / 2005**

Amount of Each Receipt this Period  
**500.00**

SUBTOTAL of Receipts This Page (optional)..... **1,500.00**

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

20050908446

**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 2 OF 11	
	<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. **Bites, Craig**

Mailing Address  
**1557 Swift**

City State Zip Code  
**N. Kansas City MO 64116**

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

Name of Employer Occupation  
**Northtown Cab Pres.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5,000.00**

Date of Receipt  
**11 05 2005**

Amount of Each Receipt this Period  
**5,000.00**

Full Name (Last, First, Middle Initial)  
B. **CAMBAS, Nicholas**

Mailing Address  
**16117 US 19 N. Suite A**

City State Zip Code  
**Clearwater FL 33764**

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

Name of Employer Occupation  
**Transportation Contract Svcs. Pres.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5,000.00**

Date of Receipt  
**09 22 2005**

Amount of Each Receipt this Period  
**5,000.00**

Full Name (Last, First, Middle Initial)  
C. **CAMPOLONGO, James**

Mailing Address  
**1301 Beaver Ave.**

City State Zip Code  
**Pittsburgh PA 15233**

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

Name of Employer Occupation  
**Pittsburgh Transportation Group Pres.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5,000.00**

Date of Receipt  
**09 22 2005**

Amount of Each Receipt this Period  
**5,000.00**

SUBTOTAL of Receipts This Page (optional) ..... **15,000.00**

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

2603898447

**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 3 OF 11	
	<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

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**

**A. CHERNOW, Joseph**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **1406 Hays St.**  
 City: **Houston** State: **TX** Zip Code: **77009**  
 Name of Employer: **Greater Houston Transportation** Occupation: **Pres**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: **500.00**

Date of Receipt: **10/07/2005**  
 Amount of Each Receipt this Period: **500.00**

**B. CIRRUZZO, Joseph**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **1140 Bay St**  
 City: **Staten Island** State: **NY** Zip Code: **10305**  
 Name of Employer: **A Elegant Intl Limo** Occupation: **Pres**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: **850.00**

Date of Receipt: **11/05/2005**  
 Amount of Each Receipt this Period: **500.00**  
**350.00**

**C. Fogarty, Michael**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **69 Norman St.**  
 City: **Everett** State: **MA** Zip Code: **02149**  
 Name of Employer: **Boston Coach** Occupation: **V.P.**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: **500.00**

Date of Receipt: **10/07/2005**  
 Amount of Each Receipt this Period: **500.00**

**SUBTOTAL of Receipts This Page (optional):** **1850.00**  
**TOTAL This Period (last page this line number only):**

2503898448



**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 4 OF 11	
	<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, Jess**

Mailing Address  
**P.O. Box 950**

City **Ft. Lauderdale** State **FL** Zip Code **33302**

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

Name of Employer **Yellow Cab** Occupation **Chairman**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**10** / **07** / **2005**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address  
**P.O. Box 950**

City **Ft. Lauderdale** State **FL** Zip Code **33302**

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

Name of Employer **Yellow Cab** Occupation **Pres.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**11** / **14** / **2005**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
C. **HAUCK, Gene**

Mailing Address  
**531 Van Ness**

City **Torrance** State **CA** Zip Code **90501**

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

Name of Employer **Super Shuttle L.A.** Occupation **V.P.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**11** / **05** / **2005**

Amount of Each Receipt this Period  
**500.00**

SUBTOTAL of Receipts This Page (optional)..... **1500.00**

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

2503898449

**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 5 OF 11	
	<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

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**

A. Full Name (Last, First, Middle Initial)  
**JOSEPH, Mark**

Mailing Address  
**2100 Huntingdon Ave.**

City **Baltimore** State **MD** Zip Code **21211**

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

Name of Employer **Yellow Transportation** Occupation **Pres**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**11 / 14 / 2005**

Amount of Each Receipt this Period  
**500.00**

B. Full Name (Last, First, Middle Initial)  
**KINES, Dwight**

Mailing Address  
**2100 Huntingdon Ave**

City **Baltimore** State **MD** Zip Code **21211**

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

Name of Employer **Yellow Transportation** Occupation **General Manager**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**11 / 05 / 2005**

Amount of Each Receipt this Period  
**500.00**

C. Full Name (Last, First, Middle Initial)  
**LAGASSE, Alfred**

Mailing Address  
**3849 Farragut Ave**

City **Kensington** State **MD** Zip Code **20895**

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

Name of Employer **Taxicab, Limo & Paratransit Assn** Occupation **Exec. V.P.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**07 / 29 / 2005**

Amount of Each Receipt this Period  
**500.00**

SUBTOTAL of Receipts This Page (optional).....▶ **1500.00**

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

26038984450

**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 6 OF 11	
	<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**

A. Full Name (Last, First, Middle Initial)  
**LAZAR, John**

Mailing Address  
**2230 Ferrell Ave**

City **San Francisco** State **CA** Zip Code **94124**

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

Name of Employer **Luxor Cab** Occupation **Pres.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**600.00**

Date of Receipt  
**10** / **07** / **2005**

Amount of Each Receipt this Period  
**500.00**  
**100.00**

B. Full Name (Last, First, Middle Initial)  
**LEONAS, Daniel**

Mailing Address  
**29 Arvon St.**

City **Lewiston** State **ME** Zip Code **04240**

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

Name of Employer **City Cab** Occupation **Pres.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**07** / **29** / **2005**

Amount of Each Receipt this Period  
**500.00**

C. Full Name (Last, First, Middle Initial)  
**McBRIDE, Brian**

Mailing Address  
**2069 W. Third St.**

City **Cleveland** State **OH** Zip Code **44113**

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

Name of Employer **Yellow Cab** Occupation **Pres.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**750.00**

Date of Receipt  
**07** / **06** / **2005**

Amount of Each Receipt this Period  
**750.00**

SUBTOTAL of Receipts This Page (optional) ..... **1850.00**

TOTAL This Period (last page this line number only) ..... **1850.00**

25038984451

**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 7 OF 11	
	<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**

A. Full Name (Last, First, Middle Initial)  
**McBRIDE, Robert**

Mailing Address  
**P.O. Box 5028**

City State Zip Code  
**Denver, CO 80217**

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

Name of Employer Occupation  
**Metro Taxi Pres**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**12 23 2005**

Amount of Each Receipt this Period  
**500.00**

B. Full Name (Last, First, Middle Initial)  
**McLARY, James**

Mailing Address  
**17419 Four Seasons Dr.**

City State Zip Code  
**Dumfries VA 22026**

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

Name of Employer Occupation  
**McJury Management Pres**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**10 07 2005**

Amount of Each Receipt this Period  
**500.00**

C. Full Name (Last, First, Middle Initial)  
**MELLEARD, Harlan**

Mailing Address  
**1200 Mississippi St.**

City State Zip Code  
**San Francisco CA 94107**

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

Name of Employer Occupation  
**Yellow Cab Cooperative Pres.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**07 06 2005**

Amount of Each Receipt this Period  
**500.00**

SUBTOTAL of Receipts This Page (optional).....▶ **1500.00**

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

26038984452

**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 11	
	<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**

A. Full Name (Last, First, Middle Initial)  
**VALMERI, Anthony**

Mailing Address  
**3473 Kurtz St.**

City **San Diego** State **CA** Zip Code **92110**

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

Name of Employer **Yellow Cab** Occupation **Pres.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**07** / **29** / **2005**

Amount of Each Receipt this Period  
**500.00**

B. Full Name (Last, First, Middle Initial)  
**RAKESTRAW, Stan**

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 **Pres**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**09** / **22** / **2005**

Amount of Each Receipt this Period  
**500.00**

C. 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 **Pres.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**09** / **22** / **2005**

Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional) ..... **1,500.00**

**TOTAL** This Period (last page this line number only) ..... **1,500.00**

25038984453

**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 11	
	<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

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**

A. Full Name (Last, First, Middle Initial)  
**ROUSE, Mitchell**

Mailing Address  
**2129 W. Rosecrans Ave**

City **Gardena** State **CA** Zip Code **90249**

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

Name of Employer **LA Yellow Cab Co-op** Occupation **Ord. Member**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**07 20 2005**

Amount of Each Receipt this Period  
**500.00**

B. Full Name (Last, First, Middle Initial)  
**SMYTHE, William III**

Mailing Address  
**581 S. Second St**

City **Memphis** State **TN** Zip Code **38126**

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

Name of Employer **Yellow Cab** Occupation **Pres.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**11 05 2005**

Amount of Each Receipt this Period  
**500.00**

C. Full Name (Last, First, Middle Initial)  
**SOMERMAN, Brian**

Mailing Address  
**333 Jenkintown Commons**

City **Jenkintown** State **PA** Zip Code **19046**

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

Name of Employer **Alpha Management** Occupation **Pres.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**10 07 2005**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....▶ **2000.00**

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

25038584254

**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 11	
	<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

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**

A. Full Name (Last, First, Middle Initial)  
**THOMPSON, Jo-Anne**

Mailing Address  
**167 Franklin St.**

City **Framingham** State **MA** Zip Code **01702**

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

Name of Employer **Tommy's Taxi** Occupation **Pres.**

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date **350.00**

Date of Receipt  
**12 / 23 / 2005**

Amount of Each Receipt this Period  
**200.00**

B. Full Name (Last, First, Middle Initial)  
**UGASTE, Jodyln**

Mailing Address  
**7417 Roosevelt Rd**

City **Forest Park** State **IL** Zip Code **60130**

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

Name of Employer **Blue Cab** Occupation **Pd. Member**

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date **500.00**

Date of Receipt  
**11 / 05 / 2005**

Amount of Each Receipt this Period  
**500.00**

C. Full Name (Last, First, Middle Initial)  
**WATSON, Sheri**

Mailing Address  
**1512 Marsh Ave**

City **Kansas City** State **MO** Zip Code **64126**

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

Name of Employer **Check Transportation** Occupation **Pres**

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date **500.00**

Date of Receipt  
**07 / 20 / 2005**

Amount of Each Receipt this Period  
**500.00**

SUBTOTAL of Receipts This Page (optional) **1200.00**

TOTAL This Period (last page this line number only)

26038984455

**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 11	
	<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**

A. Full Name (Last, First, Middle Initial)  
**WERTH, Robert**

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 **Pres.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**11 05 2005**

Amount of Each Receipt this Period  
**500.00**

B. Full Name (Last, First, Middle Initial)  
**WIER, Brian**

Mailing Address  
**14500 N. Northlight Blvd**

City **Scottsdale** State **AZ** Zip Code **85261**

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

Name of Employer **Super Shuttle Corp.** Occupation **CEO**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**07 06 2005**

Amount of Each Receipt this Period  
**500.00**

C. Full Name (Last, First, Middle Initial)  
**ZILBER, Martin**

Mailing Address  
**4607 W. 61st St.**

City **Little Rock** State **AR** Zip Code **72209**

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

Name of Employer **Yellow Cab** Occupation **Ms. Member**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**11 14 2005**

Amount of Each Receipt this Period  
**500.00**

SUBTOTAL of Receipts This Page (optional) **1,500.00**

TOTAL This Period (last page this line number only) **1,890.00**

250338984456



**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)

**TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A.** Road to Victory PAC  
Mailing Address  
1155 21st St, NW #300  
City Washington State DC Zip Code 20036  
Purpose of Disbursement contribution  
Candidate Name \_\_\_\_\_  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) contribution  
State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

07 / 20 / 2005

Amount of Each Disbursement this Period

762.56

**B.** Changing Tides Committee  
Mailing Address  
507 Capitol Ct. NE #100  
City Washington State DC Zip Code 20002  
Purpose of Disbursement contribution  
Candidate Name \_\_\_\_\_  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) contribution  
State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

07 / 20 / 2005

Amount of Each Disbursement this Period

2000.00

**C.** Citizens for Tom Petri  
Mailing Address  
P.O. Box 270  
City Fond du Lac State WI Zip Code 54936  
Purpose of Disbursement contribution  
Candidate Name Tom Petri  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
State: WI District: 6

Date of Disbursement

09 / 29 / 2005

Amount of Each Disbursement this Period

1000.00

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

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

4262.56

25038984457

**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)

**TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

09 / 29 / 2005

A.

**Badger Fund**

Mailing Address

1707 Prince St #5

City

Alexandria

State

VA

Zip Code

22314

Purpose of Disbursement

contribution

011

Category/  
Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) contribution

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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).....

4,762.56

26038884456

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked <i>1-31-06</i>
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*Jm D*  
 PREPARER  
 (3/2005)

*2-7-06*  
 DATE PREPARED

28038884459