



TAXICAB, LIMOUSINE &
PARATRANSIT ASSOCIATION

Representing taxicab, limousine, sedan, airport
shuttle, paratransit, & non-emergency medical
fleets worldwide.

August 29, 2001

Ms. Andrea Needles
Senior Reports Analyst
Federal Election Commission
999 E Street, N.W.
Washington, DC 20463

RE: Amended Reports for C00132480
Taxicab, Limousine & Paratransit Association Political Action Committee

RECEIVED
FED MAIL ROOM
2001 AUG 30 P 12:04

Dear Ms. Needles:

This letter is in response to your letter of August 1 and Mr. Gibson's letter of August 23, each inquiring about the accuracy of our April Quarterly Report for January 1, 2000 through March 31, 2000.

Thank you for calling that report to our attention. In researching this matter, it turns out that we made a few errors and omissions that are now corrected on the enclosed amended reports for filings originally made for the time periods January 1 through June 30, 1999; January 1 through March 31, 2000; April 1 through June 30, 2000; and July 1 through September 30, 2000. In each case either no designation was made allocating the contribution to a primary or general election or the incorrect designation was made. The enclosed amended reports correct these errors and omissions.

To assist you in your review, the specific corrections made on each of the enclosed amended reports are as follows:

- Jan. 1 - June 30, 1999: Schedule B was corrected to designate: 1) all \$5,000 that was contributed to the Bud Shuster for Congress Committee as a disbursement for the primary election, 2) the \$1,000 contribution to Citizens for Tom Petri as a disbursement for the general election.
- Jan. 1 - March 31, 2000: Schedule B was corrected to designate the \$2,000 that was contributed to the Bud Shuster for Congress Committee as a disbursement for the general election.
- April 1 - June 30, 2000: Schedule B was corrected to designate the \$1,000 contribution to Citizens for Tom Petri as a disbursement for the general election.
- July 1 - Sept. 30, 2000: Schedule B was corrected to designate the \$3,000 that was contributed to the Bud Shuster for Congress Committee as a disbursement for the general election.

No other changes were made to the amended reports.

Ms. Andrea Needles

August 29, 2001

Page 2

I apologize for not responding to you sooner. Our organization is very small with a staff of five people for the entire association. Also, I have been out of town for most of August. I was attending our Mid-Year Conference in Colorado when your letter arrived and then I took my personal vacation in South Carolina. Since I am the only person on staff that works on PAC issues, the letter was placed in a file for me to address upon my return. I returned to Washington on August 16 and before I responded to your first letter, I received Mr. Gibson's follow up letter. If we had a larger staff, or if I was not traveling for the first half of August, you would have received a very prompt response.

If you have any questions concerning this matter or our amended reports, please call me.

Sincerely,



Alfred LaGasse
Executive Vice President

Enclosures

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2001 AUG 30 P 12:04

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) INTERNATIONAL TAXICAB ASSOCIATION POLITICAL ACTION COMMITTEE	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 3849 FARRAGUT AVE.	2. FEC IDENTIFICATION NUMBER C00132480
CITY, STATE and ZIP CODE KENSINGTON, MD 20895	3. <input type="checkbox"/> 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:


- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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>1/1/99</u> through <u>6/30/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ 31,826.65
(b) Cash on Hand at Beginning of Reporting Period	\$ 31,826.65	
(c) Total Receipts (from Line 10)	\$ 1,200.00	\$ 1,200.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 33,026.65	\$ 33,026.65
7. Total Disbursements (from Line 20)	\$ 6,000.00	\$ 6,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 27,026.65	\$ 27,026.65
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 20488 Toll Free 800-424-9530 Local 202-694-1100
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	Date 8/29/01
Signature of Treasurer 	

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 8X

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
INTERNATIONAL TAXICAB ASSOCIATIONAL POLITICAL ACTION COMMITTEE		FROM 1/1/99	TO: 6/30/99
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11.	Contributions (other than loans) From:		
a.	Individuals/Persons Other Than Political Committees		
i.	Itemized (use Schedule A)	1,200 ⁰⁰	1,200 ⁰⁰
ii.	Unitemized		
iii.	Total (add i and ii) >	1,200 ⁰⁰	1,200 ⁰⁰
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contributions (add a, b and c) >		
12.	Transfers From Affiliated/Other Party Committees		
13.	All Loans Received		
14.	Loan Repayments Received		
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
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	1,200 ⁰⁰	1,200 ⁰⁰
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	1,200 ⁰⁰	1,200 ⁰⁰
20.	Total Federal Receipts (subtract line 18 from line 19) >		
II. Disbursements			
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 a, i, and b) >		
22.	Transfers to Affiliated/Other Party Committees	6,000 ⁰⁰	6,000 ⁰⁰
23.	Contributions to Federal Candidates/Committees and Other Political Committees		
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 a, b and c) >		
29.	Other Disbursements		
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		
31.	Total Federal Disbursements (subtract line 21 a, ii from line 30) >		
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	1,200 ⁰⁰	1,200 ⁰⁰
33.	Total Contribution Refunds (from line 28d)		
34.	Net Contributions (other than loans)(subtract line 33 from 32)	1,200 ⁰⁰	1,200 ⁰⁰
35.	Total Federal Operating Expenditures (add 21 a, i and 21 b) >		
36.	Offsets to Operating Expenditures (from line 15)		
37.	Net Operating Expenditures (subtract line 36 from 35) >		

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 committees.

NAME OF COMMITTEE (In Full)

INTERNATIONAL TAXICAB ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code
 Ellis Houston
 7202 Livingston Blvd.
 Houston, TX 77022

Receipt For: Primary General
 Other (specify):

Name of Employer
 United Cab

Occupation
 Vice Pres.

Aggregate Year-to-Date > \$ 500⁰⁰

Date (month, day, year)
 6/30/99

Amount of Each Receipt this Period
 500⁰⁰

B. Full Name, Mailing Address and ZIP Code
 Martin Zilber
 1995 NE 142nd St.
 N. Miami, FL 33181

Receipt For: Primary General
 Other (specify):

Name of Employer
 Metro Transportation Services

Occupation
 Vice Pres.

Aggregate Year-to-Date > \$ 400⁰⁰

Date (month, day, year)
 6/30/99

Amount of Each Receipt this Period
 400⁰⁰

C. Full Name, Mailing Address and ZIP Code
 Alfred J. Moore
 3849 Farragut Ave.
 Kensington, MD 20895

Receipt For: Primary General
 Other (specify):

Name of Employer
 Intl Taxicat & Livery Assn.

Occupation

Aggregate Year-to-Date > \$ 300⁰⁰

Date (month, day, year)
 6/30/99

Amount of Each Receipt this Period
 300⁰⁰

D. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > \$

Date (month, day, year)

Amount of Each Receipt this Period

E. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > \$

Date (month, day, year)

Amount of Each Receipt this Period

F. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > \$

Date (month, day, year)

Amount of Each Receipt this Period

G. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > \$

Date (month, day, year)

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1,200⁰⁰

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 23 OF 23
FOR LINE NUMBER 23

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 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
Bud Shuster for Congress Comm. P.O. Box 25703 Alexandria, VA 22313	support re-election to U.S. House - from PA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/26/99 6/21/99	2,000 ⁰⁰ 3,000 ⁰⁰
Citizens for Tom Petri 4451 Brookefield Corp. Dr. #200 Chantilly, VA 20151	support re-election to U.S. House - from WI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/3/99	1,000 ⁰⁰
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

6,000⁰⁰

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 <i>8-30-01</i>
<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	
<i>[Signature]</i> PREPARER	<i>8-30-01</i> DATE PREPARED