

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER 2016 OCT 13 AM 9:38

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 ROCKVILLE MD 20852

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C00132480

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 07 01 2016 through 09 30 2016

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 [Signature] Date 10 12 2016

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

2016 OCT 13 AM 9:38

**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: To:

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---|---|
| 6. (a) Cash on Hand January 1, <input type="text" value="2016"/> | | <input type="text" value="79,211.49"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="747,114.9"/> | |
| (c) Total Receipts (from Line 19)..... | <input type="text" value="125,200.00"/> | <input type="text" value="155,200.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="872,314.9"/> | <input type="text" value="947,314.9"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="700,000.00"/> | <input type="text" value="145,000.00"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="802,314.9"/> | <input type="text" value="802,314.9"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | <input type="text" value="000"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | <input type="text" value="000"/> | |

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 (Rev. 06/2004)

Page 3

Write or Type Committee Name

TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

MM ' DD ' YYYY
07 ' 01 ' 2016

To:

MM ' DD ' YYYY
09 ' 30 ' 2016

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)..... | 12,520.00 | 15,520.00 |
| (ii) Unitemized..... | | |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 12,520.00 | 15,520.00 |
| (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).....▶ | 12,520.00 | 15,520.00 |
| 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..... | 0.00 | 0.00 |
| 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)).....▶ | 12,520.00 | 15,520.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 12,520.00 | 15,520.00 |

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 | | |
| (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 | 7,000.00 | 14,500.00 |
| 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 | | |
| (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)) .. | 7,000.00 | 14,500.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) | 7,000.00 | 14,500.00 |

NON-FEDERAL SHARE

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) | 7,000.00 | 14,500.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | | |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 7,000.00 | 14,500.00 |
| 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) | | |

NOV 10 10 00 AM '03

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 7 | | | | | |
| | (check only one) | | | | | |
| | <input checked="" type="checkbox"/> 11a 13 | <input type="checkbox"/> 11b 14 | <input type="checkbox"/> 11c 15 | <input type="checkbox"/> 12 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. SMYTHE, WILLIAM, H

Mailing Address

5815 Second St.

City

Memphis

State

TN

Zip Code

38126

FEC ID number of contributing federal political committee.

C

Date of Receipt

08 / 04 / 2016

Amount of Each Receipt this Period

500.00

Name of Employer

Premier Transportation Services

Occupation

Transportation Executive

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

B. Goldstein, Ira

Mailing Address

30 Wall St.

City

New York

State

NY

Zip Code

10005

FEC ID number of contributing federal political committee.

C

Date of Receipt

08 / 04 / 2016

Amount of Each Receipt this Period

500.00

Name of Employer

Black Car Fund

Occupation

Transportation Executive

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

C. Swygsten, Judith

Mailing Address

6304 Sewells Point Rd

City

Norfolk

State

VA

Zip Code

23513

FEC ID number of contributing federal political committee.

C

Date of Receipt

08 / 04 / 2016

Amount of Each Receipt this Period

500.00

Name of Employer

Black & White Cars

Occupation

Transportation Exec.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

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

1,500.00

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

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

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

FOR LINE NUMBER: PAGE **2** OF **7**

(check only one)

11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Wilde, Lorrain C

Mailing Address
P.O. Box 950

City State Zip Code
Ft. Lauderdale FL 33302

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
To Airport Shuttle Transportation Executive

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 / 04 / 2016

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Carns, Charles E

Mailing Address
324 W. Gore St

City State Zip Code
Orlando FL 32806

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
Moore Destination Services Transportation Exec

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 / 04 / 2016

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Cocher, Elizabeth P

Mailing Address
5804 Oponte Madrid Blvd

City State Zip Code
Birmingham AL 35210

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
Yellow Cab Transportation Executive

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1,000.00

Date of Receipt
08 / 19 / 2016

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).....▶

2016-10-11 11:00:00 AM

**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 7 (check only one) |
| | <input checked="" type="checkbox"/> 11a 13 <input type="checkbox"/> 11b 14 <input type="checkbox"/> 11c 15 <input type="checkbox"/> 12 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. Fogarty, Michael J. | | Date of Receipt 08 / 19 / 2016 |
| Mailing Address 100 Cummings Center #225-G | | Amount of Each Receipt this Period 500.00 |
| City Beverly | State Zip Code MA 01915 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Triester | Occupation Transportation Executive | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 500.00 |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Houston, Ellis W | | Date of Receipt 08 / 19 / 2016 |
| Mailing Address 5804 Oporto Madrid Blvd S | | Amount of Each Receipt this Period 500.00 |
| City Birmingham | State Zip Code AL 35210 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Yellow Cab | Occupation Transportation Exec. | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 500.00 |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Mohabbi, David | | Date of Receipt 08 / 19 / 2016 |
| Mailing Address 9210 Beechcraft Ave. | | Amount of Each Receipt this Period 500.00 |
| City Bethesda | State Zip Code MD 20879 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Regency Taxi | Occupation Transportation Exec. | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 500.00 |

| | |
|---|-----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1,500.00 |
| TOTAL This Period (last page this line number only).....▶ | 1,500.00 |

2016-08-19 10:10:00 AM

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

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

FOR LINE NUMBER: PAGE **4** OF **7**
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)

TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. *Yuhake, William G.*

Mailing Address

1524 Kenmore Ave

City

Buffalo

State

NY

Zip Code

14216

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 / 02 / 2016

Amount of Each Receipt this Period

500.00

Name of Employer

Liberty Cab

Occupation

Transportation Exec

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

B. *Carey, Jeb N*

Mailing Address

1410 Lewis St.

City

Charleston

State

WV

Zip Code

25301

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 / 12 / 2016

Amount of Each Receipt this Period

500.00

Name of Employer

C & H Taxi

Occupation

Transportation Exec.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

C. *Griffin, Judith F*

Mailing Address

16557 Mass Ct.

City

Fort Myers

State

FL

Zip Code

33912

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 / 12 / 2016

Amount of Each Receipt this Period

500.00

Name of Employer

SWE Transportation Group

Occupation

Transportation Exec.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

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

1500.00

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

**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 7 |
| | <input checked="" type="checkbox"/> 11a 13 | <input type="checkbox"/> 11b 14 |
| | <input type="checkbox"/> 11c 15 | <input type="checkbox"/> 12 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) Kahessa, Anika | | Date of Receipt 09 / 12 / 2016 |
| Mailing Address 2642 Broadway | | Amount of Each Receipt this Period 500.00 |
| City New York | State Zip Code NY 10025 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Fast Operating Corp. | Occupation Transportation Exec. | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |

| | | |
|---|---|---|
| B. Full Name (Last, First, Middle Initial) Pattor, Judith M. | | Date of Receipt 09 / 12 / 2016 |
| Mailing Address 4665 W. Bancroft St | | Amount of Each Receipt this Period 1,500.00 |
| City Toledo | State Zip Code OH 43615 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Black & White Transportation | Occupation Transportation Exec. | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1,500.00 | |

| | | |
|---|---|---|
| C. Full Name (Last, First, Middle Initial) Whittle, Bradley E. | | Date of Receipt 09 / 12 / 2016 |
| Mailing Address 7500 E. 41st Ave | | Amount of Each Receipt this Period 500.00 |
| City Denver | State Zip Code CO 80216 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Yellow Cab | Occupation Transportation Exec. | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |

| | |
|---|-----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2,500.00 |
| TOTAL This Period (last page this line number only).....▶ | |

2010-10-14 10:00:00

**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 7 |
| | <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)
Arzghi, Thomas P

Mailing Address
1001 Bedford St

City
Bridgewater State
MA Zip Code
02324

FEC ID number of contributing federal political committee.
C

Name of Employer
Billy's Taxi Occupation
Transportation Exec.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09' 30' 2016

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Burd, David J

Mailing Address
14500 N. Northlight Blvd # 329

City
Scottsdale State
AZ Zip Code
85260

FEC ID number of contributing federal political committee.
C

Name of Employer
Super Shuttle Occupation
Transportation Exec.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt
09' 30' 2016

Amount of Each Receipt this Period
520.00

C. Full Name (Last, First, Middle Initial)
Camras, Nicholas A

Mailing Address
17174 U.S. 19 N.

City
Clearwater State
FL Zip Code
33764

FEC ID number of contributing federal political committee.
C

Name of Employer
United Taxi Occupation
Transportation Exec.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09' 30' 2016

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶ **1,520.00**

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

2016-10-14 11:00 AM

**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 7 |
| | <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. Palmer, Anthony M | | Date of Receipt 09' 30' 2016 |
| Mailing Address 3473 Kutz St. | | Amount of Each Receipt this Period 500.00 |
| City San Diego | State Zip Code CA 92110 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Yellow Cab | Occupation Transportation Exec | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Scalzi, William | | Date of Receipt 09' 30' 2016 |
| Mailing Address 65 Industry Dr. | | Amount of Each Receipt this Period 1,500.00 |
| City West Haven | State Zip Code CT 06516 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1,500.00 |
| Name of Employer Metro Taxi | Occupation Transportation Exec | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1,500.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Slagle, Larry E | | Date of Receipt 09' 30' 2016 |
| Mailing Address 13591 Harbor Blvd. | | Amount of Each Receipt this Period 500.00 |
| City Garden Grove | State Zip Code CA 92843 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Yellow Cab of Greater Orange County | Occupation Transportation Exec | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |

| | |
|---|------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2500.00 |
| TOTAL This Period (last page this line number only).....▶ | 1,2520.00 |

**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 OF |
| | <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

A. **Meadows for Congress**
 Mailing Address: **P.O. Box 368**
 City: **Falls Church** State: **VA** Zip Code: **22040**
 Purpose of Disbursement: **contribution**
 Candidate Name: **Mark Meadows** Category/Type: **011**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: **NC** District: **11**
 Date of Disbursement: **09/08/2016**
 Amount of Each Disbursement this Period: **2000.00**

B. **Friends of Roy Blunt**
 Mailing Address: **209 Pennsylvania Ave, SE**
 City: **Washington** State: **DC** Zip Code: **20003**
 Purpose of Disbursement: **Contribution**
 Candidate Name: **Roy Blunt** Category/Type: **011**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: **MO** District:
 Date of Disbursement: **09/12/2016**
 Amount of Each Disbursement this Period: **2500.00**

C. **Volunteers for Shinkus**
 Mailing Address: **499 S. Capital St SW #420**
 City: **Washington** State: **DC** Zip Code: **20003**
 Purpose of Disbursement: **contribution**
 Candidate Name: **John Shinkus** Category/Type: **011**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: **IL** District: **15**
 Date of Disbursement: **09/12/2016**
 Amount of Each Disbursement this Period: **2500.00**

SUBTOTAL of Disbursements This Page (optional).....
 TOTAL This Period (last page this line number only).....
7,000.00

2016-09-14 10:00:00 AM

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 779 8005 2128 9243
 TRK 8005 2128 9243
 FEDEX
 DC-US IAD
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 STANDARD OVERNIGHT

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FedEx NEW Package Express
US Airbill

FedEx Tracking Number
8005 2128 9243

1 From This portion can be removed for Recipient's records.
 Date 10-12-16 FedEx Tracking Number 800521289243

Sender's Name ALFRED LAGASSE Phone 301 984-5700
 Company T L P ASSOCIATION
 Address 3200 TOWER OAKS BLVD STE 220
 City ROCKVILLE State MD ZIP 20852-4265
Dept./Floor/Suite/Room

2 Your Internal Billing Reference

3 To Recipient's Name Public Records Office Phone 970 424-9530

Company Federal Election Commission

Address 999 E St. NW
 We cannot deliver to P.O. boxes or P.O. ZIP codes.
Dept./Floor/Suite/Room

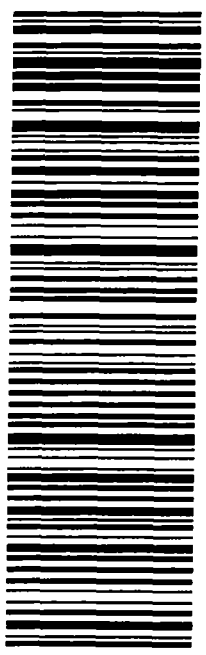
Address Washington
 Use this line for the HOLD location address or for continuation of your shipping address.

City Washington State DC ZIP 205463

0450961144



8005 2128 9243



FID 14115 120CT16 GA1A 539C3/FB42/8EBA

- 4 Express Pack[®]
 NOTE: Service order #
- Next Business Day**
- FedEx First Overnite
Excludes next business morning delivery unless SAT/DAY/DELIVERY is selected.
 - FedEx Priority Overnight
Next business morning. *Friday shipments will be delivered on Monday unless SAT/DAY/DELIVERY is selected.
 - FedEx Standard Overnight
Next business day. *Secondary Delivery NOT available.

- 5 Packaging *Declared value limit \$200
- FedEx Envelope[®]
 - FedEx Pak[®]
 - FedEx Box
 - FedEx Tube
 - Other

- 6 Special Handling and Delivery Signature Options
- SATURDAY Delivery
NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.
 - No Signature Required
Package may be left without obtaining a signature for delivery.
 - Direct Signature
Someone at recipient's address may sign for delivery. Fee applies.
 - Indirect Signature
Drop box is available at recipient's address, someone at a neighboring address may sign for delivery. Fee applies. Residential deliveries only. Fee applies.

- Does this shipment contain dangerous goods?
- No
 - Yes
- One box must be checked.
- As per attached Shipper's Declaration (not required)
 - Dry Ice (Dry Ice 3.0, UN 1845)
 - Cargo Aircraft Only
- Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Drop Box.

- 7 Payment Bill to:
- Sender
Account No. & Section
 - Recipient
 - Third Party
 - Credit Card
 - Cash/Check
- Obtain recip. Acct. No.

Total Packages 1 Total Weight 1 lbs.
 Credit Card Acct. 6777

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

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| <input type="checkbox"/> USPS First Class Mail | Date of Receipt |
| <input type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) |
| <input type="checkbox"/> USPS Priority Mail | Postmarked |
| <input type="checkbox"/> USPS Priority Mail Express | Postmarked |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> No Postmark | |
| <input checked="" type="checkbox"/> Overnight Delivery Service (Specify): | Shipping Date |
| <i>FEDEX</i> | <i>10/12/16</i> |
| 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 |

PREPARER

(3/2015)



DATE PREPARED

10/13/16

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