

**FEC  
FORM 3X**

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

RECEIVED  
FEC MAIL CENTER  
2020 JAN 31 AM 9:36  
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

TAXI CAB LIMOUSINE & PARATRANSIT ASSOCIATION  
POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

3200 TOWER OAKS BLVD SUITE 220

Check if different than previously reported. (ACC)

ROCKVILLE MD 20852

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00132480

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

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

Election on  /  /  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

07 / 01 / 2019

through

12 / 31 / 2019

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 / 30 / 2020

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

**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** ' **2019** To: **12** ' **31** ' **2019**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2019</b>		<b>104,731.49</b>
(b) Cash on Hand at Beginning of Reporting Period.....	<b>105,231.49</b>	
(c) Total Receipts (from Line 19) .....	<b>11,000.00</b>	<b>15,000.00</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<b>116,231.49</b>	<b>119,731.49</b>
7. Total Disbursements (from Line 31) .....	<b>0.00</b>	<b>3500.00</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<b>116,231.49</b>	<b>116,231.49</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<b>0.00</b>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<b>0.00</b>	

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: 07 01 2019 To: 12 31 2019

**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).....

8500.00

12500.00

(ii) Unitemized.....

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

8500.00

12500.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

2500.00

2500.00

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

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)).....▶

15000.00

15000.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

15000.00

15000.00

11,000.00

**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.....	0.00	3500.00
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))..	0.00	3500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	3500.00

**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) .....
- 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) .....

0.00
0.00

3500.00
3500.00

NONO CHIMON GOVORAWA

**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 6

(check only one)

11a  11b  11c  12  
13 14 15 16 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)  
*Roldstein, Ira*

Mailing Address  
*30 Wall Street, 10th FL*

City *New York* State *NY* Zip Code *10005*

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

Name of Employer *The Black Car Fund* Occupation *Transportation Exec.*

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
*500.00*

Date of Receipt  
*07 / 03 / 2019*

Amount of Each Receipt this Period  
*500.00*

**B.** Full Name (Last, First, Middle Initial)  
*Bird, 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 ▼  
*500.00*

Date of Receipt  
*07 / 03 / 2019*

Amount of Each Receipt this Period  
*500.00*

**C.** Full Name (Last, First, Middle Initial)  
*Carey, Jeb*

Mailing Address  
*1410 Lewis St*

City *Charleston* State *WV* Zip Code *25301*

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

Name of Employer *C & H Taxi* Occupation *Transportation Exec.*

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
*500.00*

Date of Receipt  
*07 / 19 / 2019*

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).....▶

**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 <u>2</u> OF <u>6</u>
	<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	<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. <b>Van der Lide, William F.</b>		Date of Receipt <b>07 / 19 / 2019</b>
Mailing Address <b>1515 6th St. SE</b>		Amount of Each Receipt this Period <b>500.00</b>
City <b>Charlottesville</b>	State Zip Code <b>VA 22902</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>Yellow Cab</b>	Occupation <b>Transportation Exec</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

Full Name (Last, First, Middle Initial) B. <b>Arrighi, Thomas P.</b>		Date of Receipt <b>08 / 27 / 2019</b>
Mailing Address <b>1001 Bedford St</b>		Amount of Each Receipt this Period <b>500.00</b>
City <b>Bridgewater</b>	State Zip Code <b>MA 02324</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>A &amp; A Metro Transportation</b>	Occupation <b>Transportation Exec.</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

Full Name (Last, First, Middle Initial) C. <b>Campolongo, James D.</b>		Date of Receipt <b>09 / 23 / 2019</b>
Mailing Address <b>1825 Liverpool St.</b>		Amount of Each Receipt this Period <b>500.00</b>
City <b>Pittsburgh</b>	State Zip Code <b>PA 15233</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>Pittsburgh Transportation</b>	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

SUBTOTAL of Receipts This Page (optional).....	<b>1500.00</b>
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 3 OF 6

(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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. Spearce, David M.

Mailing Address

1406 Hays St.

City

Houston

State

TX

Zip Code

77009

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 / 23 / 2019

Amount of Each Receipt this Period

500.00

Name of Employer

Yellow Cab

Occupation

Transportation Exec.

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

B. Yubanka, Wallace 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 / 23 / 2019

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)

C. Fogarty, Michael

Mailing Address

100 Cummings Center # 225G

City

Beverly

State

MA

Zip Code

01915

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 / 23 / 2019

Amount of Each Receipt this Period

500.00

Name of Employer

Tripstar Services U.S.

Occupation

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).....▶

1,500.00



**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 6  
 (check only one)  
 11a  11b  11c  12  
 13 14 15 16 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. *Dauer, Jason*

Mailing Address

2710 E. Washington St

City

Phoenix

State

AZ

Zip Code

85034

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 23 2019

Amount of Each Receipt this Period

500.00

Name of Employer

VIP Taxi

Occupation

Transportation Exec.

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

B. *Scalzo, William C*

Mailing Address

65 Industry Dr.

City

West Haven

State

CT

Zip Code

06514

FEC ID number of contributing federal political committee.

C

Date of Receipt

10 11 2019

Amount of Each Receipt this Period

500.00

Name of Employer

M7

Occupation

Transportation Exec.

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

C. *Amato, Sam*

Mailing Address

1550 Gilbreth Rd

City

Burlingame

State

CA

Zip Code

94010

FEC ID number of contributing federal political committee.

C

Date of Receipt

10 29 2019

Amount of Each Receipt this Period

500.00

Name of Employer

Gateway Global

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: PAGE **5** OF **10**  
(check only one)  
 11a  11b  11c  12  
13 14 15 16 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)  
**Hewatt, Richard C**

Mailing Address  
**563 Trobest Ave, NW**

City **Atlanta** State **GA** Zip Code **30309**

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

Name of Employer **Checker Cab** Occupation **Transportation Exec.**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **500.00**

Date of Receipt

**10** / **29** / **2019**

Amount of Each Receipt this Period

**500.00**

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

Mailing Address  
**5909 E. 38th Ave**

City **Denver** State **CO** Zip Code **80207**

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

Name of Employer **Metro Taxi** Occupation **Transportation Exec.**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **500.00**

Date of Receipt

**10** / **29** / **2019**

Amount of Each Receipt this Period

**500.00**

C. Full Name (Last, First, Middle Initial)  
**Potter, Judith M**

Mailing Address  
**4665 W. Bancroft St**

City **Toledo** State **OH** Zip Code **43615**

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

Name of Employer **Black & White Taxis** Occupation **Taxi Exec.**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **500.00**

Date of Receipt

**10** / **29** / **2019**

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**

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

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

FOR LINE NUMBER: PAGE 6 OF 6  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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, William J**

Mailing Address  
**2129 Rosecrans Ave**

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

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

Name of Employer **L.A. Yellow Cab Co-op** Occupation **Transportation Exec**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **500.00**

Date of Receipt  
**10 / 29 / 2019**

Amount of Each Receipt this Period  
**500.00**

B. Full Name (Last, First, Middle Initial)  
**Swedel, Alan**

Mailing Address  
**4299 Cranwood Phury**

City **Cleveland** State **OH** Zip Code **44128**

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

Name of Employer **Provide A Ride** Occupation **Transp. Exec.**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **500.00**

Date of Receipt  
**11 / 15 / 2019**

Amount of Each Receipt this Period  
**500.00**

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

**1,000.00**

**8,500.00**

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

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE / OF

(check only one)

11a  11b  11c  12  
 13  14  15  16  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)  
**Texas Taxi PAC**

Mailing Address  
**919 Congress Ave #1500**

City **Austin** State **TX** Zip Code **78701**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2500.00**

Date of Receipt  
**10 / 11 / 2019**

Amount of Each Receipt this Period  
**2500.00**

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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

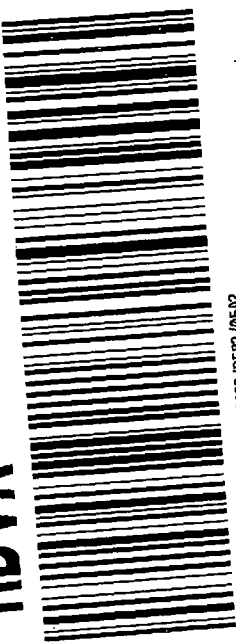
**2500.00**

FRI - 31 JAN AA  
STANDARD OVERNIGHT

FedEx  
TRK# 8111 6747 8559  
0215

20463  
DC-US  
IAD

19 RDVA



4 Express Package

Next Business Day  
FedEx First Overnight  
FedEx Priority Overnight  
FedEx Standard Overnight  
FedEx 2Day

FID 3694397 30JAN20 CALA 55ACZ/DPEZ/0512  
Second business morning.  
Saturday Delivery NOT available.

FedEx Priority Overnight  
FedEx Standard Overnight  
FedEx 2Day  
FedEx Express Saver  
FedEx Tube

Special Handling and Delivery Signature Options  
Saturday Delivery  
No Signature Required  
Direct Signature  
Indirect Signature

5 Packaging  
FedEx Envelope\*  
FedEx Pak\*  
FedEx Box  
FedEx Tube  
Other

6 Special Handling and Delivery Signature Options  
Saturday Delivery  
No Signature Required  
Direct Signature  
Indirect Signature

7 Payment Bill to:  
Sender  
Recipient  
Third Party  
Credit Card  
Cash/Check

Total Packages Total Weight lbs.

8111 6747 8559

0215

0125727282

8111 6747 8559

0125727282

8111 6747 8559

0125727282

8111 6747 8559

0125727282

8111 6747 8559

0125727282

8111 6747 8559

0125727282

8111 6747 8559

0125727282

8111 6747 8559

0125727282

8111 6747 8559

0125727282

8111 6747 8559



FedEx®  
Express  
Package  
US Airbill

1 From  
Date 1-31-20  
Sender's Name  
Address  
City  
State  
ZIP

Recipient's Name  
Address  
City  
State  
ZIP

Company  
Address  
City  
State  
ZIP

Address  
City  
State  
ZIP

Address  
City  
State  
ZIP

Address  
City  
State  
ZIP

Address  
City  
State  
ZIP

Address  
City  
State  
ZIP

Address  
City  
State  
ZIP

Address  
City  
State  
ZIP

Address  
City  
State  
ZIP

Address  
City  
State  
ZIP

Address  
City  
State  
ZIP

Address  
City  
State  
ZIP

Insert shipping document here

fedex.com 1.800.GoFedEx 1.800.463.3339


fedex.com 1.800.GoFedEx 1.800.463.3339

06328045

8111 6747 8559

Rev. Date 5/15 • Part #15134 • ©1994-2015 FedEx • PRINTED IN U.S.A. 58M

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 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): <i>FED-EX</i>	Shipping Date <i>1-30-20</i>
	Next Business Day Delivery <input checked="" 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
<div style="display: flex; justify-content: space-between;"> <div style="text-align: left;">                   PREPARER                  (3/2015)             </div> <div style="text-align: right;"> <i>1-31-20</i>                  DATE PREPARED             </div> </div>	

NONO OF THE WA BOARD