

**FEC
FORM 3X**

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

RECEIVED

2014 OCT 30 AM 10:56

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)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11)
(Non-Election
Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12)
(Non-Election
Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the
State of

State

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



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the
State of

State

5. Covering Period

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

through

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

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

Alfred Lagasse

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

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:

10 ' 01 ' 2014

To:

10 ' 15 ' 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		117,703.99
(b) Cash on Hand at Beginning of Reporting Period.....	100,091.49	
(c) Total Receipts (from Line 19)	1,000.00	9,387.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	101,091.49	127,091.49
7. Total Disbursements (from Line 31)	21,000.00	47,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	80,091.49	80,091.49
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

10 / 01 / 2014

To:

10 / 15 / 2010

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).....

1,000.00

3,750.00

(ii) Unitemized.....

0.00

6,375.00

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

1,000.00

4,387.50

(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. 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.).....

0.00

5,000.00

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)).....▶

1,000.00

9,387.50

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

1,000.00

9,387.50

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	21,000.00	47,000.00
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)) ..	21,000.00	47,000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	21,000.00	47,000.00

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)	21,000.00	47,000.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21,000.00	47,000.00
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)		

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 / OF /

☒ 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. **Kines, Dwight R**

Mailing Address

2100 Huntington Ave

City

Baltimore

State

MD

Zip Code

21211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Veolia Transportation

Occupation

Transportation Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 13 / 2014

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. **Lagar, John M**

Mailing Address

2230 Ferrol Ave.

City

San Francisco

State

CA

Zip Code

94124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Luxor Cab

Occupation

Transportation Exec.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 13 / 2014

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C.

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

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 1 OF 4

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. *Duncan for Congress*
Mailing Address: *P.O. Box 2646*
City: *Knoxville* State: *TN* Zip Code: *37901*
Purpose of Disbursement: *contribution* Category/Type: *011*
Candidate Name: *John Duncan*
Office Sought: ☒ House ☐ Senate ☐ President Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ☐
State: *TN* District: *2*

Date of Disbursement: *10/10/2014*
Amount of Each Disbursement this Period: *1500.00*

B. *Sam Graves for Congress*
Mailing Address: *499 S. Capitol St, SW #420*
City: *Washington* State: *DC* Zip Code: *20003*
Purpose of Disbursement: *contribution* Category/Type: *011*
Candidate Name: *Sam Graves*
Office Sought: ☒ House ☐ Senate ☐ President Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ☐
State: *MD* District: *6*

Date of Disbursement: *10/10/2014*
Amount of Each Disbursement this Period: *1000.00*

C. *Shinkus for Congress*
Mailing Address: *499 S. Capitol St, SW #420*
City: *Washington* State: *DC* Zip Code: *20003*
Purpose of Disbursement: *contribution* Category/Type: *011*
Candidate Name: *John Shinkus*
Office Sought: ☒ House ☐ Senate ☐ President Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ☐
State: *IL* District: *15*

Date of Disbursement: *10/10/2014*
Amount of Each Disbursement this Period: *2000.00*

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

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

4500.00

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 <u>2</u> OF <u>4</u>			
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b

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

A. **Roy Blunt Leadership PAC**
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) **MD** District: **1**
Date of Disbursement: **10/10/2014**
Amount of Each Disbursement this Period: **25000.00**

B. **McConnell Senate Committee '14**
Mailing Address: **P.O. Box 1496**
City: **Louisville** State: **KY** Zip Code: **40201**
Purpose of Disbursement: **contribution**
Candidate Name: **Mitch McConnell** Category/Type: **011**
Office Sought: ☒ House ☐ Senate ☐ President Disbursement For: ☐ Primary ☒ General ☐ Other (specify) **KY** District: **1**
Date of Disbursement: **10/10/2014**
Amount of Each Disbursement this Period: **50000.00**

C. **Anna Eshoo for Congress**
Mailing Address: **555 Bryant St, P.O. Box 335**
City: **Palo Alto** State: **CA** Zip Code: **94301**
Purpose of Disbursement: **contribution**
Candidate Name: **Anna Eshoo** Category/Type: **011**
Office Sought: ☒ House ☐ Senate ☐ President Disbursement For: ☐ Primary ☒ General ☐ Other (specify) **CA** District: **18**
Date of Disbursement: **10/10/2014**
Amount of Each Disbursement this Period: **15000.00**

SUBTOTAL of Disbursements This Page (optional)..... **90000.00**
TOTAL This Period (last page this line number only).....

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 **3** OF **4**

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Walden for Congress
Mailing Address P.O. Box 1091
City Hood River State OR Zip Code 97031
Purpose of Disbursement contribution
Candidate Name Greg Walden Category/Type 011
Office Sought: ☒ House ☐ Senate ☐ President Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▼
State: OR District: 2

Date of Disbursement: 10 / 10 / 2014
Amount of Each Disbursement this Period: 150000

B. Fred Upton for Congress
Mailing Address 402 State St.
City St. Joseph State MI Zip Code 49085
Purpose of Disbursement contribution
Candidate Name Fred Upton Category/Type 011
Office Sought: ☒ House ☐ Senate ☐ President Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▼
State: MI District: 6

Date of Disbursement: 10 / 10 / 2014
Amount of Each Disbursement this Period: 250000

C. Shuster for Congress
Mailing Address 104 Home Ave.
City Alexandria State VA Zip Code 22301
Purpose of Disbursement contribution
Candidate Name Bill Shuster Category/Type 011
Office Sought: ☒ House ☐ Senate ☐ President Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▼
State: PA District: 9

Date of Disbursement: 10 / 10 / 2014
Amount of Each Disbursement this Period: 250000

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

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

650000

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 4 OF 4

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A.

Duncan for Congress

Mailing Address

P.O. Box 2646

City

Knoxville

State

TN

Zip Code

37901

Purpose of Disbursement

Candidate Name

contribution

John Duncan

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: **TN**

District: **2**

Date of Disbursement

10 / 13 / 2014

Amount of Each Disbursement this Period

1,000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

Amount of Each Disbursement this Period

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

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

21,000.00



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Alfred LAGASSE

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Rockville, MD 20852

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SHIP TO: (800) 424-3530

Public Records Office
Federal Election Commission
999 E Street, N.W.

Washington, DC 20463

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Ref # Federal Election Comm.

Invoice #

PO #

Dept #

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TRK# 7716 7523 6676

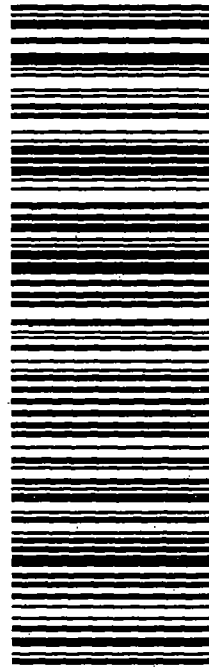
0201

20463

DC-US

IAD


19 RDVA



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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.

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<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>10/29/14</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
 PREPARER	<i>10/30/14</i> DATE PREPARED

(8/2013)