

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 National Limousine Association Political Action Committee

ADDRESS (number and street) 49 South Maple Avenue Check if different than previously reported. (ACC) Marlton NJ 08053

2. FEC IDENTIFICATION NUMBER C C00359380 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 (checked), July 31 Mid-Year, Termination Report (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), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) 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 11 / 27 / 2012 through 12 / 31 / 2012

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 Philip Jagiela

Signature of Treasurer Philip Jagiela [Electronically Filed] Date 01 / 30 / 2013

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**National Limousine 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="2012"/>	<input type="text" value="35952.31"/>	<input type="text" value="35952.31"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="53536.06"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="2125.00"/>	<input type="text" value="33625.00"/>
(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="55661.06"/>	<input type="text" value="69577.31"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="95.59"/>	<input type="text" value="14011.84"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="55565.47"/>	<input type="text" value="55565.47"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

Write or Type Committee Name

**National Limousine Association Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

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).....	2025.00	29775.00
(ii) Unitemized .....	100.00	3850.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2125.00	33625.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2125.00	33625.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	2125.00	33625.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2125.00	33625.00

**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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	95.59	1011.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	95.59	1011.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	13000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	95.59	14011.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	95.59	14011.84

**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) .....	2125.00	33625.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2125.00	33625.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	95.59	1011.84
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	95.59	1011.84

**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 12
<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)  
**National Limousine Association Political Action Committee**

**A. Ahmed Atris**  
Full Name (Last, First, Middle Initial)

Mailing Address 42897 Vestals Gap Drive

City Ashburn State VA Zip Code 20148

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

Name of Employer US Sedan Service, Inc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
12 / 04 / 2012  
**Transaction ID : SA11AI.5180**

Amount of Each Receipt this Period  
100.00

**B. Brad Balaban**  
Full Name (Last, First, Middle Initial)

Mailing Address 4675 Wynn Road

City Las Vegas State NV Zip Code 89103

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

Name of Employer ODS Limousine Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
12 / 04 / 2012  
**Transaction ID : SA11AI.5179**

Amount of Each Receipt this Period  
25.00

**C. Barry Beall**  
Full Name (Last, First, Middle Initial)

Mailing Address 4601 East Ludlow Drive

City Phoenix State AZ Zip Code 85004

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

Name of Employer First Class Executive Limousin Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
12 / 13 / 2012  
**Transaction ID : SA11AI.5190**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 175.00

**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 7 OF 12
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Limousine Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Kevin Cronin**

Mailing Address 28 Marshall Street

City Canton State MA Zip Code 02021

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

Name of Employer Above All Transportation Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2012  
**Transaction ID : SA11AI.5189**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**B. Jon Epstein**

Mailing Address 14 Greenfield Hill

City Sparta State NJ Zip Code 07871

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

Name of Employer Royal Coachman Worldwide Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 30 / 2012  
**Transaction ID : SA11AI.5172**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**C. Diane Forgy**

Mailing Address 10515 Ensley Lane

City Leawood State KS Zip Code 66206

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

Name of Employer Overland Limousine Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2012  
**Transaction ID : SA11AI.5193**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **400.00**

**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 8 OF 12  
(check only one)

<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)  
**National Limousine Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Neil Goodman**

Mailing Address 3780 Northeast 20th Terrace

City Aventura	State FL	Zip Code 33180
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FEC ID number of contributing federal political committee. **C**

Name of Employer Aventura Worldwide	Occupation Owner
--	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2012

**Transaction ID : SA11AI.5185**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. Mary Harrell-Paul**

Mailing Address 2440 South Wolf

City Des Plaines	State IL	Zip Code 60018
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FEC ID number of contributing federal political committee. **C**

Name of Employer Crown Cars & Limousines	Occupation Owner
---	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	04	/	2012

**Transaction ID : SA11AI.5182**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. George Jacobs**

Mailing Address 629 Woodside Ave

City Hinsdale	State IL	Zip Code 60521
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FEC ID number of contributing federal political committee. **C**

Name of Employer Windy City Limousine & Bus Co.	Occupation Owner
--	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2012

**Transaction ID : SA11AI.5173**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> 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 9 OF 12
<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)  
**National Limousine Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Richard Kane</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2012
Mailing Address 9524 Purcell Drive		<b>Transaction ID : SA11AI.5195</b>
City Potomac	State MD	Zip Code 20854
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer International Limousine Servic	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2750.00	

Full Name (Last, First, Middle Initial) <b>B. Greg Pruitt</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2012
Mailing Address 1403 N. Purdue Avenue		<b>Transaction ID : SA11AI.5192</b>
City Oklahoma City	State OK	Zip Code 73127
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Kings Worldwide Transportation	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) <b>C. Dawson Rutter</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2012
Mailing Address 280 Beacon Street #24		<b>Transaction ID : SA11AI.5186</b>
City Boston	State MA	Zip Code 02116
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Commonwealth Worldwide	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	675.00
<b>TOTAL</b> 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 10 OF 12
<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)  
**National Limousine Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Howard Shanks**

Mailing Address 15870 South Birchwood Loop

City Chuqujak	State AR	Zip Code 99567
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FEC ID number of contributing federal political committee. **C**

Name of Employer A Aurora Limousine	Occupation Owner
--	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	04	/	2012

**Transaction ID : SA11AI.5183**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. Dave Shaw**

Mailing Address 6183 South Westview Drive

City Homosassa	State FL	Zip Code 34448
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FEC ID number of contributing federal political committee. **C**

Name of Employer Olympus Limousine	Occupation Operations Manager
---------------------------------------	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	04	/	2012

**Transaction ID : SA11AI.5181**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. Teale Smith**

Mailing Address 65 North Street

City Saco	State ME	Zip Code 04072
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FEC ID number of contributing federal political committee. **C**

Name of Employer Maine Limousine Service	Occupation Owner
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	10	/	2012

**Transaction ID : SA11AI.5187**

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> 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 11 OF 12  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**National Limousine Association Political Action Committee**

**A. Scott Solombrino**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 Second Street  
 City Chelsea State MA Zip Code 02150  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Dav El Boston Inc. Occupation Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 12 / 26 / 2012  
**Transaction ID : SA11AI.5194**  
 Amount of Each Receipt this Period 250.00

**B. Shane Stickel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8295 E. 28th Avenue  
 City Denver State CO Zip Code 80238  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Presidential Worldwide Transpo Occupation Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 11 / 2012  
**Transaction ID : SA11AI.5188**  
 Amount of Each Receipt this Period 50.00

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2025.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

**National Limousine Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Citizens Bank**

Mailing Address 791 E. Route 70

City Marlton State NJ Zip Code 08053

Purpose of Disbursement  
Merchant Bank Fee

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2012

**Transaction ID : SB21B.5196**

Amount of Each Disbursement this Period

95.59

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

95.59

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

95.59