1403-136-2718

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

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NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typ over the lines.	ing, type	12FE4M5		£.:1
POLLITICAL W				[A 5 5	OCILATI	<u> </u>
ADDRESS (number and street) Check if different than previously reported. (ACC) FEC IDENTIFICATION NO.	3200 TOW ROGK VILL UMBER ▼	IEIRI IO AIKISI EITYA IS THIS	BLVD	MD (20852- ZIP CO	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Classical Contents) July 15 Quarterly Report (Classical Contents) Quarterly Report (Classical Contents) January 31 Year-End Report (Year-End Report (Non-election Year Only) (MY) Termination Report (TER)	(b) Monthly Report Due On: M (c) 12-Day PRE-Election Report for the: (d) 30-Day POST-Election Report for the:	eb 20 (M2) lar 20 (M3) pr 20 (M4) Primary (12	May 20 (M5) Jun 20 (M6) Jul 20 (M7) P) (12C)	Aug Sep	20 (M8)	Special (30S)
5. Covering Period	0'16'20	through	7.11	24	20.14	
I certify that I have examined the Type or Print Name of Treasure	•	of my knowledge and ED LAGA		e, correct and	i complete.	
Signature of Treasurer	af	9	Da	Enizani-Estate	1 29 1	2014
Office Use Only	eous, or incomplete informati	ion may subject the per	son signing thi	s Report to th	FEC FOR Rev. 12/20	м зх

SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name	·	
TAXICAB, LIMOUSINE & PARA	ATRANSIT ASSECIATION POL	ITICAL ACTION COMMITTE
,		o: [1] 24 2014
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		11770399
(b) Cash on Hand at Beginning of Reporting Period	8059149	
(c) Total Receipts (from Line 19)	3,420.0.0	1280.750
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	84.0.1.1.4.9	1.305.11.49
7. Total Disbursements (from Line 31)	2500.00	4960000
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	8151149	8151149
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	000	
This committee has qualified as a multic	candidate 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

1403-136-2720

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

	Vrite or Type Committee Name XICAB, LIMOUSINE & PARATRA	USIT ASSOCIATION POLITICA	AL ACTION COMMITTEE
	Report Covering the Period: From:	A A B B A A A A A A A A A A A A A A A A	0: 1.1 24 2014
	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)	25.00.0.0	5.750.00
	(ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)▶	3,4,2,0,06	7.30.750
	(b) Political Party Committees		23. 4. 423. 4.
12.	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other Party Committees	3,4,20,00	7.30.750
13.	All Loans Received		control of the second s
	Loan Repayments Received 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	50000
	Other Federal Receipts (Dividends, Interest, etc.) 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))	72	22 martin de la constantina della constantina de
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	3,420.00	12,30750
?0.	Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	3,420,00	12,3,0.75,0

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)	har franchischer der seine franche seine seine franche seine seine seine franche seine sei	
	(i) Federal Share		
	(ii) Non-Federal Share		
	(b) Other Federal Operating		
	Expenditures		22
	(c) Total Operating Expenditures	manage and the second s	
	(add 21(a)(i), (a)(ii), and (b))▶		
22.	Transfers to Affiliated/Other Party		
23.	CommitteesContributions to		
	Federal Candidates/Committees and Other Political Committees	25.0.0.0.0	4.9,0.0.0.00
	Independent Expenditures		
25.	(use Schedule E)	And the second s	
	,		
26.	Loan Repayments Made	(2)	
27	Loans Made		
	Refunds of Contributions To:	22 - Carlotte Carlott	
	(a) Individuals/Persons Other Than Political Committees		
	(b) Political Party Committees	224 - 2	
	(c) Other Political Committees		
	(such as PACs)	12 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -	
	(d) Total Contribution Refunds		in a said considerant and considerant contract and contra
	(add Lines 28(a), (b), and (c))▶		
	, , , , , , , , , , , , , , , , , , ,		
29.	Other Disbursements		
30	Federal Election Activity (2 U.S.C. §431(20))		
٠.,	(a) Allocated Federal Election Activity	-	
	(from Schedule H6)	and the second s	and the state of t
	(i) Federal Share		
	(ii) "Levin" Share		
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	22	
31.	Total Disbursements (add Lines 21(c), 22,		
•	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2,5,0,0,0,0	49,00000
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	250000	49,00000

DETAILED SUMMARY PAGE of Disbursements

COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
2,50000	4.9.00000
25,0000	49,000,00
	Total This Period 2.50000

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE / OF 2		
ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)		
THE MEET MEET TO	Detailed Summary Page	11a 11b 11c 12		
Any information copied from such Reports and Statements r	nay not be sold or used by any ne	13 14 15 16 17		
or for commercial purposes, other than using the name and				
NAME OF COMMITTEE (In Full)				
/TAXICAB, LIMOUSINE & PARATRANSI	TASSOCIATION POL	ITICAL ACTION COMMITTEE		
Full Name (Last, First, Middle Initial) A. Fogarty, Michael L.		Date of Receipt		
<i>A</i> // /		Mawa / Dad / Manakakaka		
Mailing Address 100 Cummings Conter # 3 City Benedle MA	425 G Zip Code	10 20 2014		
Beverly MA	01915	Amount of Each Receipt this Period		
FEC ID number of contributing		50000		
federal political committee.				
Name of Employer Occupation				
Receipt For:	notation Executive e Year-to-Date ▼	-		
Primary General				
Other (specify) ▼	,,,9,0,0,0			
Full Name (Last, First, Middle Initial)		Date of Receipt		
B. A Driffin, Juduh		Mam / Bab / Yayay		
16557 Mass Court		10 20 20,14		
City State	Zip Code 33912	Amount of Each Receipt this Period		
FEC ID number of contributing				
federal political committee.		50000		
Name of Employer Occupatio	n			
SWFL Transportation Transport		_		
Primary General Aggregate	e Year-to-Date ▼			
Other (specify) ▼	<u> </u>			
Full Name (Last, First, Middle Initial)				
Mailing Address		Date of Receipt		
8725 NE Emerson St		10 20 20 14		
City Portland OR	Zip Code 97220	Amount of Each Receipt this Period		
FEC ID number of contributing				
federal political committee.		5.0.0.00		
Name of Employer Occupation	-A-1	1		
Receipt For:	sortation Exac.	4		
Primary General Aggregate	Year-to-Date ▼			
Other (specify) ▼	<u>, 500,00</u>			
SUBTOTAL of Receipts This Page (optional)	>	1,5,0,0,00		
TOTAL This Period (last page this line number only)				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE OF 2 Use separate schedule(s) (check only one) for each category of the (11a 11b 11c Detailed Summary Page 13 14 15 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, LIMOUSING & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial Date of Receipt Mailing Address Zip Code City State Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Mobile Bon 1 ransportation Receipt For: Aggregate Year-to-Date ▼ Primary 5.000.C Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Checke Receipt For: Aggregate Year-to-Date Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) -SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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2725

SCHEDULE B (FEC Form 3X) PAGE OF FOR LINE NUMBER: Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 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) LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE 10 23 Zip Code State 25801 Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Senate General **Primary** President Other (specify) District: 0.2 Full Name (Last, First, Middle Initial) В. Date of Disbursement Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General: President Other (specify) District: Full Name (Last, First, Middle Initial) C. Date of Disbursement Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Senate General

Primary

Other (specify)

President

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

District:

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

State:

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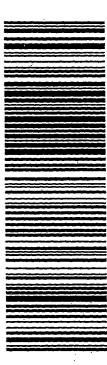
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