

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NATIONAL LIMOUSINE ASSOCIATION PAC (NLA PAC)

Report Covering the Period:

From:

07 / 01 / 2007

To:

12 / 31 / 2007

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,		
(b) Cash on Hand at Beginning of Reporting Period.....	87500	
(c) Total Receipts (from Line 19).....	841300	1058800
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	928800	1058800
7. Total Disbursements (from Line 31).....	695000	825000
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	233800	233800
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		



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

28039632748

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

NATIONAL LUNGSINE ASSOCIATION PAC (NLA PAC)

Report Covering the Period: From: **07 / 01 / 2007** To: **12 / 31 / 2007**

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

7890.00
578.00
8413.00

8090.00
2498.00
10588.00

- (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)..... ▶

8413.00

10588.00

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.....

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))..... ▶

8413.00

10588.00

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

8413.00

10588.00

28039632749

DETAILED SUMMARY PAGE
of Disbursements

28039632750

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	150000	150000
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	150000	150000
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	545000	675000
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))..	695000	825000
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	695000	825000

**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)	841300	1058800
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	841300	1058800
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	150000	150000
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	150000	150000

28039632751

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 1 OF 6	
	<input checked="" type="checkbox"/> 1a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	13	14	15	16

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 PAC (NLA PAC)

A. Full Name (Last, First, Middle Initial)
BROWN, RICK S.

Mailing Address
2186 CORTE MANGO

City **CARLSBAD** State **CA** Zip Code **92009**

FEC ID number of contributing federal political committee.
C

Name of Employer
LA COSTA LIMOUSINE Occupation **LIMOUSINE COMPANY OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000

Date of Receipt
10 / 08 / 2007

Amount of Each Receipt this Period
30000

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

Mailing Address
P.O. BOX 910

City **PENNGROVE** State **CA** Zip Code **94951**

FEC ID number of contributing federal political committee.
C

Name of Employer
PURE LUXURY TRANSPORTATION Occupation **LIMOUSINE COMPANY OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000

Date of Receipt
08 / 25 / 2007

Amount of Each Receipt this Period
50000

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

Mailing Address
14 GREENFIELD HILL

City **SPARTA** State **NJ** Zip Code **07871**

FEC ID number of contributing federal political committee.
C

Name of Employer

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000

Date of Receipt
09 / 28 / 2007

Amount of Each Receipt this Period
30000

SUBTOTAL of Receipts This Page (optional)..... ▶ **110000**

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

28039632752

**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 2 OF 6	
	<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

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NAME OF COMMITTEE (In Full)
NATIONAL LIMOUSINE ASSOCIATION PAC (NLA PAC)

A. Full Name (Last, First, Middle Initial)
FLYNN, MARY E.

Mailing Address
24 OMAR TERRACE

City
NEWTON State
MA Zip Code
02460

FEC ID number of contributing federal political committee.
C

Name of Employer
FLIGHTVIEW Occupation
MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35000

Date of Receipt
11 / 02 / 2007

Amount of Each Receipt this Period
35000

B. Full Name (Last, First, Middle Initial)
FORBY DIANE K.

Mailing Address
10515 ENSLEY LANE

City
LEAWOOD State
KY Zip Code
60206

FEC ID number of contributing federal political committee.
C

Name of Employer
OVERLAND LIMOUSINE SERVICE Occupation
LIMOUSINE COMPANY OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
40000

Date of Receipt
09 / 09 / 2007

Amount of Each Receipt this Period
20000

C. Full Name (Last, First, Middle Initial)
GOOLEY RAYMOND J

Mailing Address
6 PIERSON DRIVE

City
WEST HAVEN State
CT Zip Code
06516

FEC ID number of contributing federal political committee.
C

Name of Employer
MANAGING AGENCY GROUP Occupation
MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000

Date of Receipt
11 / 09 / 2007

Amount of Each Receipt this Period
30000

SUBTOTAL of Receipts This Page (optional)..... ▶ **85000**

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

28039632753

**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 3 OF 6	
	<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

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NAME OF COMMITTEE (In Full)
NATIONAL LIMOUSINE ASSOCIATION PAC (NLA PAC)

A. Full Name (Last, First, Middle Initial) **GREENE JEFFREY S.**

Mailing Address **3240 MILL CHAPEL CIRCLE**

City **MARIETTA** State **GA** Zip Code **30067**

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

Name of Employer **GREENE CLASSIC LIMOUSINES** Occupation **PRESIDENT**

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

Aggregate Year-to-Date **75000**

Date of Receipt **09' 24' 2007**

Amount of Each Receipt this Period **30000**

B. Full Name (Last, First, Middle Initial) **JACOBY, GEORGE**

Mailing Address **629 WOODSIDE AVENUE**

City **HINSDALE** State **IL** Zip Code **60521**

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

Name of Employer **WINDY CITY LIMOUSINE** Occupation **OWNER**

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

Aggregate Year-to-Date **85000**

Date of Receipt **09' 14' 2007**

Amount of Each Receipt this Period **85000**

C. Full Name (Last, First, Middle Initial) **RANE RICHARD P.**

Mailing Address **8009 GREENTREE ROAD**

City **BETHESDA** State **MD** Zip Code **20817**

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

Name of Employer **INTERNATIONAL LIMOUSINE SERVICE** Occupation **OWNER**

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

Aggregate Year-to-Date **52000**

Date of Receipt **09' 28' 2007**

Amount of Each Receipt this Period **32000**

SUBTOTAL of Receipts This Page (optional)..... **147000**

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

28039632754

**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 4 OF 6	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
NATIONAL LIMOUSINE ASSOCIATION PAC (NLA PAC)

A. Full Name (Last, First, Middle Initial) **PAPAZONI DEENA**
 Mailing Address **3398 WEST SPRUCE AVENUE**
 City **FRESNO** State **CA** Zip Code **93711**
 FEC ID number of contributing federal political committee. **C**

Date of Receipt **10 ' 09 ' 2007**
 Amount of Each Receipt this Period **35000**

Name of Employer **TOUCH OF CLASS LIMOUSINE** Occupation **OWNER**
 Receipt For: Primary General Other (specify) **▼**
 Aggregate Year-to-Date **35000**

B. Full Name (Last, First, Middle Initial) **QUA STEPHEN M. II**
 Mailing Address **4559 LANDER ROAD**
 City **LAGRIN FALLS** State **OH** Zip Code **44022**
 FEC ID number of contributing federal political committee. **C**

Date of Receipt **10 ' 30 ' 2007**
 Amount of Each Receipt this Period **42000**

Name of Employer **COMPANY CAR & LIMOUSINE** Occupation **OWNER**
 Receipt For: Primary General Other (specify) **▼**
 Aggregate Year-to-Date **52000**

C. Full Name (Last, First, Middle Initial) **RAVEN DOUGLAS P.**
 Mailing Address **16158 SW TUSLANY STREET**
 City **TIGARD** State **OR** Zip Code **97223**
 FEC ID number of contributing federal political committee. **C**

Date of Receipt **10 ' 05 ' 2007**
 Amount of Each Receipt this Period **25000**

Name of Employer **POINT TO POINT TRANSPORTATION** Occupation **OWNER**
 Receipt For: Primary General Other (specify) **▼**
 Aggregate Year-to-Date **25000**

SUBTOTAL of Receipts This Page (optional).....▶	102000
TOTAL This Period (last page this line number only).....▶	

28039632755

**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 6
	<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 INC (NLA INC)

A. Full Name (Last, First, Middle, Initial) **RENEHAN MICHAEL J**

Mailing Address **P.O. Box 627**

City **FARMINGDALE** State **NJ** Zip Code **07727**

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

Name of Employer **ALLAIRE LIMOUSINES** Occupation **OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt **09 / 24 / 2007**

Amount of Each Receipt this Period **25000**

B. Full Name (Last, First, Middle, Initial) **RUTTER DAUNSON A**

Mailing Address **322 NORTH ROAD**

City **SUBURB** State **MA** Zip Code **01776**

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

Name of Employer **COMMONWEALTH WORLDWIDE** Occupation **OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2300.00**

Date of Receipt **09 / 08 / 2007**

Amount of Each Receipt this Period **2300.00**

C. Full Name (Last, First, Middle, Initial) **STAFFORD GLENN**

Mailing Address **6024 JAHNKE ROAD**

City **RICHMOND** State **VA** Zip Code **23225**

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

Name of Employer **STAFFORD LIMOUSINE** Occupation **OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **09 / 07 / 2007**

Amount of Each Receipt this Period **25000**

SUBTOTAL of Receipts This Page (optional)..... ▶ **280000**

TOTAL This Period (last page this line number only)..... ▶ **280000**

28039632756

**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 6	
	<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 PAC (NLA PAC)

A. Full Name (Last, First, Middle Initial) **THOMPSON H. A.**

Mailing Address **7035 GARDEN TERRACE CT**

City **CHARLOTTE** State **NC** Zip Code **28210**

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

Name of Employer **ROSE CHAUFFEURS TRANSPORTATION** Occupation **OWNER**

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

Aggregate Year-to-Date **12500**

Date of Receipt **09 / 24 / 2007**

Amount of Each Receipt this Period **30000**

B. Full Name (Last, First, Middle Initial) **HALLOCK, RICHARD K**

Mailing Address

City State Zip Code

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

Name of Employer **RP LEASING ASSOC** Occupation **MANAGER**

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

Aggregate Year-to-Date **30000**

Date of Receipt **09 / 24 / 2007**

Amount of Each Receipt this Period **30000**

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)..... ▶ **60000**

TOTAL This Period (last page this line number only)..... ▶ **784000**

28039632757

**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 1

<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 PAC (NLA PAC)

Full Name (Last, First, Middle Initial)

A. LET MAGAZINE		Date of Disbursement
Mailing Address 3520 CHALLENGER STREET		11 / 02 / 2007
City TORRANCE State CA Zip Code 90503		
Purpose of Disbursement	REIMBURSEMENT - COST OF PASCARELL FUN	Amount of Each Disbursement this Period
Candidate Name	CONGRESS FUNDRAISER 9/8/07	1500.00
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

B.		Date of Disbursement
Mailing Address		
City _____ State _____ Zip Code _____		
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

C.		Date of Disbursement
Mailing Address		
City _____ State _____ Zip Code _____		
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

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

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

1500.00

28039632758

**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 2

<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)

NATIONAL LIMOUSINE ASSOCIATION PAC (NLA PAC)

Full Name (Last, First, Middle Initial)

A. PASCARELL FOR CONGRESS		Date of Disbursement
Mailing Address P.O. BOX 640		09 / 27 / 2007
City TOTONA State NJ Zip Code 07511	Purpose of Disbursement	Amount of Each Disbursement this Period
Candidate Name BILL PASCARELL JR	Category/Type 011	90000
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. ANDREWS FOR CONGRESS		Date of Disbursement
Mailing Address P.O. BOX 295		10 / 16 / 2007
City OAKLYN State NJ Zip Code 08107	Purpose of Disbursement 10/7/07 FUNDRAISER	Amount of Each Disbursement this Period
Candidate Name ROBERT ANDREWS	Category/Type 011	150000
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. HILARY CLINTON FOR PRESIDENT		Date of Disbursement
Mailing Address 420 LEXINGTON AVENUE		10 / 29 / 2007
City NY State NY Zip Code 10170	Purpose of Disbursement 10/30/07 FUNDRAISER	Amount of Each Disbursement this Period
Candidate Name HILARY CLINTON	Category/Type 011	230000
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

470000

28039632759

**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 **2** OF **2**

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

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NAME OF COMMITTEE (In Full)

NATIONAL LIMOUSINE ASSOCIATION PAC (NLA PAC)

Full Name (Last, First, Middle Initial)

A. JOHN HALL FOR CONGRESS		Date of Disbursement 10 / 24 / 2007
Mailing Address P.O. BOX 469		Amount of Each Disbursement this Period 25000
City BEACON NY	State NY	
Purpose of Disbursement 10/28/07 EVENT		
Candidate Name JOHN HALL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. BARTLETT FOR CONGRESS		Date of Disbursement 10 / 24 / 2007
Mailing Address P.O. BOX 245		Amount of Each Disbursement this Period 25000
City MIDDLETOWN MD	State MD	
Purpose of Disbursement 10/29/07 LUNCHEON		
Candidate Name ROSCOE BARTLETT		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. JOHN HALL FOR CONGRESS		Date of Disbursement 12 / 14 / 2007
Mailing Address P.O. BOX 469		Amount of Each Disbursement this Period 25000
City BEACON NY	State NY	
Purpose of Disbursement 12/17/07 FUNDRAISER		
Candidate Name JOHN HALL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

75000

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

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