

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
For Other Than An Authorized Committee

RECEIVED
FEC MAILCENTER

2024 APR 15 AM 11:29
Check 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) 10340 Democracy Lane
Suite 300
Fairfax VA 22030

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 00132480

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S)

Election on M-M / D-D / Y-Y-Y-Y in the State of

(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on M-M / D-D / Y-Y-Y-Y in the State of

5. Covering Period 01/01/2024 through 01/15/2024

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 Paul Miller

Signature of Treasurer 

Date 04/08/2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only							
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2024 APR 15 AM 11:29

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3...

Write or Type Committee Name

Taxicab Limousine & Paratransit Association Political Action Committee

Report Covering the Period: From:

MM ' DD ' YYYY
01 ' 01 ' 2024

To:

MM ' DD ' YYYY
04 ' 15 ' 2024

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).....

4,500.00

4,500.00

(ii) Unitemized.....

0

0

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

4,500.00

4,500.00

(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).....▶

4,500.00

4,500.00

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)).....▶

4,500.00

4,500.00

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

4,500.00

4,500.00

20240415 1404202

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	11,000.00	11,000.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11,000.00	11,000.00
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)		

NON-PROFIT CORPORATION

**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 7 OF 9			
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 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)
Taxicab Limousine & Paratransit Association Political Action Committee

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAK Groedel

Mailing Address
4299 Cranwood Pkwy

City
Cleveland

State
OH

Zip Code
44128

FEC ID number of contributing federal political committee.
C00132480

Name of Employer (for Individual)
Provide A Ride

Occupation (for Individual)
management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 25 / 2024

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jeremy Scalzi

Mailing Address
65 Industry Dr.

City
West Haven

State
CT

Zip Code
06516

FEC ID number of contributing federal political committee.
C00132480

Name of Employer (for Individual)
M7

Occupation (for Individual)
management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 25 / 2024

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chase Lafferty

Mailing Address
8761 Virginia meadows Dr.

City
Manassas

State
VA

Zip Code
20109

FEC ID number of contributing federal political committee.
C00132480

Name of Employer (for Individual)
H&M Transport

Occupation (for Individual)
management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 01 / 2024

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional) **1,500.00**

TOTAL This Period (last page this line number only) **3,000.00**

20240415030040674

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 9
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)

Tacticals Limousine & Paratransit Association Pol. Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dan Reid

Mailing Address

1721 Hardy St

City

Hattiesburg

State

MS

Zip Code

39401

FEC ID number of contributing federal political committee.

000132480

Name of Employer (for Individual)

Grove Transit

Occupation (for Individual)

management

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

03 / 22 / 2024

Amount of Each Receipt this Period

500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. William Yuhnke

Mailing Address

1580 Kenmore Ave

City

Buffalo

State

NY

Zip Code

14216

FEC ID number of contributing federal political committee.

000132480

Name of Employer (for Individual)

Liberty Communications

Occupation (for Individual)

management

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,000.00

Date of Receipt

03 / 22 / 2024

Amount of Each Receipt this Period

1,000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)

1,500.00

TOTAL This Period (last page this line number only)

4,500.00

202403150300467500

**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 9 OF 9
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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		

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): Alexia's Limousine & Paratransit Association Political Action Committee

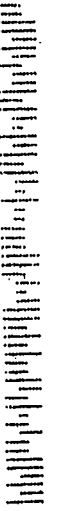
A. <u>Emmer Victory Fund</u>			Date of Disbursement 10 ^M 05 ^D 2024 ^Y
Mailing Address 5827 COLFAX AVE.			FEC Identification Number C00132480
City Alexandria	State VA	Zip Code 22311	Amount of Each Disbursement this Period 5,000.00
Purpose of Disbursement: Re-Election		Category/Type	Memo Item
Candidate Name Rep Tom Emmer		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

B. <u>House Conservative Fund</u>			Date of Disbursement 02 05 2024
Mailing Address 5827 COLFAX AVE.			FEC Identification Number C00132480
City Alexandria	State VA	Zip Code 22311	Amount of Each Disbursement this Period 5,000.00
Purpose of Disbursement: Re-Election		Category/Type	Memo Item
Candidate Name Rep Kevin Horn		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		State: District:	

C. <u>Roger Williams for Congress</u>			Date of Disbursement 03 05 2024
Mailing Address 5827 COLFAX AVE.			FEC Identification Number C00132480
City Alexandria	State VA	Zip Code 22311	Amount of Each Disbursement this Period 1,000.00
Purpose of Disbursement: Re-Election		Category/Type	Memo Item
Candidate Name Rep Roger Williams		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	11,000.00
TOTAL This Period (last page this line number only).....	11,000.00

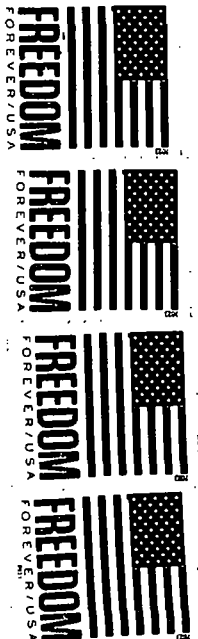
2025 RELEASE UNDER E.O. 14176



1 23456789

22030

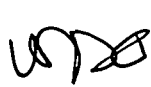
Federal Election Commission
1050 First St. NE
Washington, DC 20463



RECEIVED
FEC MAILCENTE
2024 APR 15 AM 11:00

NONPROFIT CORPORATION BOSTON, MA 02111

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 checked="" type="checkbox"/> USPS First Class Mail	Date of Receipt 4/15/24
<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 type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date Date of Receipt Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received via FAX	Date of Receipt
<input type="checkbox"/> Received via Email	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	4/15/24 DATE PREPARED

(4/2023)

20240415 15:40:00