

**FEC
FORM 3X**

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

RECEIVED

2014 JUL 29 AM 9:56

Office Use Only

12FE4M5

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

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] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)
- Election on: [MM] / [DD] / [YYYY] in the State of []

5. Covering Period

07 / 01 / 2013 through 12 / 31 / 2013

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

[Handwritten Signature]

Date

07 / 26 / 2014

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							
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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: 07 / 01 / 2013 To: 12 / 31 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2013</u>		<u>10522899</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>10159899</u>	
(c) Total Receipts (from Line 19)	<u>2110500</u>	<u>2697500</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<u>12270399</u>	<u>13220399</u>
7. Total Disbursements (from Line 31)	<u>500000</u>	<u>1450000</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<u>11770399</u>	<u>11770399</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<u>000</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<u>000</u>	

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:

MM ' DD ' YYYY
07 ' 01 ' 2013

To:

MM ' DD ' YYYY
12 ' 31 ' 2013

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).....

20500.00

24800.00

(ii) Unitemized.....

6050.00

2175.00

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

21105.00

26975.00

(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).....▶

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)).....▶

21105.00

26975.00

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

21105.00

26975.00

1400011000110001

DETAILED SUMMARY PAGE
of Disbursements

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.....	5000.00	14500.00
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))..	5000.00	14500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5000.00	14500.00

NON-FEDERAL

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)	5000.00	14500.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5000.00	14500.00
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)		

1-800-424-9888

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1 OF 13

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 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)

TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Coker, Elizabeth, Paige		Date of Receipt 09 / 06 / 2013
Mailing Address 5617 Cahaba Glen Cir		Amount of Each Receipt this Period 500.00
City Birmingham	State Zip Code AL 35210	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Transportation General	Occupation Transportation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Fogarty, Michael, Jr.		Date of Receipt 09 / 06 / 2013
Mailing Address 100 Cummings Center, # 225G		Amount of Each Receipt this Period 500.00
City Beverly	State Zip Code MA 01915	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Tristar Services US	Occupation Transportation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Newatt, Richard		Date of Receipt 09 / 06 / 2013
Mailing Address 563 Trabert Ave. NW		Amount of Each Receipt this Period 500.00
City Atlanta	State Zip Code GA 30309	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Chester Cab	Occupation Transportation Exec.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

1-800-438-1700

**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 13
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Houston, Ellis		Date of Receipt 09 / 06 / 2013
Mailing Address 5804 Oporto Madrid Blvd.		Amount of Each Receipt this Period 500.00
City Birmingham	State Zip Code AL 35210	
FEC ID number of contributing federal political committee. C		
Name of Employer Yellow Cab	Occupation Transportation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. McBride, Brian		Date of Receipt 09 / 06 / 2013
Mailing Address 2069 W. Third St.		Amount of Each Receipt this Period 500.00
City Cleveland	State Zip Code OH 44113	
FEC ID number of contributing federal political committee. C		
Name of Employer Yellow Cab	Occupation Transportation Exec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Pinckard, Michael		Date of Receipt 09 / 06 / 2013
Mailing Address 4600 W. Camelback Rd.		Amount of Each Receipt this Period 1,000.00
City Glendale	State Zip Code AZ 85301	
FEC ID number of contributing federal political committee. C		
Name of Employer Total Transit	Occupation Transportation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1,000.00	

SUBTOTAL of Receipts This Page (optional).....▶	2,000.00
TOTAL This Period (last page this line number only).....▶	

14001-1203-1770

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 3 OF 13
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	

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

A. Full Name (Last, First, Middle Initial)
Reid, David R.

Mailing Address
2050 Commerce

City State Zip Code
Ann Arbor MI 48103

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
Select Ride Transportation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 06 / 2013

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Rouse, Mitchell

Mailing Address
2129 W. Rosecrans Ave

City State Zip Code
Gardena CA 90249

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
United Checker Cab Transportation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 06 / 2013

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Rouse, Wallace

Mailing Address
2129 W. Rosecrans Ave

City State Zip Code
Gardena CA 90249

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
LA Yellow Cab Transportation Exec.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 06 / 2013

Amount of Each Receipt this Period
500.00

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

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

148011-1000-1-11-11

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 4 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)

TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Slagle, Jerry

Mailing Address

1619 E. Lincoln Ave.

City

Anaheim

State

CA

Zip Code

92805

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 / 06 / 2013

Amount of Each Receipt this Period

500.00

Name of Employer

Yellow Cab of Greater Orange County

Occupation

Transportation Exec.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

B. Smarelli, Mary

Mailing Address

424 W. Cherry St.

City

Milwaukee

State

WI

Zip Code

53212

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 / 06 / 2013

Amount of Each Receipt this Period

1000.00

Name of Employer

Transit Express

Occupation

Transportation Executive

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Full Name (Last, First, Middle Initial)

C. Smythe, William, H.

Mailing Address

581 S. Second St

City

Memphis

State

TN

Zip Code

38126

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 / 06 / 2013

Amount of Each Receipt this Period

500.00

Name of Employer

Chester Cab

Occupation

Transportation Exec.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

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

2000.00

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

15001-15002-15003-15004

**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 13
	<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)
TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Nichols, Neal

Mailing Address
3251 Washington Blvd

City
Arlington State
VA Zip Code
22201

FEC ID number of contributing federal political committee.
C

Name of Employer
Transportation General Occupation
Transportation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 06 / 2013

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Arrighi, Thomas

Mailing Address
1001 Bedford St.

City
Bridgewater State
MA Zip Code
02324

FEC ID number of contributing federal political committee.
C

Name of Employer
Bell's Taxi Occupation
Transportation Exec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 17 / 2013

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Combs, Nicholas

Mailing Address
17174 U.S. 19 N.

City
Clearwater State
FL Zip Code
33764

FEC ID number of contributing federal political committee.
C

Name of Employer
United Taxi Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 17 / 2013

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶ **1500.00**

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

14001-1000-1-1-1-1-1

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: (check only one)
 11a 11b 11c 12 17
 13 14 15 16

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

A. Full Name (Last, First, Middle Initial)
Gillespie, James R.
 Mailing Address
1200 Mississippi St.
 City State Zip Code
San Francisco CA 94107
 Name of Employer Occupation
Yellow Cab Transportation Executive
 Receipt For:
 Primary General
 Other (specify)

Date of Receipt
09 / 17 / 2013
 Amount of Each Receipt this Period
500.00
 Aggregate Year-to-Date
500.00

B. Full Name (Last, First, Middle Initial)
Lazar, John
 Mailing Address
2230 Jerrald Ave.
 City State Zip Code
San Francisco CA 94124
 Name of Employer Occupation
Luxor Cab Transportation Exec.
 Receipt For:
 Primary General
 Other (specify)

Date of Receipt
09 / 17 / 2013
 Amount of Each Receipt this Period
500.00
 Aggregate Year-to-Date
500.00

C. Full Name (Last, First, Middle Initial)
Miles, Royce
 Mailing Address
8725 N.E. Emerson St
 City State Zip Code
Portland OR 97220
 Name of Employer Occupation
Broadway Cab Transportation Exec.
 Receipt For:
 Primary General
 Other (specify)

Date of Receipt
09 / 17 / 2013
 Amount of Each Receipt this Period
500.00
 Aggregate Year-to-Date
500.00

SUBTOTAL of Receipts This Page (optional).....▶ **1,500.00**
 TOTAL This Period (last page this line number only).....▶

143011-1000-1-1001

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE **7** OF **13**
(check only one)
 11a 13 11b 14 11c 15 12 16 17

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

A. Mohetti, David
 Full Name (Last, First, Middle Initial)
 Mailing Address: **8210 Beechcraft Ave.**
 City: **Gaithersburg** State: **MD** Zip Code: **20879**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **Agency Taxi** Occupation: **Transportation Executive**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: **500.00**

Date of Receipt: **09 / 17 / 2013**
 Amount of Each Receipt this Period: **500.00**

B. O'Toole, Terrance
 Full Name (Last, First, Middle Initial)
 Mailing Address: **1300 Lydia Ave.**
 City: **Kansas City** State: **MO** Zip Code: **64106**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **K.C. Transportation Group** Occupation: **Transportation Exec.**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: **500.00**

Date of Receipt: **09 / 17 / 2013**
 Amount of Each Receipt this Period: **500.00**

C. Palmeri, Anthony M
 Full Name (Last, First, Middle Initial)
 Mailing Address: **3473 Kurtz St.**
 City: **San Diego** State: **CA** Zip Code: **92110**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **Yellow Cab** Occupation: **Transportation Exec.**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: **500.00**

Date of Receipt: **09 / 17 / 2013**
 Amount of Each Receipt this Period: **500.00**

SUBTOTAL of Receipts This Page (optional)..... **1500.00**
TOTAL This Period (last page this line number only).....

14801-1200-1775

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 <u>8</u> OF <u>13</u>
	<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)
TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

A. Scabi, William
 Full Name (Last, First, Middle Initial)

Mailing Address
65 Industry Dr.
 City **West Haven** State **CT** Zip Code **06516**

Date of Receipt
09 / **17** / **2013**

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period
500.00

Name of Employer **Metro Taxi** Occupation **Transportation Executive**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

B. Barnes, H Lee
 Full Name (Last, First, Middle Initial)

Mailing Address
4900 Nicholson Ct.
 City **Kensington** State **MD** Zip Code **20895**

Date of Receipt
09 / **17** / **2013**

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period
500.00

Name of Employer **Barwood Transportation** Occupation **Transportation Executive**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

C. DelCordayre, J Sid
 Full Name (Last, First, Middle Initial)

Mailing Address
5805 School Ave.
 City **Richmond** State **VA** Zip Code **23228**

Date of Receipt
10 / **08** / **2013**

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period
500.00

Name of Employer **Van Go** Occupation **Transportation Exec.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

SUBTOTAL of Receipts This Page (optional).....▶ **1500.00**

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

FORM 11000-117409

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: **PAGE 9 OF 13**
(check only one)
 11a 11b 11c 12 17
13 14 15 16

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

A. Joseph, Mark L
Full Name (Last, First, Middle Initial)
Mailing Address
2100 Huntsgdon 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 / 08 / 2013
Amount of Each Receipt this Period
500.00

B. Rossyn, Brock
Full Name (Last, First, Middle Initial)
Mailing Address
1730 S. Federal Hwy # 344
City **DeLray Beach** State **FL** Zip Code **33483**
FEC ID number of contributing federal political committee. **C**
Name of Employer **Metro Taxi** Occupation **Transportation Exec.**
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
10 / 08 / 2013
Amount of Each Receipt this Period
500.00

C. Martinez, Roman
Full Name (Last, First, Middle Initial)
Mailing Address
1406 Hays St.
City **Houston** State **TX** Zip Code **77009**
FEC ID number of contributing federal political committee. **C**
Name of Employer **Yellow Cab** Occupation **Transportation Executive**
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
10 / 17 / 2013
Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) **1,500.00**
TOTAL This Period (last page this line number only)

130211-1-0001-1-1001

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 13
(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)
TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

A. Mc Bride, Robert
 Full Name (Last, First, Middle Initial)
 Mailing Address: **5909 E. 38th Ave**
 City: **Denver** State: **CO** Zip Code: **80207**
 Date of Receipt: **10 / 17 / 2013**
 Amount of Each Receipt this Period: **500.00**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **Metro Taxi** Occupation: **Transportation Executive**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: **500.00**

B. Werth, Robert
 Full Name (Last, First, Middle Initial)
 Mailing Address: **7311 B Highland St**
 City: **Springfield** State: **VA** Zip Code: **22150**
 Date of Receipt: **10 / 17 / 2013**
 Amount of Each Receipt this Period: **1000.00**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **Diamond Transportation** Occupation: **Transportation Executive**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: **1000.00**

C. Griffin, Judy
 Full Name (Last, First, Middle Initial)
 Mailing Address: **16557 Mass Ct.**
 City: **Fort Myers** State: **FL** Zip Code: **33912**
 Date of Receipt: **10 / 22 / 2013**
 Amount of Each Receipt this Period: **500.00**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **SWFL Transportation Group** Occupation: **Transportation Executive**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: **500.00**

SUBTOTAL of Receipts This Page (optional)..... **2000.00**
 TOTAL This Period (last page this line number only).....

IDENT: F1000: 11-17-08

**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 11 OF 13					
	<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)
TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Wilcox, J.M.

Mailing Address
3024 Airport Blvd.

City **Mobile** State **AL** Zip Code **36606**

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

Name of Employer **Mobile Bay Transportation** Occupation **Transportation Executive**

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

Aggregate Year-to-Date **500.00**

Date of Receipt
10 / 22 / 2013

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Wilde, Lorraine C.

Mailing Address
P.O. Box 950

City **FT. Lauderdale** State **FL.** Zip Code **33302**

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

Name of Employer **No Airport Shuttle** Occupation **Transportation Exec**

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

Aggregate Year-to-Date **500.00**

Date of Receipt
10 / 22 / 2013

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Rosenberg, Paul A

Mailing Address
30 3401 Winchester Ave.

City **Atlantic City** State **NJ** Zip Code **08401**

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

Name of Employer **Yellow Cab** Occupation **Transportation Exec.**

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

Aggregate Year-to-Date **500.00**

Date of Receipt
11 / 08 / 2013

Amount of Each Receipt this Period
500.00

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

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

147001 11/08/13 11:00:11 AM

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

<p>A. Full Name (Last, First, Middle Initial) Levine, Michael</p>		<p>Date of Receipt MM ' DD ' YYYY 11 ' 08 ' 2013</p>
<p>Mailing Address 25-11 41st Ave</p>		
<p>City State Zip Code Long Island City NY 11101</p>		
<p>FEC ID number of contributing federal political committee. C</p>		<p>Amount of Each Receipt this Period 500.00</p>
<p>Name of Employer Arthur Cab Leasing</p>	<p>Occupation Transportation Executive</p>	
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼ 500.00</p>	

<p>B. Full Name (Last, First, Middle Initial) Bennett, James C</p>		<p>Date of Receipt MM ' DD ' YYYY 11 ' 08 ' 2013</p>
<p>Mailing Address 7417 Roosevelt Rd</p>		
<p>City State Zip Code Forest Park IL 60130</p>		
<p>FEC ID number of contributing federal political committee. C</p>		<p>Amount of Each Receipt this Period 500.00</p>
<p>Name of Employer Blue Cab Co.</p>	<p>Occupation Transportation Exec</p>	
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼ 500.00</p>	

<p>C. Full Name (Last, First, Middle Initial) McLary, James J.</p>		<p>Date of Receipt MM ' DD ' YYYY 12 ' 08 ' 2013</p>
<p>Mailing Address 500 South Morton</p>		
<p>City State Zip Code Bloomington IN 47403</p>		
<p>FEC ID number of contributing federal political committee. C</p>		<p>Amount of Each Receipt this Period 500.00</p>
<p>Name of Employer, e2 Taxi</p>	<p>Occupation Transportation Exec.</p>	
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼ 500.00</p>	

<p>SUBTOTAL of Receipts This Page (optional).....▶</p>	<p>1,500.00</p>
<p>TOTAL This Period (last page this line number only).....▶</p>	

2007-10-01

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 13
(check only one)
 11a 11b 11c 12
13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Digongoff, Victor

Mailing Address
20 Hawaii Dr.

City **Manalapan** State **NJ** Zip Code **07726**

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

Name of Employer **Black Car Assistance Corp** Occupation **Transportation Executive**

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

Aggregate Year-to-Date **500.00**

Date of Receipt
11 / 08 / 2013

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Rosenberg, Murray

Mailing Address
3401 Winchester Ave.

City **Atlantic City** State **NJ** Zip Code **08401**

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

Name of Employer **Yellow Cab** Occupation **Transportation Executive**

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

Aggregate Year-to-Date **500.00**

Date of Receipt
11 / 08 / 2013

Amount of Each Receipt this Period
500.00

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
12 / 06 / 2013

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... **1,000.00**

TOTAL This Period (last page this line number only)..... **2,050.00**

1-800-424-9541

**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 / OF /
	<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)
TAXICAB, LIMOUSINE & PARATRANSIT ASSOCIATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) **Gingrey for Senate**

Mailing Address **499 S. Capitol St. #120**

City **Washington** State **DC** Zip Code **20003**

Purpose of Disbursement **Contribution**

Candidate Name **Phil Gingrey** Category/Type **011**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **GA** District:

Date of Disbursement **10 / 21 / 2013**

Amount of Each Disbursement this Period **5,000.00**

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name Category/Type

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 Category/Type

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)..... **5,000.00**

140011-1-0001-1-0001

UNCONFIDENTIAL



Express

Extremely Urgent

7/28/14 10:05 AM

FedEx Ship Manager - Print Your Label(s)

From: (301) 984-5700

Alfred LAGASSE
Taxicab, Limo & Para Association
3200 Tower Oaks Blvd., Ste. 220
Rockville, MD 20852

Origin ID: NSFA



J112014061803uv

BILL SENDER

SHIP TO: (800) 424-9530

Public Records Office
Federal Election Commission
999 E ST NW

Washington, DC 20463

X-RAYED BY FEC SECURITY

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c.d

Ship Date: 28 JUL 14
ActWgt: 2.0 LB
CAD: 4160003/NET3550

Delivery Address Bar Code



Ref # Federal Election Comm.

Invoice #

PO #

Dept #

TUE - 29 JUL AA
STANDARD OVERNIGHT

TRK# 7706 9808 3096

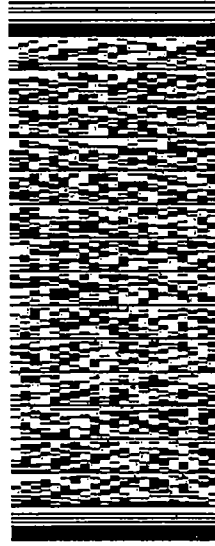
0201

20463
DC-US
IAD

19 RDVA



5202ED4F8A03



9:56

2014 Jul

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.

FORM NO 1784

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<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 checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>FEDEX</i>	Shipping Date <i>7/28/14</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
<i>ASD</i> PREPARER	<i>7/29/14</i> DATE PREPARED