

Amended to
account for an
\$87.50 bank fee for
printing checks in
November '01.

All subsequent forms
have to be amended
to correct opening
balances.

Kensington CopyTech
301-933-6206
e-mail - kcci@cavtel.net

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
OPERATING DIVISION
2002 OCT 15 AM 9:51

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
Taxicab, Limousine & Paratransit Association Political Action Committee

ADDRESS (number and street) 3849 Foxcroft Avenue
 Check if different than previously reported. (ACC)
Kensington M.D. 20895

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C 00132480 NEW 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 [] [] [] 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 07 01 2001 through 12 31 2001

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  Date 10 19 2002

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

2002 OCT 15 AM 9:51

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

Taxicab, Limousine & Paratransit Association Political Action Committee

Report Covering the Period: From: 07 01 2001

To: 12 31 2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2001		38,676.65
(b) Cash on Hand at Beginning of Reporting Period	31,176.65	
(c) Total Receipts (from Line 19)	15,990.00	16,990.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	47,166.65	55,666.65
7. Total Disbursements (from Line 30)	35,870.00	12,087.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	11,296.65	43,579.65
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
899 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FED Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name

Topical Discussions & Research Association Political Action Committee

Report Covering the Period:

From:

07 01 2001

To:

12 31 2001

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)	13,800.00	
(ii) Unitemized	2,190.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	15,990.00	16,990.00
(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 32, page 4)	15,990.00	16,990.00
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 36, page 4)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	15,990.00	16,990.00
20. Total Federal Receipts (subtract Line 18 from Line 19)	15,990.00	16,990.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/01)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	8,700	8,700
(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	35,000.00	12,000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (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. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	358,700	12,087.00
31. Total Federal Disbursements (subtract Line 21(e)(ii) from Line 30)	358,700	12,087.00

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans) (from Line 11(d), page 3)	15,990.00	16,990.00
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	15,990.00	16,990.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
36. Offsets to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35)		

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

22037761786

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

FOR LINE NUMBER:

PAGE 1 OF 1

(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

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)

Tactical, Legislative & Political Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
NICHOLS, DEAN E.

Mailing Address
3251 N. WASHINGTON BLVD.

City **ARLINGTON** State **VA** Zip Code **22201**

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

Name of Employer: **RED TOP CAB** Occupation: **TAXI MANAGER**

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: **500.00**

Date of Receipt: **08/30/2001**

Amount of Each Receipt this Period: **500.00**

B. Full Name (Last, First, Middle Initial)
NICHOLS, NEAL C.

Mailing Address
3251 N. WASHINGTON BLVD.

City **ARLINGTON** State **VA** Zip Code **22201**

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

Name of Employer: **TRANSPORTATION GENERAL** Occupation: **PRES.**

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: **500.00**

Date of Receipt: **08/30/2001**

Amount of Each Receipt this Period: **500.00**

C. Full Name (Last, First, Middle Initial)
MCAMBRAS, NICHOLAS A.

Mailing Address
2939 ELYSIUM WAY

City **CLEARWATER** State **FL** Zip Code **33759**

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

Name of Employer: **BAY AREA YELLOW CAB** Occupation: **PRES.**

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: **300.00**

Date of Receipt: **08/30/2001**

Amount of Each Receipt this Period: **300.00**

1300.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

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

22037701787

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

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 11

<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

Full Name (Last, First, Middle Initial)

A. *HOUSTON, ELLIS W.*

Mailing Address

1223 KINGSBRIDGE

City *HOUSTON*

State

TX

Zip Code

77073

FEC ID number of contributing federal political committee.

C

Name of Employer

YELLOW CAB

Occupation

GEN. MGR.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 30 2001

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. *MC BRIDE, ROBERT*

Mailing Address

35 Brooklyn Rd

City *Hempstead*

State

NY

Zip Code

11550

FEC ID number of contributing federal political committee.

C

Name of Employer

ALL ISLAND TAXI

Occupation

Pres.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 30 2001

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. *LAGASSE, ALFRED B.*

Mailing Address

1 SPARTAN CT.

City *OLNEY*

State

MD

Zip Code

20835

FEC ID number of contributing federal political committee.

C

Name of Employer

TAXI LABS, LIMOUSINE & PARATRANSIT MSN.

Occupation

EX. V.P.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 30 2001

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1100.00

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: (check only one)		PAGE 3 OF 11	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 17
<input type="checkbox"/> 15	<input type="checkbox"/> 14	<input type="checkbox"/> 16	<input type="checkbox"/> 18	<input type="checkbox"/> 19	<input type="checkbox"/> 20

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NAME OF COMMITTEE (In Full)
Tactical, Legislative & Paratransit Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
CAMPOLONGO, JAMES D

Mailing Address
1307 ROYAL CT.

City State Zip Code
JEFFERSON BORO PA 15025

FEC ID number of contributing federal political committee
C

Name of Employer
PITTSBURGH TRANSPORTATION

Occupation
PRES.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08/31/2001

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
SWYSTUN, JUDITH O.

Mailing Address
2000 E. OCEAN VIEW AVE.

City State Zip Code
NORFOLK VA 23503

FEC ID number of contributing federal political committee
C

Name of Employer
BLACK & WHITE CARS

Occupation
PRES.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08/31/2001

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
BUTLER, KENNETH W.

Mailing Address
11810 LYRAC CT

City State Zip Code
DAXTON VA 22124

FEC ID number of contributing federal political committee
C

Name of Employer
CAPITOL PARTNERSHIPS

Occupation
CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
08/31/2001

Amount of Each Receipt this Period
1000.00

12/12/01

SUBTOTAL of Receipts This Page (optional) *3000.00*

TOTAL This Period (last page this line number only) *3000.00*

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 11
	<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)
Tactical, Legislative & Paratransit Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
ROSENBERG, MURRAY E.

Mailing Address
242 CENTER ST.

City State Zip Code
TUCKERTON NJ 08087

FEC ID number of contributing federal political committee
C

Name of Employer
YELLOW CAB

Occupation
PRES.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 30 2001

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
KNAUS, WILLIAM A.

Mailing Address
P.O. Box 201

City State Zip Code
Bethel Park PA 15102

FEC ID number of contributing federal political committee
C

Name of Employer
Colonial Transit

Occupation
consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 30 2001

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
DIZENGOFF, VICTOR

Mailing Address
20 GAWAIN DR.

City State Zip Code
MANALPAN NJ 07726

FEC ID number of contributing federal political committee
C

Name of Employer
BLACK CAR NEWS

Occupation
PRES.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 30 2001

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) *1100.00*

TOTAL This Period (last page this line number only) *1100.00*

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 5 OF 7				
(check only one)						
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>
	12	<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)

Taxcab, Limousine & Paratransit Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. HEWITT, RICHARD C.

Mailing Address

14480 19TH FAIRWAY

City

ALPHARETTA

State

GA

Zip Code

30004

FEC ID number of contributing federal political committee.

C

Name of Employer

CHECKER CAB

Occupation

PRES.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 31 2001

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. ARNET, JOHN M.

Mailing Address

74 PINE CT. N.

City

WEST SENECA

State

NY

Zip Code

14224

FEC ID number of contributing federal political committee.

C

Name of Employer

WE CARE TRANSPORTATION

Occupation

PRES.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 31 2001

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. SMYTHE, WILLIAM H IV

Mailing Address

P.O. BOX 400

City

Memphis

State

TN

Zip Code

38101

FEC ID number of contributing federal political committee.

C

Name of Employer

CHECKER CAB

Occupation

V.P.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 31 2001

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

1100.00

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

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

FOR LINE NUMBER: PAGE 6 OF 11

(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)

Tactical, Legislative & Paratransit Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. HAUCK, GENE

Mailing Address

4117 CALLE DE PRIMERA

City

TORRANCE

State

CA

Zip Code

90505

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 / 05 / 2001

Amount of Each Receipt this Period

500.00

Name of Employer

SUPERSHUTTLE L.A

Occupation

PRE-S

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

B. MADKA, PAUL W.

Mailing Address

8121 STARLINE CT

City

YPSILANTI

State

MI

Zip Code

48197

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 / 05 / 2001

Amount of Each Receipt this Period

150.00

Name of Employer

CHECKER CAB

Occupation

CEO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Full Name (Last, First, Middle Initial)

C. SEARCY, ROBERT A.

Mailing Address

8660 CHICKASAW FARMS LN.

City

ORLANDO

State

FL

Zip Code

32825

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 / 05 / 2001

Amount of Each Receipt this Period

1000.00

Name of Employer

CITY CAB

Occupation

V.P.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

SUBTOTAL of Receipts This Page (optional) ▶

1650.00

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 11

(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)

Tactical, Linncoinc & Paratrain Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. WIER, BRIAN

Mailing Address

6419 E. GOLD DUST AVE.

City

SCOTTSDALE

State

AZ

Zip Code

85253

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 / 09 / 2001

Amount of Each Receipt this Period

300.00

Name of Employer

SUPERSHUTTLE INTL

Occupation

CEO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Full Name (Last, First, Middle Initial)

B. McBRIDE, BRIAN A.

Mailing Address

2069 W. THIRD ST

City

CLEVELAND

State

OH

Zip Code

44113

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 / 09 / 2001

Amount of Each Receipt this Period

600.00

Name of Employer

YELLOW CAB

Occupation

V.P.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Full Name (Last, First, Middle Initial)

C. HUNT, RICHARD R.

Mailing Address

208 ANHAST CIR.

City

NOBLESVILLE

State

IN

Zip Code

46060

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 / 15 / 2001

Amount of Each Receipt this Period

300.00

Name of Employer

YELLOW CAB

Occupation

PRES.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

SUBTOTAL of Receipts This Page (optional)

1200.00

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: (check only one)		PAGE 6 OF 11			
	<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"/> 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)
Tactical, Linnocuous & Paratransit Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. *JOSEPH, MARK L.*

Mailing Address
7120 FAIRPAX RD.

City State Zip Code
BETHESDA MD 20814

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
YELLOW TRANSPORTATION PRES.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 15 2001

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. *WATSON, THERI*

Mailing Address
1105 NE MOSS POINT RD.

City State Zip Code
LEE'S SUMMIT MO 641064

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
CHECKER TRANSPORTATION U.P.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 15 2001

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. *GENOVESE, FRANK J*

Mailing Address
8903 PINE LN

City State Zip Code
MAGNOLIA TX 77355

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
YELLOW CAB SERVICE PRES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 15 2001

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) *1,100.00*

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: (check only one)		PAGE 9 OF 11	
<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"/>		<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)

Tenisch, Linneman & Paratransit Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. LEONAS, DANIEL J.

Mailing Address

762 EMPIRE Rd

City

POLAND

State

ME

Zip Code

04274

FEC ID number of contributing federal political committee.

C

Name of Employer

CITY CAB

Occupation

PRES.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

11 15 2001

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. LOOP, DIANA S.

Mailing Address

P.O. Box 2637

City

AVALON

State

CA

Zip Code

90704

FEC ID number of contributing federal political committee.

C

Name of Employer

CATALINA TRANSPORTATION

Occupation

PRES.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 15 2001

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. McLARY, JAMES J.

Mailing Address

8206 MACK ST.

City

ALEXANDRIA

State

VA

Zip Code

22308

FEC ID number of contributing federal political committee.

C

Name of Employer

SOUTHEAST TRANSIT MGT

Occupation

PRES.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 15 2001

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (Last page this line number only)

700.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 10 OF 11	
(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

Full Name (Last, First, Middle Initial)

A. SLAGLE, LARRY E.

Mailing Address

1391 CORONA AVE

City

NORCO

State

CA

Zip Code

92860

FEC ID number of contributing federal political committee.

C

Name of Employer

YELLOW CAB

Occupation

PRES

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 15 2001

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. DWIRI, NATHAN

Mailing Address

34 PRINCETON ST

City

SAN FRANCISCO

State

CA

Zip Code

94134

FEC ID number of contributing federal political committee.

C

Name of Employer

YELLOW CAB

Occupation

GEN. MGR.

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 15 2001

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. GADDIS, JESSE P.

Mailing Address

P.O. Box 950, NEW RIVER STATION

City

FT. LAUDERDALE

State

FL

Zip Code

33302

FEC ID number of contributing federal political committee.

C

Name of Employer

YELLOW CAB

Occupation

CHAIRMAN

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 15 2001

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional) ▶

1100.00

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: (check only one)		PAGE 11 OF 11	
	<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

Full Name (Last, First, Middle Initial)
A. *SMARELLI, MARY*

Mailing Address
1707 PROSPECT AVE #16A

City State Zip Code
MILWAUKEE WI 53202

FEC ID number of contributing federal political committee
C

Name of Employer Occupation
TRANSIT EXPRESS PRES.

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date
30000

Date of Receipt
12 28 2001

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. *CIRRUZZO JOSEPH*

Mailing Address
66 WADSWORTH AVE

City State Zip Code
STATEN ISLAND NY 10305

FEC ID number of contributing federal political committee
C

Name of Employer Occupation
A ELEGANT LIMOUSINES PRES.

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date
15000

Date of Receipt
12 28 2001

Amount of Each Receipt this Period
150.00

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

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) *450.00*

TOTAL This Period (last page this line number only) *13800.00*

**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)						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"/> 28	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 28d	

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NAME OF COMMITTEE (in Full)
Taxicat, Limousine & Paratransit Association Political Action Committee

A. *CITIZENS FOR TOM PETRI*

Full Name (Last, First, Middle Initial)

Date of Disbursement: *10/03/2001*

Mailing Address: *4451 BROOKFIELD CORP DR #200*

City: *CHANTILLY VA* State: *VA* Zip Code: *20151*

Purpose of Disbursement: *support re-election*

Candidate Name: *TOM PETRI*

Office Sought: House Senate President

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

State: *WI* District: *6*

Amount of Each Disbursement this Period: *10,000*

B. *BILL SHUSTER FOR CONGRESS*

Full Name (Last, First, Middle Initial)

Date of Disbursement: *10/10/2001*

Mailing Address: *P.O. Box 27*

City: *HOLLIDAYSBURG PA* State: *PA* Zip Code: *16648*

Purpose of Disbursement: *support re-election*

Candidate Name: *BILL SHUSTER*

Office Sought: House Senate President

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

State: *PA* District: *9*

Amount of Each Disbursement this Period: *5000*

C. *FRIENDS OF JIM OBERSTAR*

Full Name (Last, First, Middle Initial)

Date of Disbursement: *10/17/2001*

Mailing Address: *424 WARNER ST. NW*

City: *WASHINGTON DC* State: *DC* Zip Code: *20001*

Purpose of Disbursement: *support re-election*

Candidate Name: *JIM OBERSTAR*

Office Sought: House Senate President

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

State: *MD* District: *8*

Amount of Each Disbursement this Period: *10,000*

SUBTOTAL of Disbursements This Page (optional) *25,000*

TOTAL This Period (last page this line number only)

**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 <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	

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NAME OF COMMITTEE (In Full)
Topical, Limerick & Paratronic Association Political Action Committee

A. COLEMAN FOR SENATE

Full Name (Last, First, Middle Initial)

Mailing Address: 2530 S. ADAM ST

City: ARLINGTON State: VA Zip Code: 22206

Purpose of Disbursement: support election to Senate in MN

Candidate Name: COLEMAN Category/Type:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MN District:

Date of Disbursement: 11 / 19 / 2007

Amount of Each Disbursement this Period: 1,000.00

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


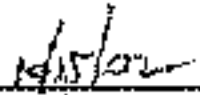
Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)	<u>1,000.00</u>
TOTAL This Period (last page this line number only)	<u>3,500.00</u>

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 10/15/02
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	 DATE PREPARED

2002年10月15日 10:15 AM