

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

APR 15 9 11 AM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. C00132480 012390  
 ALFRED P LAGASSE III  
 INTERNATIONAL TAXICAB ASSOCIAT  
 ION POLITICAL ACTION COMMITTEE  
 3849 FARRAGUT AVE  
 KENSINGTON MD 20895

2. FEC IDENTIFICATION NUMBER  
 3.  This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report

- Monthly Report Due On:  
 February 20  June 20  October 20  
 March 20  July 20  November 20  
 April 20  August 20  December 20  
 May 20  September 20  January 31  
 Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
 election on \_\_\_\_\_ in the State of \_\_\_\_\_  
 Thirtieth day report following the General Election on \_\_\_\_\_  
 in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	1/1/96 through 3/31/96		
6. (a) Cash on Hand January 1, 1996			\$ 23,378.31
(b) Cash on Hand at Beginning of Reporting Period		\$ 23,378.31	
(c) Total Receipts (from Line 19)		\$ 2,250.00	\$ 2,250.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 25,628.31	\$ 25,628.31
7. Total Disbursements (from Line 30)		\$ 8,500.00	\$ 8,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 17,128.31	\$ 17,128.31
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		\$ —	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-9420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		\$ —	

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: *Alfred Lagasse* Date: **4/15/96**

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

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**FEC FORM 3X**  
(revised 9/83)

9 3 0 3 0 2 3 0 4 7

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
<i>International Taxicab &amp; Limousine Association P.A.C.</i>		FROM <i>1/1/96</i>	TO <i>3/31/96</i>	
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year	
11.	Contributions (other than loans) From:			
a.	Individuals/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	<i>2,250</i>	<i>2,250</i>	11(a)(i)
ii.	Unitemized			11(a)(ii)
ii.	Total (add i and ii) >	<i>2,250</i>	<i>2,250</i>	11(a)(ii)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions (add a ii, b and c) >	<i>2,250</i>	<i>2,250</i>	11(d)
12.	Transfers From Affiliated/Other Party Committees			12
13.	All Loans Received			13
14.	Loan Repayments Received			14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17.	Other Federal Receipts (Dividends, Interest, etc.)			17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	<i>2,250</i>	<i>2,250</i>	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	<i>2,250</i>	<i>2,250</i>	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share			21(a)(i)
ii.	Non-Federal Share			21(a)(ii)
b.	Other Federal Operating Expenditures			21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >			21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	<i>8,500</i>	<i>8,500</i>	23
24.	Independent Expenditures (use Schedule E)			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26.	Loan Repayments Made			26
27.	Loans Made			27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees			28(a)
b.	Political Party Committees			28(b)
c.	Other Political Committees (such as PACs)			28(c)
d.	Total Contribution Refunds (add a, b and c) >			28(d)
29.	Other Disbursements			29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	<i>8,500</i>	<i>8,500</i>	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	<i>8,500</i>	<i>8,500</i>	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	<i>2,250</i>	<i>2,250</i>	32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans)(subtract line 33 from line 32)	<i>2,250</i>	<i>2,250</i>	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >			35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 36 from line 35) >			37

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)

*International Taxicab and Limousine Association Political Action Committee*

9  
6  
0  
3  
0  
2  
3  
0  
2  
3  
0  
8  
1  
9

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Ellis Houston</i> <i>7202 Lovington Blvd.</i> <i>Houston, TX 77022</i> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<i>United Cab Co</i> Occupation <i>V.P.</i> Aggregate Year-to-Date > \$ <i>500.00</i>	<i>2/23/96</i>	<i>\$500.00</i>
B. Full Name, Mailing Address and ZIP Code <i>Carol Zeffingwell</i> <i>3315 N. Second St.</i> <i>Minneapolis, MN 55412</i> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<i>Suburban Taxi</i> Occupation <i>V.P.</i> Aggregate Year-to-Date > \$ <i>750.00</i>	<i>2/16/96</i>	<i>\$750.00</i>
C. Full Name, Mailing Address and ZIP Code <i>Neal Nichols</i> <i>3251 Washington Blvd.</i> <i>Arlington, VA 22201</i> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<i>Transportation General</i> Occupation <i>CEO</i> Aggregate Year-to-Date > \$ <i>1,000.00</i>	<i>2/16/96</i>	<i>\$1,000.00</i>
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

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

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

*\$2,250.00*

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	FOR LINE NUMBER	

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**NAME OF COMMITTEE (in Full)**

*International Taxicab and Limousine Association Political Action Committee*

0  
3  
6  
3  
9

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Bob Shuster for Congress Comm. 19 Wilkes St. Alexandria, VA 22314</i>	<i>Congressional race in PA</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>1/23/96</i>	<i>\$ 2,000<sup>00</sup></i>
<i>Tennesseans for Thompson 196 1808 W. End Ave., #901 Nashville, TN 37803</i>	<i>support re-election TN</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>2/27/96</i>	<i>\$ 500<sup>00</sup></i>
<i>Hatchinson for Congress 4451 Brookfield Corp Dr #200 Chantilly, VA 22021</i>	<i>support re-election AR</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>3/8/96</i>	<i>\$ 1,000<sup>00</sup></i>
<i>Citizens for Tom Petri 4451 Brookfield Corp Dr. #200 Chantilly, VA 22021</i>	<i>support re-election WI</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>3/14/96</i>	<i>\$ 1,000<sup>00</sup></i>
<i>Friends of Jim Donhofe 507 Capital Ct., NE #100 Washington, DC 20002</i>	<i>support re-election OK</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>3/14/96</i>	<i>\$ 2,000<sup>00</sup></i>
<i>Friends of Jerry Prosser P.O. Box 77166 Washington, DC 20013</i>	<i>support re-election SD</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>3/14/96</i>	<i>\$ 2,000<sup>00</sup></i>
<b>G. Full Name, Mailing Address and ZIP Code</b>	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
<b>H. Full Name, Mailing Address and ZIP Code</b>	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
<b>I. Full Name, Mailing Address and ZIP Code</b>	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

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

*\$ 8,500<sup>00</sup>*

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.

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DATE OF RECEIPT

First Class Mail

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*4-16-96*

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POSTMARKED

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Postmark Illegible

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and Registration

DATE OF RECEIPT

Received from the Senate Office of Public  
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

*SES*  
PREPARER

*4-18-96*  
DATE PREPARED

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