

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED  
FEC MAIL  
OPERATIONS CENTER

NOV 20 2004 12:14

1. NAME OF COMMITTEE (in full)

USE FED MAILING LABEL OR TYPE OR PRINT

Example: if typing, type over the lines.

12FE405

Taxicab, Limousine & Paratransit Association Political Action Committee

ADDRESS (number and street)

3849 Farragut Avenue

Check if different than previously reported (ACC)

Kensington

MD

20895

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C 09132480

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(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)

(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)

(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

04 01 2004

through

06 30 2004

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

07 15 2004

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

FEC FORM 3X (Revised 1/01)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

Taxicab, Limousine & Paratransit Association Political Action Committee

Report Covering the Period: From: **04** **21** **2004** To: **06** **30** **2004**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2004</b>		<b>41,043.65</b>
(b) Cash on Hand at Beginning of Reporting Period	<b>37,068.65</b>	
(c) Total Receipts (from Line 19)	<b>727,500.00</b>	<b>73,000.00</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<b>44,343.65</b>	<b>48,343.65</b>
7. Total Disbursements (from Line 30)	<b>5,000.00</b>	<b>9,000.00</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<b>39,343.65</b>	<b>39,343.65</b>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	<b>0.00</b>	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	<b>0.00</b>	

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 20483

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

Taxicab, Limousine & Paratransit Association Political Action Committee

Report Covering the Period: From: 04 01 2004

To: 06 30 2004

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) .....	7,200.00	
(j) Unitemized .....	75.00	
(ii) TOTAL (add Lines 11(a)(i) and (ii) .....	7,275.00	7,300.00
(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) .....	7,275.00	7,300.00
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) .....	7,275.00	7,300.00
20. Total Federal Receipts (subtract Line 15 from Line 19) .....	7,275.00	7,300.00

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 .....		
(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 .....	500000	900000
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §411a(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) .....	500000	900000
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) .....	500000	900000

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans) (from Line 11(d), page 3) .....	727500	730000
33. Total Contribution Refunds (from Line 28(d)) .....		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32) .....	727500	730000
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**

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 5

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	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 (Last, First, Middle Initial)  
ROBERT WERTH

Mailing Address  
5414 THETFORD PL

City ALEXANDRIA State VA Zip Code 22310

FEC ID number of contributing federal political committee. C

Name of Employer DIAMOND TRANSPORTATION Occupation PRES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date 1,000.00

Date of Receipt

06 / 10 / 2004

Amount of Each Receipt this Period

1,000.00

**B.** Full Name (Last, First, Middle Initial)  
BRIAN McBRIDE

Mailing Address  
2069 W THIRD ST.

City CLEVELAND State OH Zip Code 44113

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 750.00

Date of Receipt

06 / 10 / 2004

Amount of Each Receipt this Period

750.00

**C.** Full Name (Last, First, Middle Initial)  
J. M. WILCOX

Mailing Address  
2213 E. HILLWOOD DR.

City MOBILE State AL Zip Code 36605

FEC ID number of contributing federal political committee. C

Name of Employer MOBILE BAY TRANSPORTATION Occupation PRES.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date 500.00

Date of Receipt

06 / 10 / 2004

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2,250.00

**SCHEDULE A (FEC Form SX)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE 2 OF 5	
(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. RICHARD HEWITT

Mailing Address

14430 - 18<sup>th</sup> FAIRWAY

City

ALPHARETTA

State

GA

Zip Code

30004

FEC ID number of contributing federal political committee.

C

Date of Receipt

06 / 10 / 2004

Amount of Each Receipt this Period

500.00

Name of Employer

CHECKER CAB

Occupation

PRES.

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

B. CRAIG HUGHES

Mailing Address

10421 E LAFAYETTE BLVD.

City

SCOTTSDALE

State

AZ

Zip Code

85251

FEC ID number of contributing federal political committee.

C

Date of Receipt

06 / 10 / 2004

Amount of Each Receipt this Period

500.00

Name of Employer

TOTAL TRANSIT

Occupation

PRES

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

C. WILLIAM H. SMYTHE IV

Mailing Address

P.O. Box 400

City

MEMPHIS

State

TN

Zip Code

38101

FEC ID number of contributing federal political committee.

C

Date of Receipt

06 / 10 / 2004

Amount of Each Receipt this Period

500.00

Name of Employer

CHECKER CAB

Occupation

Vice Pres.

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1,500.00

**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 3 OF 5						
<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) JOSEPH CHERNOW  
 Mailing Address 112 DETERING  
 City HOUSTON State TX Zip Code 77007  
 FEC ID number of contributing federal political committee: C  
 Name of Employer GREATER HOUSTON TRANS. Occupation PRES  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 50000  
 Date of Receipt 06 / 10 / 2004  
 Amount of Each Receipt this Period 50000

**B.** Full Name (Last, First, Middle Initial) WILLIAM YHINKE  
 Mailing Address 34 SWEENEY CT.  
 City N. TONAWANDA State NY Zip Code 14120  
 FEC ID number of contributing federal political committee: C  
 Name of Employer LIBERTY CAB Occupation PRES.  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 50000  
 Date of Receipt 06 / 10 / 2004  
 Amount of Each Receipt this Period 50000

**C.** Full Name (Last, First, Middle Initial) JESSE GADDIS  
 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 YELLOW CAB Occupation PRES.  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 50000  
 Date of Receipt 06 / 10 / 2004  
 Amount of Each Receipt this Period 50000

**SUBTOTAL** of Receipts This Page (optional) 150000  
**TOTAL** This Period (last page this line number only) 150000

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

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

FOR LINE NUMBER:		PAGE 4 OF 5	
(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. MARY D. EMARELLI

Mailing Address

1707 N. PROSPECT AVE # 16A

City

MILWAUKEE

State

WI

Zip Code

53202

FEC ID number of contributing federal political committee.

C

Name of Employer

TRANSIT EXPRESS

Occupation

PRES.

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 10 / 2004

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. JUDITH D. SWYSTUN

Mailing Address

2000 E. OCEAN VIEW AVE.

City

NORFOLK

State

VA

Zip Code

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

06 / 10 / 2004

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. NEAL NICHOLS

Mailing Address

3251 WASHINGTON BLVD.

City

ARLINGTON

State

VA

Zip Code

22201

FEC ID number of contributing federal political committee.

C

Name of Employer

RED TOP CABS

Occupation

PRES.

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 10 / 2004

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)

1500.00



**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 5  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	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. JO-ANNE THOMPSON

Mailing Address  
3 MAYFLOWER CIR.  
FRAMINGHAM MA 01702

FEC ID number of contributing federal political committee: C

Name of Employer: TOMMY'S TAXI  
Occupation: PRES.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date: 3,000.00

Date of Receipt: 06 / 10 / 2004

Amount of Each Receipt this Period: 3,000.00

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

Mailing Address  
248 WEED AVE  
STATEN ISLAND NY 10306

FEC ID number of contributing federal political committee: C

Name of Employer: A ELEGANT INTL LIMO  
Occupation: PRES.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date: 1,500.00

Date of Receipt: 06 / 10 / 2004

Amount of Each Receipt this Period: 1,500.00

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): 7,200.00

**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)

<input type="checkbox"/> 21a	<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"/> 29

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NAME OF COMMITTEE (in Full)

Taxicab, Limousine & Paratransit Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens for Tom Petri

Date of Disbursement

04 / 22 / 2004

Mailing Address

P.O. Box 270

Amount of Each Disbursement this Period

20,000.00

City

Fond du Lac

State

WI

Zip Code

54936

Purpose of Disbursement

contribution

011

Candidate Name

Thomas Petri

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: WI

District: 6

Full Name (Last, First, Middle Initial)

Date of Disbursement

05 / 04 / 2004

Amount of Each Disbursement this Period

1,000.00

B. Duncan for Congress

Mailing Address

c/o Don Walker, 1318 Dewitt Ave

City

Alexandria

State

VA

Zip Code

22301

Purpose of Disbursement

contribution

011

Candidate Name

John J. Duncan, Jr.

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: TN

District: 2

Full Name (Last, First, Middle Initial)

Date of Disbursement

06 / 15 / 2004

Amount of Each Disbursement this Period

1,000.00

C. Duncan for Congress

Mailing Address

c/o Don Walker, 1318 Dewitt Ave.

City

Alexandria

State

VA

Zip Code

22301

Purpose of Disbursement

contribution

011

Candidate Name

John J. Duncan, Jr.

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

40,000.00

**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)

<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"/> 29b	<input type="checkbox"/> 29c

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NAME OF COMMITTEE (In Full)

Taxicab, Limousine & Paratransit Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. *Friends of Jim Oberstar*

Date of Disbursement

06, 24, 2004

Mailing Address

424 Warner St NW

Amount of Each Disbursement this Period

100000

City

Washington

State

DC

Zip Code

20001

Purpose of Disbursement

Contribution

011

Category/Type

Candidate Name

Jim Oberstar

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: MN

District: 5

Full Name (Last, First, Middle Initial)

Date of Disbursement

06, 24, 2004

B.

Mailing Address

Amount of Each Disbursement this Period

City

State

Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

06, 24, 2004

C.

Mailing Address

Amount of Each Disbursement this Period

City

State

Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

100000

TOTAL This Period (last page this line number only)

500000

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 type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
	Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	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>7-19-04</i>
<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>SEL</i> PREPARER	<i>7-20-04</i> DATE PREPARED