

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.
National Limousine Association Political Action Committee

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

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

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 Patricia Nelson

Signature of Treasurer Patricia Nelson [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

National Limousine Association Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		16571.35
(b) Cash on Hand at Beginning of Reporting Period.....	27237.31	
(c) Total Receipts (from Line 19)	15375.00	28395.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	42612.31	44966.35
7. Total Disbursements (from Line 31).....	6660.00	9014.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	35952.31	35952.31
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
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)

Write or Type Committee Name

National Limousine Association Political Action Committee

Report Covering the Period: From: / / To: / /

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).....	14750.00	24300.00
(ii) Unitemized	625.00	4095.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	15375.00	28395.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	15375.00	28395.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	15375.00	28395.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	15375.00	28395.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	410.00	764.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	410.00	764.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	8000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	250.00	250.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6660.00	9014.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6660.00	9014.04

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)	15375.00	28395.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15375.00	28395.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	410.00	764.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	410.00	764.04

**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 36
	(check only one)	
<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"/> 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)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Robert Alexander		Date of Receipt MM / DD / YYYY 07 / 12 / 2011 Transaction ID : SA11AI.4749
Mailing Address 6010 Executive Boulevard		Amount of Each Receipt this Period 250.00
City Rockville	State MD	Zip Code 20852
FEC ID number of contributing federal political committee. C		
Name of Employer RMA Worldwide	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. Robert Alexander		Date of Receipt MM / DD / YYYY 08 / 10 / 2011 Transaction ID : SA11AI.4771
Mailing Address 6010 Executive Boulevard		Amount of Each Receipt this Period 250.00
City Rockville	State MD	Zip Code 20852
FEC ID number of contributing federal political committee. C		
Name of Employer RMA Worldwide	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. Robert Alexander		Date of Receipt MM / DD / YYYY 09 / 12 / 2011 Transaction ID : SA11AI.4788
Mailing Address 6010 Executive Boulevard		Amount of Each Receipt this Period 250.00
City Rockville	State MD	Zip Code 20852
FEC ID number of contributing federal political committee. C		
Name of Employer RMA Worldwide	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 36
	(check only one)	
<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"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Robert Alexander		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 11 / 2011
Mailing Address 6010 Executive Boulevard		Transaction ID : SA11AI.4812
City Rockville	State MD	Zip Code 20852
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer RMA Worldwide	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Robert Alexander		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 10 / 2011
Mailing Address 6010 Executive Boulevard		Transaction ID : SA11AI.4835
City Rockville	State MD	Zip Code 20852
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer RMA Worldwide	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

Full Name (Last, First, Middle Initial) C. Robert Alexander		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 12 / 2011
Mailing Address 6010 Executive Boulevard		Transaction ID : SA11AI.4863
City Rockville	State MD	Zip Code 20852
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer RMA Worldwide	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 8 OF 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Ahmed Atris

Mailing Address 42897 Vestals Gap Drive

City Ashburn State VA Zip Code 20148

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

Name of Employer US Sedan Service, Inc. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt
07 / 14 / 2011

Transaction ID : SA11AI.4751

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Ahmed Atris

Mailing Address 42897 Vestals Gap Drive

City Ashburn State VA Zip Code 20148

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

Name of Employer US Sedan Service, Inc. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt
08 / 16 / 2011

Transaction ID : SA11AI.4773

Amount of Each Receipt this Period
250.00

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

Mailing Address 42897 Vestals Gap Drive

City Ashburn State VA Zip Code 20148

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

Name of Employer US Sedan Service, Inc. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1350.00**

Date of Receipt
09 / 14 / 2011

Transaction ID : SA11AI.4790

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **750.00**

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 36
<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)
National Limousine Association Political Action Committee

A. Ahmed Atris
Full Name (Last, First, Middle Initial)

Mailing Address 42897 Vestals Gap Drive

City Ashburn	State VA	Zip Code 20148
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FEC ID number of contributing federal political committee. **C**

Name of Employer US Sedan Service, Inc.	Occupation President
--------------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	14	/	2011

Transaction ID : SA11AI.4815

Amount of Each Receipt this Period
250.00

B. Ahmed Atris
Full Name (Last, First, Middle Initial)

Mailing Address 42897 Vestals Gap Drive

City Ashburn	State VA	Zip Code 20148
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FEC ID number of contributing federal political committee. **C**

Name of Employer US Sedan Service, Inc.	Occupation President
--------------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2011

Transaction ID : SA11AI.4837

Amount of Each Receipt this Period
250.00

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

Mailing Address 42897 Vestals Gap Drive

City Ashburn	State VA	Zip Code 20148
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FEC ID number of contributing federal political committee. **C**

Name of Employer US Sedan Service, Inc.	Occupation President
--------------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2011

Transaction ID : SA11AI.4865

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 10 OF 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

A. Brad Balaban
Full Name (Last, First, Middle Initial)

Mailing Address 4675 Wynn Road

City Las Vegas	State NV	Zip Code 89103
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FEC ID number of contributing federal political committee. **C**

Name of Employer ODS Limousine	Occupation President
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2011

Transaction ID : SA11AI.4856

Amount of Each Receipt this Period
25.00

B. Gary Buffo
Full Name (Last, First, Middle Initial)

Mailing Address Box 910

City Penngrove	State CA	Zip Code 94951
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pure Luxury	Occupation President
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2011

Transaction ID : SA11AI.4757

Amount of Each Receipt this Period
3000.00

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

Mailing Address 1380 Richmond Court

City East Meadow	State NY	Zip Code 11554
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FEC ID number of contributing federal political committee. **C**

Name of Employer Valera Global	Occupation President
-----------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2011

Transaction ID : SA11AI.4840

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	3050.00
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 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

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

Mailing Address 1380 Richmond Court

City East Meadow State NY Zip Code 11554

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

Name of Employer Valera Global Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011

Transaction ID : SA11AI.4868

Amount of Each Receipt this Period
 250.00

B. Jon Epstein
Full Name (Last, First, Middle Initial)

Mailing Address 14 Greenfield Hill

City Sparta State NJ Zip Code 07871

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

Name of Employer Royal Coachman Worldwide Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2011

Transaction ID : SA11AI.4741

Amount of Each Receipt this Period
 100.00

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

Mailing Address 14 Greenfield Hill

City Sparta State NJ Zip Code 07871

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

Name of Employer Royal Coachman Worldwide Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2011

Transaction ID : SA11AI.4764

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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 12 OF 36
<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)
National Limousine Association Political Action Committee

A. Jon Epstein
Full Name (Last, First, Middle Initial)
Mailing Address 14 Greenfield Hill
City Sparta State NJ Zip Code 07871
FEC ID number of contributing federal political committee. **C**
Name of Employer Royal Coachman Worldwide Occupation President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **620.00**

Date of Receipt **12 / 08 / 2011**
Transaction ID : SA11AI.4855
Amount of Each Receipt this Period **100.00**

B. Diane Forgy
Full Name (Last, First, Middle Initial)
Mailing Address 10515 Ensley Lane
City Leawood State KS Zip Code 66206
FEC ID number of contributing federal political committee. **C**
Name of Employer Overland Limousine Occupation Owner
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **900.00**

Date of Receipt **07 / 18 / 2011**
Transaction ID : SA11AI.4752
Amount of Each Receipt this Period **250.00**

C. Diane Forgy
Full Name (Last, First, Middle Initial)
Mailing Address 10515 Ensley Lane
City Leawood State KS Zip Code 66206
FEC ID number of contributing federal political committee. **C**
Name of Employer Overland Limousine Occupation Owner
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1150.00**

Date of Receipt **08 / 16 / 2011**
Transaction ID : SA11AI.4774
Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional)..... **600.00**
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 13 OF 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

A. Diane Forgy
Full Name (Last, First, Middle Initial)
Mailing Address 10515 Ensley Lane
City Leawood State KS Zip Code 66206
FEC ID number of contributing federal political committee. **C**
Name of Employer Overland Limousine Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 16 / 2011
Transaction ID : SA11AI.4791
Amount of Each Receipt this Period
250.00

B. Diane Forgy
Full Name (Last, First, Middle Initial)
Mailing Address 10515 Ensley Lane
City Leawood State KS Zip Code 66206
FEC ID number of contributing federal political committee. **C**
Name of Employer Overland Limousine Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1650.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 08 / 2011
Transaction ID : SA11AI.4857
Amount of Each Receipt this Period
250.00

C. Neil Goodman
Full Name (Last, First, Middle Initial)
Mailing Address 3780 Northeast 20th Terrace
City Aventura State FL Zip Code 33180
FEC ID number of contributing federal political committee. **C**
Name of Employer Aventura Worldwide Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 27 / 2011
Transaction ID : SA11AI.4762
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 14 OF 36
Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: (check only one)
[X] 11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

A. Neil Goodman
Full Name (Last, First, Middle Initial)
Mailing Address 3780 Northeast 20th Terrace
City Aventura State FL Zip Code 33180
FEC ID number of contributing federal political committee. C
Name of Employer Aventura Worldwide Occupation Owner
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 500.00

Date of Receipt 09 / 01 / 2011
Transaction ID : SA11AI.4782
Amount of Each Receipt this Period 100.00

B. Neil Goodman
Full Name (Last, First, Middle Initial)
Mailing Address 3780 Northeast 20th Terrace
City Aventura State FL Zip Code 33180
FEC ID number of contributing federal political committee. C
Name of Employer Aventura Worldwide Occupation Owner
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 600.00

Date of Receipt 09 / 27 / 2011
Transaction ID : SA11AI.4797
Amount of Each Receipt this Period 100.00

C. Neil Goodman
Full Name (Last, First, Middle Initial)
Mailing Address 3780 Northeast 20th Terrace
City Aventura State FL Zip Code 33180
FEC ID number of contributing federal political committee. C
Name of Employer Aventura Worldwide Occupation Owner
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 700.00

Date of Receipt 10 / 27 / 2011
Transaction ID : SA11AI.4820
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) 300.00
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 15 OF 36
<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)
National Limousine Association Political Action Committee

A. Neil Goodman
Full Name (Last, First, Middle Initial)
Mailing Address 3780 Northeast 20th Terrace

City Aventura	State FL	Zip Code 33180
------------------	-------------	-------------------

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

Name of Employer Aventura Worldwide	Occupation Owner
----------------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2011

Transaction ID : SA11AI.4861

Amount of Each Receipt this Period

100.00

B. Chris Hundley
Full Name (Last, First, Middle Initial)
Mailing Address 5118 Vinelind Avenue

City No. Hollywood	State CA	Zip Code 91601
-----------------------	-------------	-------------------

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

Name of Employer The Limousine Collection	Occupation President
----------------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2011

Transaction ID : SA11AI.4747

Amount of Each Receipt this Period

100.00

c. Chris Hundley
Full Name (Last, First, Middle Initial)
Mailing Address 5118 Vinelind Avenue

City No. Hollywood	State CA	Zip Code 91601
-----------------------	-------------	-------------------

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

Name of Employer The Limousine Collection	Occupation President
----------------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	10	/	2011

Transaction ID : SA11AI.4769

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 16 OF 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Chris Hundley

Mailing Address 5118 Vinelind Avenue

City State Zip Code
 No. Hollywood CA 91601

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

Name of Employer Occupation
 The Limousine Collection President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 620.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2011

Transaction ID : SA11AI.4786

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. Chris Hundley

Mailing Address 5118 Vinelind Avenue

City State Zip Code
 No. Hollywood CA 91601

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

Name of Employer Occupation
 The Limousine Collection President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 720.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2011

Transaction ID : SA11AI.4810

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
c. Chris Hundley

Mailing Address 5118 Vinelind Avenue

City State Zip Code
 No. Hollywood CA 91601

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

Name of Employer Occupation
 The Limousine Collection President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 820.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2011

Transaction ID : SA11AI.4833

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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 17 OF 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Chris Hundley

Mailing Address 5118 Vinelind Avenue

City State Zip Code
No. Hollywood CA 91601

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

Name of Employer Occupation
The Limousine Collection President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
920.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : SA11AI.4862

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. George Jacobs

Mailing Address 629 Woodside Ave

City State Zip Code
Hinsdale IL 60521

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

Name of Employer Occupation
Windy City Limousine & Bus Co. Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2011
Transaction ID : SA11AI.4761

Amount of Each Receipt this Period
100.00

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

Mailing Address 629 Woodside Ave

City State Zip Code
Hinsdale IL 60521

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

Name of Employer Occupation
Windy City Limousine & Bus Co. Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2011
Transaction ID : SA11AI.4780

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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 18 OF 36
<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)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial) A. George Jacobs		Date of Receipt MM / DD / YYYY 12 / 08 / 2011 Transaction ID : SA11AI.4858
Mailing Address 629 Woodside Ave		Amount of Each Receipt this Period 100.00
City Hinsdale	State IL	Zip Code 60521
FEC ID number of contributing federal political committee. C		
Name of Employer Windy City Limousine & Bus Co.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Richard Kane		Date of Receipt MM / DD / YYYY 07 / 27 / 2011 Transaction ID : SA11AI.4763
Mailing Address 2300 T Street NE		Amount of Each Receipt this Period 250.00
City Washington	State DC	Zip Code 20002
FEC ID number of contributing federal political committee. C		
Name of Employer International Limousine Servic	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Richard Kane		Date of Receipt MM / DD / YYYY 08 / 29 / 2011 Transaction ID : SA11AI.4781
Mailing Address 2300 T Street NE		Amount of Each Receipt this Period 250.00
City Washington	State DC	Zip Code 20002
FEC ID number of contributing federal political committee. C		
Name of Employer International Limousine Servic	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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 19 OF 36
<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)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Richard Kane		Date of Receipt MM / DD / YYYY 09 / 27 / 2011 Transaction ID : SA11AI.4796
Mailing Address 2300 T Street NE		Amount of Each Receipt this Period 250.00
City Washington	State DC	Zip Code 20002
FEC ID number of contributing federal political committee. C	Name of Employer International Limousine Servic	
Occupation Owner		Aggregate Year-to-Date ▼ 1500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Richard Kane		Date of Receipt MM / DD / YYYY 10 / 27 / 2011 Transaction ID : SA11AI.4819
Mailing Address 2300 T Street NE		Amount of Each Receipt this Period 250.00
City Washington	State DC	Zip Code 20002
FEC ID number of contributing federal political committee. C	Name of Employer International Limousine Servic	
Occupation Owner		Aggregate Year-to-Date ▼ 1750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Richard Kane		Date of Receipt MM / DD / YYYY 11 / 29 / 2011 Transaction ID : SA11AI.4841
Mailing Address 2300 T Street NE		Amount of Each Receipt this Period 250.00
City Washington	State DC	Zip Code 20002
FEC ID number of contributing federal political committee. C	Name of Employer International Limousine Servic	
Occupation Owner		Aggregate Year-to-Date ▼ 2000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 20 OF 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Richard Kane			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 27 / 2011 Transaction ID : SA11AI.4869
Mailing Address 2300 T Street NE			Amount of Each Receipt this Period 250.00
City Washington	State DC	Zip Code 20002	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 2250.00
Name of Employer International Limousine Servic		Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Greg Pruitt			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 19 / 2011 Transaction ID : SA11AI.4777
Mailing Address 1403 N. Purdue Avenue			Amount of Each Receipt this Period 100.00
City Oklahoma City	State OK	Zip Code 73127	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 550.00
Name of Employer Kings Worldwide Transportation		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Greg Pruitt			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 19 / 2011 Transaction ID : SA11AI.4793
Mailing Address 1403 N. Purdue Avenue			Amount of Each Receipt this Period 100.00
City Oklahoma City	State OK	Zip Code 73127	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 650.00
Name of Employer Kings Worldwide Transportation		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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 21 OF 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Greg Pruitt		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 18 / 2011 Transaction ID : SA11AI.4816
Mailing Address 1403 N. Purdue Avenue		Amount of Each Receipt this Period 100.00
City Oklahoma City	State OK	Zip Code 73127
FEC ID number of contributing federal political committee. C	Name of Employer Kings Worldwide Transportation	Occupation President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Greg Pruitt		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2011 Transaction ID : SA11AI.4838
Mailing Address 1403 N. Purdue Avenue		Amount of Each Receipt this Period 100.00
City Oklahoma City	State OK	Zip Code 73127
FEC ID number of contributing federal political committee. C	Name of Employer Kings Worldwide Transportation	Occupation President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Full Name (Last, First, Middle Initial) C. Greg Pruitt		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 15 / 2011 Transaction ID : SA11AI.4866
Mailing Address 1403 N. Purdue Avenue		Amount of Each Receipt this Period 100.00
City Oklahoma City	State OK	Zip Code 73127
FEC ID number of contributing federal political committee. C	Name of Employer Kings Worldwide Transportation	Occupation President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 22 OF 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Stuart Rothstein

Mailing Address 9950 Lawrence Avenue

City State Zip Code
Schiller Park IL 60176

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

Name of Employer Occupation
Smart Cars, Inc. Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 27 / 2011

Transaction ID : SA11AI.4798

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Dawson Rutter

Mailing Address 322 North Road

City State Zip Code
Sudbury MA 01776

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

Name of Employer Occupation
Commonwealth Worldwide Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 25 / 2011

Transaction ID : SA11AI.4758

Amount of Each Receipt this Period
250.00

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

Mailing Address 322 North Road

City State Zip Code
Sudbury MA 01776

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

Name of Employer Occupation
Commonwealth Worldwide Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 23 / 2011

Transaction ID : SA11AI.4778

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 23 OF 36
<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)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Dawson Rutter		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : SA11AI.4794
Mailing Address 322 North Road		Amount of Each Receipt this Period 250.00
City Sudbury	State MA	Zip Code 01776
FEC ID number of contributing federal political committee. C	Name of Employer Commonwealth Worldwide	Occupation Owner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	

Full Name (Last, First, Middle Initial) B. Dawson Rutter		Date of Receipt MM / DD / YYYY 10 / 25 / 2011 Transaction ID : SA11AI.4817
Mailing Address 322 North Road		Amount of Each Receipt this Period 250.00
City Sudbury	State MA	Zip Code 01776
FEC ID number of contributing federal political committee. C	Name of Employer Commonwealth Worldwide	Occupation Owner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Dawson Rutter		Date of Receipt MM / DD / YYYY 11 / 23 / 2011 Transaction ID : SA11AI.4839
Mailing Address 322 North Road		Amount of Each Receipt this Period 250.00
City Sudbury	State MA	Zip Code 01776
FEC ID number of contributing federal political committee. C	Name of Employer Commonwealth Worldwide	Occupation Owner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 24 OF 36
<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)
National Limousine Association Political Action Committee

A. Dawson Rutter
Full Name (Last, First, Middle Initial)
Mailing Address 322 North Road

City Sudbury	State MA	Zip Code 01776
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FEC ID number of contributing federal political committee. **C**

Name of Employer Commonwealth Worldwide	Occupation Owner
--------------------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2011

Transaction ID : SA11AI.4867

Amount of Each Receipt this Period
250.00

B. Teale Smith
Full Name (Last, First, Middle Initial)
Mailing Address 65 North Street

City Saco	State ME	Zip Code 04072
--------------	-------------	-------------------

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

Name of Employer Maine Limousine Service	Occupation Owner
---------------------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2011

Transaction ID : SA11AI.4859

Amount of Each Receipt this Period
25.00

C. Scott Solombrino
Full Name (Last, First, Middle Initial)
Mailing Address 200 Second Street

City Chelsea	State MA	Zip Code 02150
-----------------	-------------	-------------------

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

Name of Employer Dav El Boston Inc.	Occupation Owner
----------------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2011

Transaction ID : SA11AI.4750

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	525.00
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 25 OF 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Scott Solombrino		Date of Receipt MM / DD / YYYY 08 / 11 / 2011 Transaction ID : SA11AI.4772
Mailing Address 200 Second Street		Amount of Each Receipt this Period 250.00
City Chelsea	State MA	Zip Code 02150
FEC ID number of contributing federal political committee. C	Name of Employer Dav El Boston Inc.	
Occupation Owner		Aggregate Year-to-Date ▼ 1500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Scott Solombrino		Date of Receipt MM / DD / YYYY 09 / 13 / 2011 Transaction ID : SA11AI.4789
Mailing Address 200 Second Street		Amount of Each Receipt this Period 250.00
City Chelsea	State MA	Zip Code 02150
FEC ID number of contributing federal political committee. C	Name of Employer Dav El Boston Inc.	
Occupation Owner		Aggregate Year-to-Date ▼ 1750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Scott Solombrino		Date of Receipt MM / DD / YYYY 10 / 11 / 2011 Transaction ID : SA11AI.4813
Mailing Address 200 Second Street		Amount of Each Receipt this Period 250.00
City Chelsea	State MA	Zip Code 02150
FEC ID number of contributing federal political committee. C	Name of Employer Dav El Boston Inc.	
Occupation Owner		Aggregate Year-to-Date ▼ 2000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 26 OF 36
	(check only one)	
<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"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

A. Scott Solombrino
Full Name (Last, First, Middle Initial)

Mailing Address 200 Second Street

City Chelsea State MA Zip Code 02150

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

Name of Employer Dav El Boston Inc. Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2011

Transaction ID : SA11AI.4836

Amount of Each Receipt this Period
250.00

B. Scott Solombrino
Full Name (Last, First, Middle Initial)

Mailing Address 200 Second Street

City Chelsea State MA Zip Code 02150

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

Name of Employer Dav El Boston Inc. Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011

Transaction ID : SA11AI.4864

Amount of Each Receipt this Period
250.00

c. Glenn Stafford
Full Name (Last, First, Middle Initial)

Mailing Address 6024 Jahnke Road

City Richmond State VA Zip Code 23225

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

Name of Employer Stafford Limousine, Love Limo Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : SA11AI.4854

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

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 27 OF 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

A. Shane Stickel
 Full Name (Last, First, Middle Initial)
 Mailing Address 8295 E. 28th Avenue
 City State Zip Code
 Denver CO 80238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Presidential Worldwide Transpo Owner
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011
Transaction ID : SA11AI.4745
 Amount of Each Receipt this Period
 50.00

B. Shane Stickel
 Full Name (Last, First, Middle Initial)
 Mailing Address 8295 E. 28th Avenue
 City State Zip Code
 Denver CO 80238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Presidential Worldwide Transpo Owner
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2011
Transaction ID : SA11AI.4767
 Amount of Each Receipt this Period
 50.00

C. Shane Stickel
 Full Name (Last, First, Middle Initial)
 Mailing Address 8295 E. 28th Avenue
 City State Zip Code
 Denver CO 80238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Presidential Worldwide Transpo Owner
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2011
Transaction ID : SA11AI.4784
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 28 OF 36
<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)
National Limousine Association Political Action Committee

A. Shane Stickel
Full Name (Last, First, Middle Initial)

Mailing Address 8295 E. 28th Avenue

City Denver	State CO	Zip Code 80238
----------------	-------------	-------------------

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

Name of Employer Presidential Worldwide Transpo	Occupation Owner
----------------------------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2011

Transaction ID : SA11AI.4809

Amount of Each Receipt this Period

50.00

B. Shane Stickel
Full Name (Last, First, Middle Initial)

Mailing Address 8295 E. 28th Avenue

City Denver	State CO	Zip Code 80238
----------------	-------------	-------------------

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

Name of Employer Presidential Worldwide Transpo	Occupation Owner
----------------------------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2011

Transaction ID : SA11AI.4832

Amount of Each Receipt this Period

50.00

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

Mailing Address 8295 E. 28th Avenue

City Denver	State CO	Zip Code 80238
----------------	-------------	-------------------

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

Name of Employer Presidential Worldwide Transpo	Occupation Owner
----------------------------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2011

Transaction ID : SA11AI.4860

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 29 OF 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Limousine Association Political Action Committee

A. Bijan Zoughi
Full Name (Last, First, Middle Initial)

Mailing Address 11132 Ventura Blvd
#100

City State Zip Code
Studio City CA 91604

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

Name of Employer Occupation
Diva Limousine Ltd. Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 08 / 2011

Transaction ID : SA11AI.4744

Amount of Each Receipt this Period
100.00

B. Bijan Zoughi
Full Name (Last, First, Middle Initial)

Mailing Address 11132 Ventura Blvd
#100

City State Zip Code
Studio City CA 91604

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

Name of Employer Occupation
Diva Limousine Ltd. Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 11 / 2011

Transaction ID : SA11AI.4766

Amount of Each Receipt this Period
100.00

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
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	14750.00

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens Bank

Mailing Address 791 E. Route 70

City Marlton State NJ Zip Code 08053

Purpose of Disbursement
Banking Fee

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4740

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Citizens Bank

Mailing Address 791 E. Route 70

City Marlton State NJ Zip Code 08053

Purpose of Disbursement
Banking Fee

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4799

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Citizens Bank

Mailing Address 791 E. Route 70

City Marlton State NJ Zip Code 08053

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4800

Amount of Each Disbursement this Period

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

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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens Bank

Mailing Address 791 E. Route 70

City Marltou State NJ Zip Code 08053

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2011

Transaction ID : SB21B.4804

Amount of Each Disbursement this Period

70.90

Full Name (Last, First, Middle Initial)

B. Citizens Bank

Mailing Address 791 E. Route 70

City Marltou State NJ Zip Code 08053

Purpose of Disbursement
Banking Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2011

Transaction ID : SB21B.4821

Amount of Each Disbursement this Period

62.18

Full Name (Last, First, Middle Initial)

C. Citizens Bank

Mailing Address 791 E. Route 70

City Marltou State NJ Zip Code 08053

Purpose of Disbursement
Banking Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2011

Transaction ID : SB21B.4845

Amount of Each Disbursement this Period

53.50

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

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

186.58

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens Bank

Mailing Address 791 E. Route 70

City Marlton State NJ Zip Code 08053

Purpose of Disbursement
Banking Fee

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2011

Transaction ID : SB21B.4846

Amount of Each Disbursement this Period

49.86

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

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

49.86

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

410.00

**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"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. ANDREWS FOR SENATE

Mailing Address 215 FOURTH AVENUE

City HADDON HEIGHTS State NJ Zip Code 08035

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: NJ District: 00

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : SB23.4844

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CITIZENS FOR JOHN OLVER FOR CONGRESS

Mailing Address P.O. Box 819
PO BOX 819

City Amherst State MA Zip Code 01004

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2011

Transaction ID : SB23.4823

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. DENHAM FOR CONGRESS

Mailing Address 2150 RIVER PLAZA DR., #150

City SACRAMENTO State CA Zip Code 95833

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 10

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23.4848

Amount of Each Disbursement this Period

1000.00

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

3000.00

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)

<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)

National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. FRIENDS OF ROY BLUNT

Mailing Address PO BOX 410444

City KANSAS CITY State MO Zip Code 64141

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: MO District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2011

Transaction ID : SB23.4803

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. GILLIBRAND FOR SENATE

Mailing Address 236 MASSACHUSETTS AVE SUITE 110

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: NY District: 00

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2011

Transaction ID : SB23.4829

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. LAUTENBERG FOR SENATE

Mailing Address 196 WEST STATE STREET
PO BOX 200596

City TRENTON State NJ Zip Code 08608

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NJ District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2011

Transaction ID : SB23.4807

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

6000.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Limousine Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. The Election Fund of 8th District Republicans (NJ)

Mailing Address 223 High Street

City Mt. Holly State NJ Zip Code 08060

Purpose of Disbursement
Non-Federal Contribution

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

Transaction ID : SB29.4873

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

250.00

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

250.00

: 97 `A -G7 9 @C B9CI G`H9LH`F9 @ H98 `HC `5 `F9DCFH`G7 <98I @ `CF `H9A -N5 HCB

Form/Schedule: SB29

Transaction ID : SB29.4873

Talked to Brian Jones, our FEC account manager, and he said to record as so. This is a state specific campaign fund for Senator Dawn Marie Addiego but we had to file in order to account for it in our accounting records and political contributions.

Form/Schedule:

Transaction ID: