Good Government Management Association

FPL Employees Political Action Committee
P.O. Box 14865 Juno Beach, Florida 33408

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

August 18, 1994

Federal Election Commission
999 E Street, N.W.
Washington, DC 20463

I am enclosing our Report of Receipt and Disbursements covering the period of July 1, 1994, through July 31, 1994, and which is due on August 20th.

Please let me know if there are any questions concerning the report. You can reach me at (407)691-2903, or, the Records Custodian at (407)694-3528.

Very truly yours,

Tom Wright

Tom Wright
Assistant Treasurer

TDW:mh

An association of
Florida Power and Light Company
management, professional and
administrative employees
dedicated to the promotion
of good government,
the preservation
of a free enterprise system,
and the perpetuation
of an adequate and reliable
electric power supply
for the citizens of Florida
and the United States.

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
GOOD GOVERNMENT MANAGEMENT ASSOCIATION

ADDRESS (number and street) ☐ Check if different than previously reported
700 Universe Blvd., P. O. Box 14000

CITY, STATE and ZIP CODE
Juno Beach, FL 33408

AUG 22 1994

2. FEC IDENTIFICATION NUMBER
C00064774

3. ☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
Prior to 1/1/94

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20	☐ June 20	☐ October 20
☐ March 20	☐ July 20	☐ November 20
☐ April 20	☒ August 20	☐ December 20
☐ May 20	☐ September 20	☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 7/1/94 through 7/31/94		
6. (a) Cash on Hand January 1, 19 94		$ 56,983.12
(b) Cash on Hand at Beginning of Reporting Period	$ 58,328.66	
(c) Total Receipts (from Line 19)	$ 141.18	$ 46,695.22
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 58,469.84	$ 103,678.34
7. Total Disbursements (from Line 30)	$ 6,780.00	$ 51,988.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 51,689.84	$ 51,689.84
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
Tom Wright

Signature of ~~Treasurer~~ Assistant Treasurer
Tom Wright

Date
8-18-94

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

FEC FORM 3X
(revised 9/93)

FE4AN101

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

(revised 1/1/91)

NAME OF COMMITTEE: GOOD GOVERNMENT MANAGEMENT ASSOCIATION

REPORT COVERING PERIOD FROM 7/1/94 TO: 7/31/94

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)		
ii. Unitemized	0	45,716.74
iii. Total (add i and ii) ➤	0	45,716.74
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c) ➤	0	45,716.74
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.) (INT TUL)	141.18	978.48
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	141.18	46,695.22
20. Total Federal Receipts (subtract line 18 from line 19) ➤		
II. Disbursements		
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 a i, a ii, and b) ➤		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	500.00	20,850.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (add a, b and c) ➤		
29. Other Disbursements (State Contrib. $6250)*	6,280.00	31,138.50
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	6,780.00	51,988.50
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤		

(*YTD includes $58.50 Bank Chg., $330 '93 Taxes)

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	0	45,716.74
33. Total Contribution Refunds (from line 28d)	0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)	0	45,716.74
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0	0
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0	0

9 4 0 3 9 1 8 3 0 5 7

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 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)
GOOD GOVERNMENT MANAGEMENT ASSOCIATION

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Barnett Bank 2525 PGA Blvd. Palm Beach Gardens, FL 33410 Receipt For: [ ] Primary [ ] General [X] Other (specify): Interest Checking	Aggregate Year-to-Date $ 147.49	7/31/94	32.54
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Barnett Bank Same Receipt For: [ ] Primary [ ] General [X] Other (specify): Interest Savings	Aggregate Year-to-Date $ 830.99	7/31/94	108.64
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		

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

TOTAL This Period (last page this line number only) 141.18

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
GOOD GOVERNMENT MANAGEMENT ASSOCIATION

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Bill McCollum for Congress 1212 N. Vernon St. Arlington, VA 22201	U.S. House Dist. 8 Disbursement for: [x] Primary [ ] General [ ] Other (specify)	7/19/94	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	500.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

GOOD GOVERNMENT MANAGEMENT ASSOCIATION

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Willie Logan, Jr. 2481 N. W. 152 Terr. Opa Locka, FL 33054	State House Dist. 103 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7/18/94	250.00
B. Thomas E. Warner 969 S. Federal Hiway Stuart, FL 34994	State House Dist. 82 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7/18/94	250.00
C. Carlos L.Valdes P.O. Box 521232 Miami, FL 33152	state House Dist. 111 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7/18/94	250.00
D. David Bludworth 3106 Medinah Circle Lake Worth, FL 33467	State Senate Dist. 35 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7/19/94	500.00
E. George L. Ford, III 135 Alpine Rd. West Palm Beach, FL 33405	State House Dist. 85 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7/19/94	500.00
F. Bob Morris 1400 Keniworth Sarasota, FL 34231	State Commissioner of Education Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7/19/94	500.00
G. Steven Feren 400 N. W. 73 Ave., Plantation, FL 33317	State House Dist. 98 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7/19/94	500.00
H. Anne M. Gannon 236 North Dixie Blvd. Delray Beach, FL 33444	State House Dist. 88 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7/19/94	500.00
I. Everett Kelly 111B N. Sinclair Ave. Tavares, FL 32778	State House Dist. 42 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7/19/94	500.00

SUBTOTAL of Disbursements This Page (optional) 3,750.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

GOOD GOVERNMENT MANAGEMENT ASSOCIATION

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Dean Saunders P.O. Box 6348 Lakeland, FL 33807	State House Dist. 63 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7/19/94	500.00
B. Elvin Martinez 2508 W. Tampa Bay Blvd. #B Tampa, FL 33607	State House Dist. 58 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7/19/94	500.00
C. Bob Starks 1312 Palmetto Ave. Winter Park, FL 32789	State House Dist. 34 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7/19/94	500.00
D. Stephen R. Wise 4361 Charleston Lane Jacksonville, FL 32210	state House Dist. 13 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7/19/94	500.00
E. Crenshaw for Governor 6455 Powers Ave. Jacksonville, FL 32217	Gov. of Florida Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7/19/94	500.00
F.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	2,500.00
TOTAL This Period (last page this line number only)	6,250.00

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 8-18-97
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

JMH
PREPARER

8-22-97
DATE PREPARED

FEC FORM 70-2 (12/93)

9 4 0 3 9 1 8 5 0 6 2