

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. 12FE4M5 JM Family Enterprises, Inc PAC

ADDRESS (number and street) 100 Jim Moran Blvd. Check if different than previously reported. (ACC) Deerfield Beach FL 33442

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00240911 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] [ ]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE). (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S). (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S).

5. Covering Period 01 / 01 / 2024 through 01 / 31 / 2024

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 Deen Hartley, Sonya, , ,

Signature of Treasurer Deen Hartley, Sonya, , , Date 02 / 20 / 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

JM Family Enterprises, Inc PAC

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="2024"/>	<input type="text" value="414688.99"/>	<input type="text" value="414688.99"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="414688.99"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="8811.97"/>	<input type="text" value="8811.97"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="423500.96"/>	<input type="text" value="423500.96"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="22750.00"/>	<input type="text" value="22750.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="400750.96"/>	<input type="text" value="400750.96"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

JM Family Enterprises, Inc PAC

Report Covering the Period: From: 01 / 01 / 2024 To: 01 / 31 / 2024

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).....	4966.64	4966.64
(ii) Unitemized .....	3845.33	3845.33
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8811.97	8811.97
(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) .....	8811.97	8811.97
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)).....▶	8811.97	8811.97
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8811.97	8811.97

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22500.00	22500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	250.00	250.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	22750.00	22750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22750.00	22750.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	8811.97	8811.97
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8811.97	8811.97
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**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 6 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**JM Family Enterprises, Inc PAC**

**A. Abbineni, Ravi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1108 NE 4th St  
 City Fort Lauderdale State FL Zip Code 33301-1232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JM Family Enterprises, Inc. Occupation (for Individual) Senior Vice President & Chief Financia  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2024  
**Transaction ID : 26267127P**  
 Amount of Each Receipt this Period 416.66  
 Memo Item  
 Payroll Deduction: (\$208.33 Bi-Monthly)

**B. Barnard, Maria, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2002 Oceanwalk Ter. #201  
 City Pompano Beach State FL Zip Code 33062-7650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JM Family Holdings Occupation (for Individual) VP, Strategy & Finance  
 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  
 01 / 31 / 2024  
**Transaction ID : 26267128P**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Payroll Deduction: (\$125.00 Bi-Monthly)

**C. Bass, Joshua, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7486 NW 116th Ln  
 City Parkland State FL Zip Code 33076-4256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Jim Moran & Associates, Inc. Occupation (for Individual) Vice President, Data Analytics & Produ  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.34

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2024  
**Transaction ID : 26267129P**  
 Amount of Each Receipt this Period 333.34  
 Memo Item  
 Payroll Deduction: (\$166.67 Bi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> 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 7 OF 14
	<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)  
**JM Family Enterprises, Inc PAC**

**A. Benish, Corey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8915 Sydney Harbor Cir  
 City Delray Beach State FL Zip Code 33446-9660  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JM Flex Solutions Occupation (for Individual) GVP, Chief Operating Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.34

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2024  
**Transaction ID : 26267131P**  
 Amount of Each Receipt this Period  
 333.34  
 Memo Item  
 Payroll Deduction: (\$166.67 Bi-Monthly)

**B. Center, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7400 Wisteria Ave  
 City Parkland State FL Zip Code 33076-3914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Southeast Toyota Distributors LLC Occupation (for Individual) VP, Fixed Operations  
 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  
 01 / 31 / 2024  
**Transaction ID : 26267135P**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 Payroll Deduction: (\$125.00 Bi-Monthly)

**C. Coombs, Ronald, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2920 NW 26th Ct  
 City Boca Raton State FL Zip Code 33434-3656  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JM Family Enterprises, Inc. Occupation (for Individual) EVP, JMFE & President JM Family Hold  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 416.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2024  
**Transaction ID : 26267140P**  
 Amount of Each Receipt this Period  
 416.66  
 Memo Item  
 Payroll Deduction: (\$208.33 Bi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> 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 8 OF 14
	<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)  
**JM Family Enterprises, Inc PAC**

**A. Couch, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7260 Lemon Grass Dr  
 City Parkland State FL Zip Code 33076-3950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JM Family Enterprises, Inc. Occupation (for Individual) SVP, Chief Information Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2024  
**Transaction ID : 26267142P**  
 Amount of Each Receipt this Period  
 416.66  
 Memo Item  
 Payroll Deduction: (\$208.33 Bi-Monthly)

**B. Foster, Dana, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 Jim Moran Blvd  
 City Deerfield Beach State FL Zip Code 33442-1702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Jim Moran & Associates, Inc. Occupation (for Individual) AVP, Deputy General Counsel  
 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  
 01 / 31 / 2024  
**Transaction ID : 26267156P**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 Payroll Deduction: (\$125.00 Bi-Monthly)

**C. Greene, Liza, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3900 Galt Ocean Dr Apt 117  
 City Ft Lauderdale State FL Zip Code 33308-6621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JM Family Enterprises, Inc. Occupation (for Individual) Vice President, People & Culture  
 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  
 01 / 31 / 2024  
**Transaction ID : 26267159P**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 Payroll Deduction: (\$125.00 Bi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	916.66
<b>TOTAL</b> 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 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**JM Family Enterprises, Inc PAC**

**A. Gunnell, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2111 NW 30th Rd  
 City Boca Raton State FL Zip Code 33431-6367  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JM Family Enterprises, Inc. Occupation (for Individual) Senior Vice President & President of J  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2024  
**Transaction ID : 26267162P**  
 Amount of Each Receipt this Period  
 416.66  
 Memo Item  
 Payroll Deduction: (\$208.33 Bi-Weekly)

**B. Heggerick, Lisbeth, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 779 SW 17th St  
 City Boca Raton State FL Zip Code 33486-7041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JM Family Enterprises, Inc. Occupation (for Individual) GVP, Human Resources & Communica  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2024  
**Transaction ID : 26267167P**  
 Amount of Each Receipt this Period  
 416.66  
 Memo Item  
 Payroll Deduction: (\$208.33 Bi-Monthly)

**C. Hoppe, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9847 SW 106th Ter  
 City Miami State FL Zip Code 33176-2882  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JM Lexus Occupation (for Individual) General Manager  
 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  
 01 / 31 / 2024  
**Transaction ID : 26267170P**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 Payroll Deduction: (\$125.00 Bi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1083.32
<b>TOTAL</b> 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 14
	<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)  
**JM Family Enterprises, Inc PAC**

**A. Percy, Pearl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 Jim Moran Blvd  
 City Deerfield Beach State FL Zip Code 33442-1702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JM Family Enterprises, Inc. Occupation (for Individual) Chief Corporate Development Officer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 416.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2024  
**Transaction ID : 26267193P**  
 Amount of Each Receipt this Period  
 416.66  
 Memo Item  
 Payroll Deduction: (\$208.33 Bi-Monthly)

**B. Slate, Stephanie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8837 Sandy Crest Ln  
 City Boynton Beach State FL Zip Code 33473-7813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JM Family Enterprises, Inc. Occupation (for Individual) VP, Total Rewards & HR Technology  
 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  
 01 / 31 / 2024  
**Transaction ID : 26267200P**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item  
 Payroll Deduction: (\$150.00 Bi-Monthly)

**C. Sneir, Ryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10570 Cobalt Ct  
 City Coral Springs State FL Zip Code 33076-2205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Southeast Toyota Distributors, LLC Occupation (for Individual) AVP, Marketing  
 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  
 01 / 31 / 2024  
**Transaction ID : 26267202P**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 Payroll Deduction: (\$125.00 Bi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	966.66
<b>TOTAL</b> This Period (last page this line number only).....	4966.64

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)

Grid for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
JM Family Enterprises, Inc PAC

Form A: American Financial Services Association PAC. Includes fields for Full Name, Mailing Address (919 18th St NW, Ste 300, Washington DC, 20006-5531), Purpose (2024 Contribution), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/20/2024), FEC ID (C00038604), Transaction ID (500173027), and Amount (5000.00).

Form B: Automotive Free International Trade PAC. Includes fields for Full Name, Mailing Address (1625 Prince St, Ste 225, Alexandria VA, 22314-2882), Purpose (2024 Contribution), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/05/2024), FEC ID (C00250399), Transaction ID (500173020), and Amount (5000.00).

Form C: Don Davis for NC. Includes fields for Full Name, Mailing Address (PO Box 511, Snow Hill NC, 28580-0511), Purpose (Contribution), Candidate Name (Davis, Don, , ,), Office Sought (House), Disbursement For (2024), Date of Disbursement (01/25/2024), FEC ID (C00795211), Transaction ID (500173023), and Amount (2500.00).

SUBTOTAL of Disbursements This Page (optional) 12500.00
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"/> 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

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)

**JM Family Enterprises, Inc PAC**

Full Name (Last, First, Middle Initial)

### A. Lance Gooden for Congress Committee

Mailing Address PO Box 2125

City  
Terrell

State  
TX

Zip Code  
75160-0037

Purpose of Disbursement

Contribution

Candidate Name

Gooden, Lance, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: TX District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	2	4

FEC Identification Number

C00662601

Transaction ID : 500173017

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Laurel Lee for Congress, Inc.

Mailing Address PO Box 2743

City  
Brandon

State  
FL

Zip Code  
33509-2743

Purpose of Disbursement

Contribution

Candidate Name

Lee, Laurel, Mrs., ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: FL District: 15

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	2	4

FEC Identification Number

C00815373

Transaction ID : 500173022

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Lisa McClain for Congress

Mailing Address PO Box 327

City  
Romeo

State  
MI

Zip Code  
48065-0327

Purpose of Disbursement

Contribution

Candidate Name

McClain, Lisa, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: MI District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	2	4

FEC Identification Number

C00726042

Transaction ID : 500173019

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4000.00

**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"/> 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

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)

**JM Family Enterprises, Inc PAC**

Full Name (Last, First, Middle Initial)

**A. Nancy Mace for Congress**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	5			2	0	2	4		

Mailing Address 295 Seven Farms Dr  
Ste C-186

City  
Daniel Island

State  
SC

Zip Code  
29492-8088

FEC Identification Number

**C** C00710103

**Transaction ID : 500173016**

Amount of Each Disbursement this Period

2500.00

Memo Item

Purpose of Disbursement

Contribution

Category/  
Type

Candidate Name

Mace, Nancy, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  General  
 Other (specify) ▼

State: SC

District: 01

Full Name (Last, First, Middle Initial)

**B. Reclaim America PAC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	5			2	0	2	4		

Mailing Address 228 S Washington St  
Ste 115

City  
Alexandria

State  
VA

Zip Code  
22314-5404

FEC Identification Number

**C** C00500025

**Transaction ID : 500173028**

Amount of Each Disbursement this Period

3500.00

Memo Item

Purpose of Disbursement

2024 Contribution

Category/  
Type

Candidate Name

Reclaim America PAC

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

City

State

Zip Code

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

Purpose of Disbursement

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

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

6000.00

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

22500.00

# 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"/> 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)

**JM Family Enterprises, Inc PAC**

Full Name (Last, First, Middle Initial)

### A. Georgia Chamber Political Affairs Council, Inc. PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2024

Mailing Address 270 Peachtree St NW  
Ste 2200

City Atlanta State GA Zip Code 30303-1581

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/Type

FEC Identification Number

C

Transaction ID : 500173021

Amount of Each Disbursement this Period

250.00

Memo Item

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Full Name (Last, First, Middle Initial)

### B.

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Full Name (Last, First, Middle Initial)

### C.

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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)..... ▶

250.00

250.00