FEC FORM 3X

02/19/2016 08 : 43

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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 t over the lines	JI 0, JI	12FE4M5		
J	M Family Enterprises	, Inc. PAC					
ADI	DRESS (number and street)	100 Jim Moran Blvd.					
C	Check if different than previously reported. (ACC)	Deerfield Beach			FL	33442 –	
2.	FEC IDENTIFICATION NU	UMBER V	CITY 🔺	S		ZIP COD	DE 🔺
	C C00240911		3. IS THIS REPORT X	NEW (N) OR	AME (A)	ENDED	
4.	TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	May 20 (M5)	Aug 2	0 (M8)	Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:	Due On:	Mar 20 (M3)	Jun 20 (M6)			Dec 20 (M12) (Non-Election Year Only)
	April 15		Apr 20 (M4)	Jul 20 (M7)	Oct 20	D (M10)	Jan 31 (YE)
	Quarterly Report (C July 15	(C) 12-Day	Primary (12P)	General (1	2G)	Runoff (12R)
	Quarterly Report (C October 15	Report for t		on (12C)	Special (12	2S)	
	Quarterly Report (C January 31 Year-End Report (Y		Election on	/ D D /	Y II Y II Y II Y	in the State of	
	July 31 Mid-Year Report (Non-electio Year Only) (MY)	on (d) 30-Day POST-Elect		30G)	Runoff (30	R)	Special (30S)
	Termination Report (TER)	Report for t		/ D D /	YYYYY	in the	
		I	Election on			State of	
5.	Covering Period 01		2016 throug	h 01	/ D D / 31	2016	
l ce	ertify that I have examined th	nis Report and to the be	est of my knowledge ar	nd belief it is tru	e, correct and	complete.	
Тур	be or Print Name of Treasure	er Sonya Deen					
	Som.	a Deen			MM		Y Y Y Y
Sigi	nature of Treasurer		[Electronu	cally Filed] D	ate 02	19	2016
NO	TE: Submission of false, erron	eous, or incomplete infor	rmation may subject the	person signing th	is Report to the	penalties of 2 U	.S.C. §437g.
	Office Use Only					FEC FOR Rev. 12/20	

Г	- FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
V	Irite or Type Committee Name		
	JM Family Enterprises, Inc. PAC		
R	eport Covering the Period: From:	01 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	b: 01 / 01 / 91919 / 2016
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		316628.26
	(b) Cash on Hand at Beginning of Reporting Period	316628.26	
	(c) Total Receipts (from Line 19)	6282.06	6282.06
	(d) Subtotal (add Lines 6(b) and6(c) for Column A and Lines6(a) and 6(c) for Column B)	322910.32	322910.32
7.	Total Disbursements (from Line 31)	12000.00	12000.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	310910.32	310910.32
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

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DETAILED SUMMARY PAGE

of Receipts

Page 3

6282.06

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

JM Family Enterprises, Inc. PAC

I. Receipts	COLUMN A	COLUMN B
·	Total This Period	Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	2490.34	2490.34
(i) Itemized (use Schedule A)	2430.34	
		2704 70
(ii) Unitemized	3791.72	3791.72
(iii) TOTAL (add	20.000	6282.00
Lines 11(a)(i) and (ii)▶	6282.06	6282.06
	0.00	0.00
(b) Political Party Committees		
(c) Other Political Committees	0.00	0.0
(such as PACs)		
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	6282.06	6282.00
Transfers From Affiliated/Other		
	0.00	0.00
Party Committees		7 7 7
All Loans Received	0.00	0.00
	0.00	
Loan Repayments Received	0.00	0.0
Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0.00	0.00
(Carry Totals to Line 37, page 5)		0.00
Refunds of Contributions Made		
to Federal Candidates and Other	0.00	0.00
Political Committees	0.00	7 7 7
Other Federal Receipts	0.00	
(Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	
		0.00
	0.00	
(b) Levin Funds (from Schedule H5)	0.00	0.0
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))►	2000.00	
	6282.06	6282.06

6282.06

 Iotal Federal Receipts (subtract Line 18(c) from Line 19)....... I

DETAILED SUMMARY PAGE

	COLUMN A	Page 4 COLUMN B				
II. Disbursements	Total This Period	Calendar Year-to-Date				
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)						
(i) Federal Share	0.00	0.0				
(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				
Transfers to Affiliated/Other Party	0.00	0.00				
Committees Contributions to Federal Candidates/Committees	0.00					
and Other Political Committees Independent Expenditures	12000.00	12000.00				
(use Schedule E) Coordinated Party Expenditures	0.00	0.0				
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00				
Loan Repayments Made	0.00	0.00				
Loans Made	0.00	0.00				
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00				
		0.00				
(b) Political Party Committees(c) Other Political Committees	0.00					
(such as PACs)	0.00	0.00				
(d) Total Contribution Refunds	0.00	0.00				
(add Lines 28(a), (b), and (c))►						
Other Disbursements	0.00	0.00				
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	0.0				
 (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶ 	0.00	0.00				
Total Disbursements (add Lines 21(c), 22,						
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	12000.00	12000.0				
Total Federal Disbursements						
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	12000.00	12000.00				

L

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	6282.06	6282.06
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6282.06	6282.06
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	0.00	0.00
 Offsets to Operating Expenditures (from Line 15, page 3) 	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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Ima	age# 201602199008492414			
	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 0F 10 (check only one) 11a 11b 11c 12 13 14 15 16 17
		ne name and a		person for the purpose of soliciting contributions be to solicit contributions from such committee.
Δ.	Full Name (Last, First, Middle Initial) Ronald M. Coombs			Date of Receipt
	Mailing Address 2920 N.W. 26th Court			01 29 2016
	City Boca Raton	State FL	Zip Code 33434	Transaction ID : C4627470 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		208.34
	Name of Employer JM Family Enterprises, Inc. Receipt For: Primary General Other (specify) ▼	1	n e President e Year-to-Date ▼ 208.34	* Payroll Deduction: \$104.17 Bi-Monthly
В.	Full Name (Last, First, Middle Initial) Ken Yerves Mailing Address 22472 Tiki Drive			Date of Receipt 01 29 2016
	City Boca Raton	State FL	Zip Code 33428	Transaction ID : C4627472 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		416.00
	Name of Employer JM Family Enterprises, Inc. Receipt For: Primary General Other (specify) ▼	1	n Vice President • Year-to-Date ▼ 416.00	* Payroll Deduction: \$208.00 Bi-Monthly
C.	Full Name (Last, First, Middle Initial) James P. Dunn	1		Date of Receipt
	Mailing Address 5350 West Sample Road	State	Zip Code	
	Margate	FL	33073	Transaction ID : C4627492 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		416.00
	Name of Employer	Occupation		
	JM Family Enterprises, Inc. Receipt For:	Vice Presid		
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.00	* Payroll Deduction: \$208.00 Bi-Monthly

SUBTOTAL of Receipts This Page (optional)			7		7	104	40.3	4
TOTAL This Period (last page this line number only)	Г							1

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 10 (check only one)							
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full) JM Family Enterprises, Inc. PAC)									
A .	Full Name (Last, First, Middle Initial) Deborah A. Battisto			Date of Receipt							
	Mailing Address 198 S.W. 6th Avenue			01 29 2016							
	City	State	Zip Code	Transaction ID : C4627473							
	Boca Raton	FL	33486	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		250.00							
	Name of Employer JM Service Center, LLC Receipt For:	Occupation Vice Presid	ent								
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	* Payroll Deduction: \$125.00 Bi-Monthly							
В.	Full Name (Last, First, Middle Initial) Forrest W. Heathcott			Date of Receipt							
	Mailing Address 4305 NW 24 Way			01 29 2016							
	City	State	Zip Code	Transaction ID : C4627496							
	Boca Raton	FL	33431	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		300.00							
	Name of Employer JM Family Enterprises Inc.	Occupation Executive V	ice President	_							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	* Payroll Deduction: \$150.00 Bi-Monthly							
<u>с</u> .	Full Name (Last, First, Middle Initial)			Date of Receipt							
	Mailing Address 1102 Vista Del Mar Drive North	h		01 29 2016							
	City	State	Zip Code	Transaction ID : C4627505							
	Delray Beach	FL	33483	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		400.00							
	Name of Employer	of Employer Occupation									
	JM Family Enterprises, Inc.	Vice Presid	ent & Treasurer								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼	400.00	* Payroll Deduction: \$200.00 Bi-Monthly								
s	UBTOTAL of Receipts This Page (optional)			950.00							

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

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IТ 	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) (check only one)									
	NAME OF COMMITTEE (In Full) JM Family Enterprises, Inc. PAC	name and a									
Α.	Full Name (Last, First, Middle Initial) Joshua A. Bass Mailing Address 7486 NW 116 Lane	Ctoto	Zin Codo	Date of Receipt							
	City Parkland	State FL	Zip Code 33076	Transaction ID : C4627515							
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
	Name of Employer Jim Moran & Associates, Inc. Receipt For: Primary General Other (specify) ▼		ales Planning Year-to-Date ▼ 250.00	* Payroll Deduction: \$125.00 Bi-Monthly							
В.	Full Name (Last, First, Middle Initial) Paul E. Rodgers Mailing Address 112 SW 128TH Ave.		Date of Receipt								
	City	State	Zip Code	Transaction ID : C4627527							
	Plantation	FL	33325	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		250.00							
	Name of Employer JM Family Enterprises, Inc.	Occupation Director, Av									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	* Payroll Deduction: \$125.00 Bi-Monthly							
~	Full Name (Last, First, Middle Initial)										
C.	Mailing Address			Date of Receipt							
	City	State	Zip Code	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С									
	Name of Employer	Occupation									
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼								

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 9 OF 10										
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 25 26 28a 28b 28c 29 30b										
Any information copied from such Reports and State or for commercial purposes, other than using the nar													
NAME OF COMMITTEE (In Full)													
JM Family Enterprises, Inc. PAC													
Full Name (Last, First, Middle Initial) A. Byrne for Congress	Full Name (Last, First, Middle Initial) Byrne for Congress												
Mailing Address P.O. Box 2743			01 22 2016										
City Mobile	State Zip Code AL 36652		Transaction ID : D267112										
Purpose of Disbursement Contribution		· · · ·]	Amount of Each Disbursement this Period										
Candidate Name		Category/											
Bradley R. Byrne		Type	1000.00										
Senate President	ment For: 2016 Primary General Other (specify) ▼												
State: AL District: 01													
Full Name (Last, First, Middle Initial) B. Automotive Free International Trac	de PAC		Date of Disbursement										
Mailing Address 1625 Prince Street Suite 225			01 22 2016										
Alexandria	State Zip Code VA 22314		Transaction ID : D267113										
Purpose of Disbursement 2016 Contribution			Amount of Each Disbursement this Period										
Candidate Name Automotive Free International Trac		Category/	5000.00										
	DE FAC ment For: Primary General Other (specify) ▼	Туре											
Full Name (Last, First, Middle Initial) C. Bill Shuster For Congress			Date of Disbursement										
Mailing Address P.O. Box 27													
City Hollidaysburg	State Zip Code PA 16648		Transaction ID : D267097										
Purpose of Disbursement Contribution	Purpose of Disbursement												
Candidate Name Bill Shuster		Category/ Type	Amount of Each Disbursement this Period										
Office Sought: House Disburser Senate President State: PA District: 09	ment For: 2016 Primary General Other (specify) ▼												
SUBTOTAL of Disbursements This Page (optional)			7000.00										
TOTAL This Period (last page this line number only		F											

ITEMIZED DISBURSEMENTS Use separate schedul(s) br de act actegory of the Detailed Summary Page (check only one) 27 28 28 28 28 28 28 30b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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 NAME OF COMMITTEE (in Full) JM Family Enterprises, Inc. PAC Date of Disbursement 01 01 2016 Full Name (Last, First, Middle Initial) A. American Financial Services Association PAC Date of Disbursement 01 2016 Mailing Address 919 19th Street, NW Suite 300 State Zip Code Transaction ID : D267197 American Financial Services Association PAC Transaction ID : D267197 Amount of Each Disbursement 01 2016 Office Sought: House Disbursement For: 01 Category/ Type Amount of Each Disbursement this Period State Disbursement Category/ Type Amount of Each Disbursement this Period City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Category/ Type Amount of Each Disbursement this Period <td< th=""><th>S</th><th>CHEDULE B (FEC Form 3X)</th><th></th><th>FC</th><th>DR I</th><th>LINE N</th><th>UMBER:</th><th></th><th></th><th></th><th>PAG</th><th>GE</th><th>10 (</th><th>DF 10</th><th>)</th></td<>	S	CHEDULE B (FEC Form 3X)		FC	DR I	LINE N	UMBER:				PAG	GE	10 (DF 10)			
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ar for commercial puppese, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF CAUNTTEE (in Full) JM Family Enterprises, Inc. PAC Full Name (Last, First, Middle Initial) A American Financial Services Association PAC Mailing Address City State Zip Code Puppese of Disbursement Candidate Name Category Citice Sought: House Disbursement For:					\square													
JM Family Enterprises, Inc. PAC Full Name (Last, First, Middle Initial) As American Financial Services Association PAC Mailing Address 919 18th Street, NW Washington Suite 300 City Washington Candidate Name Candidate Name Candidate Name Candidate Name City President Disbursement City President Disbursement City State: Disbursement City State: Disbursement Candidate Name Candidate Name City State: Disbursement Candidate Name City State: Disbursement		for commercial purposes, other than using the nam																
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Mailing Address 919 18th Street, NW State Zip Code City State Zip Code Perpose of Disbursement 20006 Transaction ID : D267197 Amount of Each Disbursement for: Office Sought: House President Disbursement For: General Office Sought: House Disbursement For: President Other (specify) ▼ B. Date of Disbursement Mailing Address City City State Disbursement Category/ Type Office Sought: House Disbursement Category/ Type	<u> </u>																	
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Washington DC 20006 Purpose of Disbursement Disbursement For: Office Sought: House President Disbursement For: City State State: Disbursement For: President Disbursement For: Candidate Name Category/ Office Sought: House President Disbursement For: City State Disbursement Disbursement City State Purpose of Disbursement Disbursement For: Disbursement Disbursement for: President Disbursement for: President Disbursement for: President Disbursement for: President Other (specify) ▼		Suite 300																
Purpose of Disbursement 2016 Contribution Amount of Each Disbursement this Period Candidate Name Disbursement For: Benate Disbursement For: Disbursement For: District Date of Disbursement State: Disbursement Disbursement For: Disbursement Date of Disbursement Manount of Each Disbursement Mailing Address City State Zip Code Purpose of Disbursement State: Disbursement Disbursement Amount of Each Disbursement this Period City State Zip Code Purpose of Disbursement State: Disbursement For: Disbursement Amount of Each Disbursement this Period City State Disbursement For: Disbursement Amount of Each Disbursement this Period State: Disbursement For: Disbursement Disbursement for: Disbursement Date of Disbursement City State Zip Code Date of Disbursement Mount of Each Disbursement City State Zip Code Date of Disbursement Mount of Each Disbursement City State Disbursement For: District: Disbursement For: District: Date of Disbursement this Period City State Disbursement For: District: Disbursement For: Disbursement For: Disbursement		-					Transaction ID : D267197											
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American Financial Services Association PAC Category/ Type Office Sought: House President Disbursement For: President Other (specify) B. Mailing Address City State City State Disbursement Category/ Type Amount of Each Disbursement this Period Office Sought: House Disbursement Office Sought: House Disbursement For: Office Sought: House Disbursement For: Disbursement City State Zip Code Purpose of Disbursement Office Sought: House Disbursement For: Senate Purpose of Disbursement City State Zip Code Purpose of Disbursement City State Zip Code Purpose of Disbursement City State Zip Code Purpose of Disbursement City Senate Purpose of Disbursement City Senate Disbursement For: Senat							Amoun	t of	Each	Disb	ursen	nent	this I	Period				
Office Sought: House Disbursement For: Other (specify) ▼ Full Name (Last, First, Middle Initial) B. Date of Disbursement Ruiling Address City State Zip Code Purpose of Disbursement Category/ Type Amount of Each Disbursement this Period Office Sought: House President Disbursement For: Amount of Each Disbursement this Period Category/ Type Senate President Disbursement For: Category/ Type Date of Disbursement this Period Category/ Category/ Type State Zip Code Disbursement this Period Mailing Address Disbursement For: Category/ Type Date of Disbursement City State Zip Code Disbursement Purpose of Disbursement Category/ Type Image: Code Amount of Each Disbursement this Period City State Zip Code Amount of Each Disbursement this Period Image: Code Purpose of Disbursement Disbursement For: Category/ Type Image: Code Image: Code SubtrortAL of Disbursements Disbursement For: Cother (specify) ▼ SubtrortAL of Disbursements SubtrortAL of Disbursements SubtrortAL of Disbur			viation BAC			ry/							5000	.00	1			
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