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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X		Pr Than An Au					Office Use 0	Only	
1. NAME OF COMMITTEE (in full)	TYPE OF	PRINT ▼		nple: If typir the lines.	ng, type	12FE4M5			
FLORIDA CITRUS	MUTUAL	POLITCAL A	CTION	COMMIT	TEE				
ADDRESS (number and stree	411 E (DRANGE STREET							Ш
Check if different than previously reported. (ACC)	LAKEL	LAKELAND				FL			
2. FEC IDENTIFICATION	I NUMBER 1	, C	ITY 🛦		S	STATE A	ZIF	CODE A	
C C00131607		3.	IS THIS REPORT	\ <u>/</u>	NEW OR	AN (A)	MENDED		
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Repo	Du	eport M	eb 20 (M2) ar 20 (M3) or 20 (M4)	×	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep	20 (M8) 20 (M9) 20 (M10)	Nov 20 (M (Non-Election Year Only) Dec 20 (M (Non-Election Year Only) Jan 31 (Y	M12) (E)
July 15 Quarterly Repo October 15 Quarterly Repo January 31	rt (Q3)	PRE-Election Report for the:		Convention (Special (12S) in	the	
Year-End Repo July 31 Mid-Ye Report (Non-ele Year Only) (MY Termination Re (TER)	ar ection ')	30-Day POST-Election Report for the:	_	General (300	(a)	Runoff (3	30R) in	Special (30) the ate of	0S)
5. Covering Period	M M / D 05	01 2016	Y	through	M M M 05	31	2016	Y	_
certify that I have examine	d this Report	and to the best	of my know	ledge and l	pelief it is true	e, correct and	d complete.		
Type or Print Name of Trea	surer KEVIN	E. METHENY, TR	REASURER						
Signature of Treasurer	KEVIN E. METH	IENY, TREASURER	[1	Electronically	Filed] Da	ate 06	02	2016	Y
NOTE: Submission of false, e	rroneous, or ir	complete informat	on may sub	ject the pers	son signing thi	is Report to the	ne penalties	of 2 U.S.C. §437	∕g.
Office Use Only								FORM 3X 12/2004	_

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

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Write or Type Committee Name

FLORIDA CITRUS MUTUAL POLITCAL ACTION COMMITTEE

05 01 2016 05 2016 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 18942.76 January 1, 2016 (b) Cash on Hand at 9442.76 Beginning of Reporting Period..... 0.00 0.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 18942.76 9442.76 6(a) and 6(c) for Column B)..... 6000.00 15500.00 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 3442.76 3442.76 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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

FLORIDA CITRUS MUTUAL POLITCAL ACTION COMMITTEE

Report Covering the Period: From: 05		To: 05 31 2016
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add	0.00	0.00
Lines 11(a)(i) and (ii)▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		222
Totals to Line 33, page 5)▶	0.00	0.00
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
All Leans Dessived	0.00	0.00
B. All Loans Received		3.00
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures	7	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts	7	5.00
(Dividends, Interest, etc.)	0.00	0.00
B. Transfers from Non-Federal and Levin Funds	0.00	0.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(IIOIII COIIOGGIO FIO)	3.00	0.00
(1) 1	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
(.,	7	
). Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	0.00
). Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	0.00	0.00
(== == == == == == == == == == == == ==	7 / 7	

DETAILED SUMMARY PAGE

of Disbursements

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
. Operating Expenditures: – (a) Allocated Federal/Non-Federal	2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		
Activity (from Schedule H4)	0.00	0.00	
(i) Federal Share	0.00	0.00	
(ii) Non-Federal Share	0.00	0.00	
(b) Other Federal Operating	0.00		
Expenditures(c) Total Operating Expenditures	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00	
2. Transfers to Affiliated/Other Party			
Committees	0.00	0.00	
Federal Candidates/Committees	6000.00	15500.00	
and Other Political Committees	0000.00		
(use Schedule E)	0.00	0.00	
. Coordinated Party Expenditures (2 U.S.C. §441a(d))	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00	
. Loan Repayments Made	0.00	0.00	
ropaymente made			
. Loans Made	0.00	0.00	
. Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00	
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	
ř			
. Other Disbursements	0.00	0.00	
. Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity			
(from Schedule H6)	200		
(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	0.00	0.00	
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))	6000.00	15500.00	
. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	6000.00	15500.00	

DETAILED SUMMARY PAGE

of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. 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

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) FLORIDA CITRUS MUTUAL POLITION AND THE POLITICAL PO	e and address of any political	by any perso committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) A. DENNIS ALAN ROSS		v:::: 1 L _L	Date of Disbursement
Mailing Address 607 LAKE MIRIAM DRIVE		05 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
LAKELAND	tate Zip Code FL 33813		Transaction ID : SB23.7227
Senate	nent For: 2016 Primary	Category/ Type	Amount of Each Disbursement this Period 5000.00 Memo Item
Full Name (Last, First, Middle Initial) 3. DARREN SOTO			Date of Disbursement
Mailing Address 338 N MAGNOLIA AVE., SUITE D		05 02 2016	
•	tate Zip Code FL 32801		Transaction ID : SB23.7226 Amount of Each Disbursement this Period
Senate	ent For: 2016 Primary General	Category/ Type	1000.00 Memo Item
100100111	Other (specify)		
State: District: Full Name (Last, First, Middle Initial)	Other (specify) ▼		Data of Dishuracress*
State: District:	Other (specify) ▼		Date of Disbursement
State: District: Full Name (Last, First, Middle Initial) C. Mailing Address	Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial) Mailing Address City S Purpose of Disbursement Candidate Name	state Zip Code	Category/ Type	
State: District: Full Name (Last, First, Middle Initial) Mailing Address City S Purpose of Disbursement Candidate Name Office Sought: House Senate	state Zip Code		M M / D D / Y Y Y Y
State: District: Full Name (Last, First, Middle Initial) Mailing Address City S Purpose of Disbursement Candidate Name Office Sought: House Senate President	ent For: Primary General Other (specify)	Type	Amount of Each Disbursement this Period