

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

FEDERAL ELECTION COMMISSION  
OCT 17 1 09 PM '94  
Fidelity Insurance Agency, Inc. PAC

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) JM Family Enterprises, Inc. PAC formerly		2. FEC IDENTIFICATION NUMBER G00240911
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 100 NW 12 Avenue		
CITY, STATE and ZIP CODE Deerfield Beach, FL 33442		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

## 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 <u>7/1/94</u> through <u>9/30/94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$32,737.73
(b) Cash on Hand at Beginning of Reporting Period	\$13,917.73	
(c) Total Receipts (from Line 19)	\$10,600.00	\$10,600.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$24,517.73	\$43,337.73
7. Total Disbursements (from Line 30)	\$18,100.00	\$36,920.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$6,417.73	\$6,417.73
9. Debts and Obligations Owed TO 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 202-218-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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 William Donohoe	Date 10/10/94
Signature of Treasurer 	

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

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

(revised 1/1/91)

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NAME OF COMMITTEE JM Family Enterprises, Inc. PAC C00240911		REPORT COVERING PERIOD FROM 7/1/94 TO 9/30/94	
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) .....	10,600	10,600	11(a)(i)
ii. Unitemized .....			11(a)(ii)
iii. Total .....	10,600	10,600	11(a)(iii)
b. Political Party Committees .....			11(b)
c. Other Political Committees (such as PACs) .....			11(c)
d. Total Contributions .....	10,600	10,600	11(d)
12. Transfers From Affiliated/Other Party Committees .....			12
13. All Loans Received .....			13
14. Loan Repayments Received .....			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....			16
17. Other Federal Receipts (Dividends, Interest, etc.) .....			17
18. Transfers from Nonfederal Account for Joint Activity .....			18
19. Total Receipts .....	10,600	10,600	19
20. Total Federal Receipts .....	10,600	10,600	20
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share .....			21(a)(i)
ii. Non-Federal Share .....			21(a)(ii)
b. Other Federal Operating Expenditures .....			21(b)
c. Total Operating Expenditures .....			21(c)
22. Transfers to Affiliated/Other Party Committees .....			22
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	13,100	31,420	23
24. Independent Expenditures (use Schedule E) .....			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..			25
26. Loan Repayments Made .....			26
27. Loans Made .....			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees .....			28(a)
b. Political Party Committees .....			28(b)
c. Other Political Committees (such as PACs) .....			28(c)
d. Total Contribution Refunds .....			28(d)
29. Other Disbursements .....	5,000	5,500	29
30. Total Disbursements .....	18,100	36,920	30
31. Total Federal Disbursements .....	18,100	36,920	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d) .....	10,600	10,600	32
33. Total Contribution Refunds (from line 28d) .....			33
34. Net Contributions (other than loans)(subtract line 33 from 32) .....	10,600	10,600	34
35. Total Federal Operating Expenditures .....			35
36. Offsets to Operating Expenditures (from line 15) .....			36
37. Net Operating Expenditures .....			37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 2  
FOR LINE NUMBER

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 C00240911

940392954833

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Patricia Moran c/o JM Family Enterprises, Inc. 100 NW 12th Avenue Deerfield Beach, FL 33442 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	JM Family Enterprises, Inc. Occupation: <b>President</b> Aggregate Year-to-Date > \$ 500	9/24/94	500
B. Full Name, Mailing Address and ZIP Code H. Logan Pierson 2220 SW 11 Place Boca Raton, FL 33486 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	JM Family Enterprises, Inc. Occupation: <b>Group V.P. / Corporate Relations</b> Aggregate Year-to-Date > \$ 100	9/26/94	100
C. Full Name, Mailing Address and ZIP Code Lawrence S. Rich 4450 NW 98th Avenue Coral Springs, FL 33071 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	JM Family Enterprises, Inc. Occupation: <b>Chief Operating Officer</b> Aggregate Year-to-Date > \$ 500	9/26/94	500
D. Full Name, Mailing Address and ZIP Code Janice Moran P.O. Box 1160 Deerfield Beach, FL 33442 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	JM Family Enterprises, Inc. Occupation: <b>Senior V.P.</b> Aggregate Year-to-Date > \$5,000	9/26/94	5,000
E. Full Name, Mailing Address and ZIP Code Colin Brown 1216 Spanish River Road Boca Raton, FL 33432 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	JM Family Enterprises, Inc. Occupation: <b>Exec. V.P. / General Counsel</b> Aggregate Year-to-Date > \$ 500	9/23/94	500
F. Full Name, Mailing Address and ZIP Code Kenneth Czubay 8140 NW 51st Place Coral Springs FL 33067 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	JM Family Enterprises, Inc. Occupation: <b>Sr. V.P. / JM Fam. Asst. Gen. Mgr. Southeast Toyota</b> Aggregate Year-to-Date > \$ 500	9/20/94	500
G. Full Name, Mailing Address and ZIP Code Casey Gunnell 2240 NW 23rd Way Boca Raton, FL 33431 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	JM Family Enterprises, Inc. Occupation: <b>Exec. Vice-Pres. Chief Financial Officer</b> Aggregate Year-to-Date > \$ 500	9/21/94	500

**SUBTOTAL** of Receipts This Page (optional) ..... 7,600

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 2  
FOR LINE NUMBER

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**NAME OF COMMITTEE (In Full)**

JM Family Enterprises, Inc. PAC G00240911

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
L. Wayne McClain 975 SW 21st Way Boca Raton, FL 33486	JM Family Enterprises, Inc.	9/21/94	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Exec. Vice-Pres./Adm Aggregate Year-to-Date > \$ 500		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Nixon 120 NW 12th Avenue Deerfield Beach, FL 33442	World Omni Financial Corp.	9/20/94	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Exec. V.P. JM Family Enterprises, Inc. Aggregate Year-to-Date > \$ 500		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dave Reduzzi 4540 NW 24th Avenue Boca Raton, FL 33431	JM Family Enterprises, Inc.	9/20/94	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Exec. Vice-Pres. Aggregate Year-to-Date > \$ 500		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Williams 100 NW 12th Avenue Deerfield Beach, FL 33442	JM Family Enterprises, Inc.	9/19/94	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Exec. Vice-Pres. Aggregate Year-to-Date > \$ 500		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary W. Hall 3769 Julington Creek Road Jacksonville, FL 32223	Joyserve Company, LTD	9/27/94	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Vice-Pres./Gen'l Mgr. Aggregate Year-to-Date > \$ 500		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert E. Arnett 4120 Prima Vista Circle S. Jacksonville, FL 32217	Southeast Toyota Parts Division	9/26/94	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Vice-Pres./Gen'l Mgr. Aggregate Year-to-Date > \$ 500		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3,000
<b>TOTAL</b> This Period (last page this line number only) .....	10,600

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2  
FOR LINE NUMBER

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**NAME OF COMMITTEE (In Full)**

JM Family Enterprises, Inc. PAC CU0240911

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill McCollum For Congress P. O. Box 2884 Washington, DC 20515	Reception Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/22/94	500
Lipinski For Congress Committee 1212 N. Vernon Street Arlington, VA 22201	Political Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/27/94	500
Tsanikas US Congress Dist. 19 Comm. 145 NW 20 Street Boca Raton, FL 33451	Political Contribution Congress Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/94	500
Friends of Fowler 413 CHOB Washington, DC 20515	Political Contribution Congress Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/24/94	500
Committee to Re-Elect Harry Johnston 204 CHOB Washington, DC 20515	Political Contribution Congress Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/24/94	500
Democratic Legislative Campaign Comm. P. O. Box 389 Raleigh, NC 27602	Political Contribution for N.C. Dem. Party Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/94	4,000
Committee to Re-Elect Speaker Dan Blue P.O. Box 1750 Raleigh, NC 27602	Political Contribution for N.C. House Camp. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/94	250
Committee to Re-Elect Rep. Martin Nesbitt 29 N. Market St. Ste. 700 Asheville, NC 28801	Political Contribution for N.C. House Camp. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/94	250
Committee to Re-Elect Sen. Ted Kaplan 2281 Cloverdale Avenue Winston-Salem, NC 27103	Political Contribution for N.C. Senate Camp. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/94	250

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

7,250

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (In Full)**  
 JM Family Enterprises, Inc. PAC G00240911

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to Re-Elect Sen. J. Richard Conder 202 E. Washington St. Rockingham, NC 28379	Political Contribution for N.C. Senate Comm. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/94	250
B. Full Name, Mailing Address and ZIP Code Democratic Senatorial Campaign Comm. 430 S. Capital Street, SE Washington, DC 20003	Host Committee for Bob Graham Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/28/94	9,600
C. Full Name, Mailing Address and ZIP Code Peter Deutsch for Congress P.O. Box 26778 Tamarac, FL 33320	Host Committee for Peter Deutsch Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/28/94	500
D. Full Name, Mailing Address and ZIP Code Clyburn for Congress Committee P.O. Box 20567 Columbia, S.C. 29211	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/94	500
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	10,850
<b>TOTAL</b> This Period (last page this line number only) .....	18,100

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

*10-13-94*

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

  
PREPARER

*10-17-94*  
DATE PREPARED

94037295487