

**AutoNation**

C. Coleman G. Edmunds  
Vice President,  
Associate General Counsel  
and Assistant Secretary

RECEIVED  
FEC MAIL ROOM

2002 APR 11 A 11:50

AutoNation, Inc.  
110 SE 6th Street  
Fort Lauderdale, FL 33301  
(954) 769-2039  
(954) 769-6527 fax  
www.AutoNation.com

**VIA AIRBORNE EXPRESS  
TRACKING #6175908480**

April 10, 2002

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

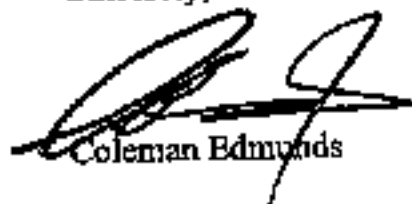
**RE: AutoNation, Inc. Political Committee, ID NO. C00330514**

Dear Ms. Kitchen:

Enclosed you will find the FEC Form 3X for the AutoNation, Inc. Political Action Committee covering the period from January 1, 2002 through March 31, 2002.

Should you have any questions or concerns, please feel free to contact me.

Sincerely,



Coleman Edmunds

Encs.

Cc: Jonathan P. Ferrando

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL ROOM  
2002 APR 11 A 11:51

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5

ANTIOCHAN INCL POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 110 SE 6TH ST 20TH FLOOR

Check if different than previously reported. (ACC) FORT LAUDERDALE FL 33301

2. FEC IDENTIFICATION NUMBER C00330514

CITY STATE ZIP CODE

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(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) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on 03 / 03 / 2002 In the State of FL

(d) 30-Day POST-Election Report for the:


- General (30G)
- Runoff (30R)
- Special (30S)

Election on 03 / 03 / 2002 In the State of FL

5. Covering Period 01 / 01 / 2002 through 03 / 31 / 2002

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 C. COLEMAN G. EDMUNDS

Signature of Treasurer  Date 04 / 10 / 2002

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

Office Use Only                    

**FEC FORM 3X**  
(Revised 1/01)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

AUTONATION INC. POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

01 01 2002

To:

03 31 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2002</u>		<u>6726540</u>
(b) Cash on Hand at Beginning of Reporting Period .....	<u>6726540</u>	
(c) Total Receipts (from Line 18) .....		
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<u>6726540</u>	<u>6726540</u>
7. Total Disbursements (from Line 30) .....	<u>200000</u>	<u>200000</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<u>6526540</u>	<u>6526540</u>
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) .....		



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 (Revised 1/01)

Page 3

Write or Type Committee Name

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Report Covering the Period:

From:

/  /

To:

/  /

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) .....	<input type="text"/>	<input type="text"/>
(ii) Unitemized .....	<input type="text"/>	<input type="text"/>
(ii) TOTAL (add Lines 11(a)(i) and (ii) .....	<input type="text"/>	<input type="text"/>
(b) Political Party Committees .....	<input type="text"/>	<input type="text"/>
(c) Other Political Committees (such as PACs) .....	<input type="text"/>	<input type="text"/>
(d) Total Contributions (add Lines 11(a)(ii), (b), and (c)) (Carry Totals to Line 32, page 4) .....	<input type="text"/>	<input type="text"/>
12. Transfers From Affiliated/Other Party Committees .....	<input type="text"/>	<input type="text"/>
13. All Loans Received .....	<input type="text"/>	<input type="text"/>
14. Loan Repayments Received .....	<input type="text"/>	<input type="text"/>
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4) .....	<input type="text"/>	<input type="text"/>
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....	<input type="text"/>	<input type="text"/>
17. Other Federal Receipts (Dividends, Interest, etc.) .....	<input type="text"/>	<input type="text"/>
18. Transfers from Nonfederal Account for Joint Activity .....	<input type="text"/>	<input type="text"/>
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	<input type="text"/>	<input type="text"/>
20. Total Federal Receipts (subtract Line 18 from Line 19) .....	<input type="text"/>	<input type="text"/>

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	2,000.00	2,000.00
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 Lines 28(a), (b), and (c)) .....		
29. Other Disbursements .....		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) .....	2,000.00	2,000.00
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) .....	2,000.00	2,000.00
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from Line 11(d), page 3) .....		
33. Total Contribution Refunds (from Line 28(d)) .....		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32) .....		
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....		
36. Offsets to Operating Expenditures (from Line 15, page 3) .....		
37. Net Operating Expenditures (subtract Line 36 from Line 35) .....		

**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	OF
<input 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 checked="" 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)

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
<input type="text"/>		<input type="text"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text"/>		

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
<input type="text"/>		<input type="text"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text"/>		

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
<input type="text"/>		<input type="text"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text"/>		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

PAGE OF

21b  22  23  24  25  
 26  27  28a  28b  28c  29

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)

AUTOMATED ILM POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

**A.**

HERRERA FOR CONGRESS

Mailing Address: 2887 GREEN VALLEY PKWY Suite 410

City: HERNDON State: NV Zip Code: 89014

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name: DARVO HERRERA

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: NV District: 3<sup>RD</sup>

Date of Disbursement: 01 / 22 / 2002

Amount of Each Disbursement this Period: 2,000.00

Category/Type: 011

**B.**

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Disbursement: \_\_\_\_\_

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: \_\_\_\_\_

Amount of Each Disbursement this Period: \_\_\_\_\_

Category/Type: \_\_\_\_\_

**C.**

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Disbursement: \_\_\_\_\_

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: \_\_\_\_\_

Amount of Each Disbursement this Period: \_\_\_\_\_

Category/Type: \_\_\_\_\_

SUBTOTAL of Disbursements This Page (optional) ▶

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

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.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>4-11-02</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>dmw</i> PREPARER	<i>4-11-02</i> DATE PREPARED