

JOHN: WOULD YOU PLEASE LET US KNOW WHEN YOU RECEIVE THE NEW CHECKS SO THAT WE CAN START USING THEM. THANKS. BILL

# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL  (Check if name is changed)  
 JM Family Enterprises, Inc. Political Action Committee

2. DATE  
 8/11/93

3. FEC IDENTIFICATION NUMBER  
 C00240911

4. IS THIS STATEMENT AN AMENDMENT?  
 YES  NO

(b) Number and Street Address  (Check if address is changed)  
 100 NW 12 Avenue, P.O. Box 1160

(c) City, State and ZIP Code  
 Deerfield Beach, FL 33443

5. TYPE OF COMMITTEE (Check one)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
|-------------------|-----------------------------|---------------|----------------|
|                   |                             |               |                |
- (c) This committee supports/opposes only one candidate \_\_\_\_\_ (name of candidate) and is NOT an authorized committee.
- (d) This committee is a \_\_\_\_\_ committee of the \_\_\_\_\_ Party.  
 (National, State or subordinate) (Democratic, Republican, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
JM Family Enterprises, Inc.	100 NW 12 Avenue P.O. Box 1160 Deerfield Beach, FL 33443	Affiliated
Fidelity Insurance Agency, Inc.	800 Fairway Drive, Suite 293 Deerfield Beach, FL 33441	Affiliated

Type of Connected Organization  
 Corporation  Corporation with Capital Stock  Labor Organization  Membership Organization  Trade Association  Cooperative

7. Custodian of Records: identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position
Casey L. Cunnell	100 NW 12 Avenue P.O. Box 1160 Deerfield Beach, FL 33443	Custodian of Records

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
S. M. Donohoe	100 NW 12 Avenue P.O. Box 1160 Deerfield Beach, FL 33443	Secretary/Treasurer
Lawrence S. Rich		Assistant Secretary/Treasurer

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, rents accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
Nations Bank	Miami, Florida #3601602814

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

DATE: 8/11/93

TYPE OR PRINT NAME OF TREASURER: W. M. Donohoe

SIGNATURE OF TREASURER: *W. M. Donohoe*

NOTE: Submission of false, erroneous, or incomplete information is by subject the person signing this Statement to the penalties of 2 U.S.C. 2457a. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:

FEC FORM 1

3 4 0 3 8 3 1 1 7 5 5

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 type="checkbox"/> Hand Delivered	DATE OF RECEIPT
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<input type="checkbox"/> First Class Mail	POSTMARKED
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<input type="checkbox"/> No Postmark	
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<input type="checkbox"/> Postmark Illegible	
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<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
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<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
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<input type="checkbox"/> Other (Specify):	POSTMARKED
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	DATE OF RECEIPT
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*Eric Smith*  
PREPARER

2/3/94  
DATE PREPARED

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