THE SUNBELT GOOD GOVERNMENT COMMITTEE

OF WINN-DIXIE STORES, INC.

a political committee established by Winn-Dixie Stores, Inc. as equitably permitted by Section 44nb of Title 2 of the United States Code

P. O. BOX B
JACKSONVILLE, FLORIDA 32203-0297

L. H. MAY, *Chairman*
G. A. STRICKLAND, *Treasurer*
J. A. BARROW, *Member*

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM
FEB 5 12 12 PM

January 27, 1997

CERTIFIED
RETURN RECEIPT REQUESTED

Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

Gentlemen:

On behalf of the above Committee, please find attached FEC Form 3X, Report of Receipts and Disbursements for Other Than an Authorized Committee, required by the United States Code.

Yours very truly,

Gordon A. Strickland

Gordon A. Strickland
Treasurer

GAS/jb
Enclosures

CC: Elections Division
Office of the Secretary of State
The Capitol, Room 1801
Tallahassee, FL 32399-0250

Ethics Commission
State Capitol Building, Room B-5
Oklahoma City, OK 73105-4802

WD 6884

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

FEB 5 12 12 PM '97

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Sunbelt Good Government Committee of Winn-Dixie Stores, Inc.

ADDRESS (number and street) [ ] Check if different than previously reported
5050 Edgewood Court

CITY, STATE and ZIP CODE
Jacksonville,FL 32254-3699

2. FEC IDENTIFICATION NUMBER
C00033092

3. [x] This committee has qualified as a multicandidate committee. (see FEC FORM 1 M)

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report
[ ] July 15 Quarterly Report
[ ] October 15 Quarterly Report
[x] January 31 Year End Report
[ ] July 31 Mid Year Report (Non-election Year Only)
[ ] Termination Report

Monthly Report Due On:
[ ] February 20 [ ] March 20 [ ] April 20 [ ] May 20 [ ] June 20 [ ] July 20 [ ] August 20 [ ] September 20 [ ] October 20 [ ] November 20 [ ] December 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 [x] NO

SUMMARY

5. Covering Period 11/26/96 through 12/31/96

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 19 96		$ 627129.35
(b) Cash on Hand at Beginning of Reporting Period	$ 580827.06	
(c) Total Receipts (from line 19)	$ 3199.43	$ 26492.61
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 584026.49	$ 653621.96
7. Total Disbursements (from Line 30)	$ 1570.00	$ 71165.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 582456.49	$ 582456.49
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)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
Gordon A. Strickland

Signature of Treasurer

Date 1/27/97

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

FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE Sunbelt Good Government Committee of Winn-Dixie Stores, Inc.

REPORT COVERING PERIOD FROM: 11/26/96 TO: 12/31/96

	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) from:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (use Schedule A)		4550.00
ii. Unitemized	470.00	5433.12
iii. Total (add i and ii) ▶	470.00	9983.12
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c) ▶	470.00	9983.12
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	50.00	50.00
17. Other Federal Receipts (Dividends, Interest, etc.)	2679.43	16459.49
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ▶	3199.43	26492.61
20. Total Federal Receipts (subtract line 18 from line 19) ▶	3199.43	26492.61
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures	70.00	2022.47
c. Total Operating Expenditures (Add a i, a ii, and b) ▶	70.00	2022.47
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	1500.00	55000.00
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		143.00
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (Add a, b and c) ▶		143.00
29. Other Disbursements		14000.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ▶	1570.00	71165.47
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ▶	1570.00	71165.47
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	470.00	9983.12
33. Total Contribution Refunds (from line 28d)		143.00
34. Net Contributions (other than loans) (subtract line 33 from 32)	470.00	9840.12
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ▶	70.00	2022.47
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) ▶	70.00	2022.47

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 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)
Sunbelt Good Government Committee of Winn-Dixie Stores, Inc.

FEC ID No. C00033092

A. Full Name, Mailing Address and ZIP Code Merrill Lynch WCMA	Name of Employer WCMA Interest and Dividends	Date (month, day, year) 11/30/96	Amount of Each Receipt this Period 1185.25
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date > $ 14965.31		
B. Full Name, Mailing Address and ZIP Code Merrill Lynch WCMA	Name of Employer WCMA Interest and Dividends	Date (month, day, year) 12/30/96	Amount of Each Receipt this Period 1494.18
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date > $ 16459.49		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date > $		

SUBTOTAL of Receipts This Page (optional)	2679.43
TOTAL This Period (last page this line number only)	2679.43

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 16

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NAME OF COMMITTEE (In Full)
Sunbelt Good Government Committee of Winn-Dixie Stores, Inc.

FEC ID No. C00033092

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Rob Wallace Campaign P. O. Box 271807 Tampa, FL 33688-1807 Receipt for: [ ] Primary [X] General [ ] Other (specify):	Refund of Excess Contribution Wallace-House-FL-#47 Aggregate Year-To-Date > $	12/5/96	50.00
B. Full Name, Mailing Address and ZIP Code Receipt for: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation Aggregate Year-To-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt for: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation Aggregate Year-To-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt for: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation Aggregate Year-To-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt for: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation Aggregate Year-To-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt for: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation Aggregate Year-To-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt for: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation Aggregate Year-To-Date > $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	50.00
TOTAL This Period (last page this line number only)	50.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (in Full)
Sunbelt Good Government Committee of
Winn-Dixie Stores, Inc.

FEC ID No. C00033092

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code State Treasurer Ethics Commission B-5 State Capitol Bldg. Oklahoma City, OK 73105	Late Fee August Report Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/3/96	70.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	70.00
TOTAL This Period (last page this line number only)	70.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
Sunbelt Good Government Committee of Winn-Dixie Stores, Inc.

FEC ID No. C00033092

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Robert Wexler for Congress 2500 North Military Trail Boca Raton, FL 33431	Wexler, House, 19(FL) Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12/6/96	1000.00
B. Full Name, Mailing Address and ZIP Code Allen Boyd for Congress 501 E Tennessee St Ste A Tallahassee, FL 32308	Boyd, House, 2(FL) Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12/6/96	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	1500.00

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
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☐	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

KB
PREPARER

2-5-97
DATE PREPARED

FEC FORM 70-2 (12/92)