

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

JM Family Enterprises, Inc. PAC

ADDRESS (number and street) 100 Jim Moran Blvd.

Check if different than previously reported. (ACC) Deerfield Beach FL 33442

2. **FEC IDENTIFICATION NUMBER ▼** C C00240911 **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:

<input type="checkbox"/> Feb 20 (M2)	<input checked="" type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of

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

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y Y Y

04 / 01 / 2012 through 04 / 30 / 2012

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 Sonya Deen

Signature of Treasurer Sonya Deen *[Electronically Filed]* Date M M M / D D D / Y Y Y Y Y Y Y Y

05 / 14 / 2012

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

JM Family Enterprises, Inc. PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		159003.59
(b) Cash on Hand at Beginning of Reporting Period.....	158518.07	
(c) Total Receipts (from Line 19)	4296.5	17310.98
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	162814.57	176314.57
7. Total Disbursements (from Line 31).....	1000	14500
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	161814.57	161814.57
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

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)

Page 3

Write or Type Committee Name

JM Family Enterprises, Inc. PAC

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).....	3062.6	9878.84
(ii) Unitemized	1233.9	7432.14
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4296.5	17310.98
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	4296.5	17310.98
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5)	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	4296.5	17310.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4296.5	17310.98

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0	0
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000	14500
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1000	14500
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1000	14500

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4296.5	17310.98
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4296.5	17310.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0	0

**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 6 OF 14
<input checked="" 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 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)
JM Family Enterprises, Inc. PAC

A. Deborah A. Battisto
Full Name (Last, First, Middle Initial)
Mailing Address 198 S.W. 6th Avenue
City Boca Raton State FL Zip Code 33486
FEC ID number of contributing federal political committee. **C**
Name of Employer JM Service Center, LLC Occupation Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **480**

Date of Receipt **04 / 30 / 2012**
Transaction ID : C10192
Amount of Each Receipt this Period **120**
* Payroll Deduction: \$60.00 Bi-Monthly

B. Kim R. Bentley
Full Name (Last, First, Middle Initial)
Mailing Address 1240 S.E. 13th Terrace
City Fort Lauderdale State FL Zip Code 33316
FEC ID number of contributing federal political committee. **C**
Name of Employer JM Family Enterprises, Inc. Occupation Director, Community Relations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **416.64**

Date of Receipt **04 / 30 / 2012**
Transaction ID : C10226
Amount of Each Receipt this Period **104.16**
* Payroll Deduction: \$52.08 Bi-Monthly

C. Alan J. Browdy
Full Name (Last, First, Middle Initial)
Mailing Address 11806 N.W. 12th Manor
City Coral Springs State FL Zip Code 33071
FEC ID number of contributing federal political committee. **C**
Name of Employer JM Family Enterprises, Inc. Occupation Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **416.64**

Date of Receipt **04 / 30 / 2012**
Transaction ID : C10209
Amount of Each Receipt this Period **104.16**
* Payroll Deduction: \$52.08 Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....▶	328.32
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Thomas M. Casey
Full Name (Last, First, Middle Initial)

Mailing Address 398 N.E. 7th Street

City Boca Raton State FL Zip Code 33432

FEC ID number of contributing federal political committee. **C**

Name of Employer Jim Moran & Associates Inc. Occupation Vice President, Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **416.64**

Date of Receipt **04 / 30 / 2012**

Transaction ID : C10227

Amount of Each Receipt this Period **104.16**

* Payroll Deduction: \$52.08 Bi-Monthly

B. Ronald M. Coombs
Full Name (Last, First, Middle Initial)

Mailing Address 2920 N.W. 26th Court

City Boca Raton State FL Zip Code 33434

FEC ID number of contributing federal political committee. **C**

Name of Employer Jim Moran & Associates, Inc. Occupation Senior Vice President & CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt **04 / 30 / 2012**

Transaction ID : C10189

Amount of Each Receipt this Period **208.34**

* Payroll Deduction: \$104.17 Bi-Monthly

C. Wayne D. Crater
Full Name (Last, First, Middle Initial)

Mailing Address 412 E. Kesley Lane

City Jacksonville State FL Zip Code 32259

FEC ID number of contributing federal political committee. **C**

Name of Employer Southeast Toyota Distributors, LLC Occupation Associate Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **416.64**

Date of Receipt **04 / 30 / 2012**

Transaction ID : C10213

Amount of Each Receipt this Period **104.16**

* Payroll Deduction: \$52.08 Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....▶	416.66
TOTAL This Period (last page this line number only).....▶	

**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 8 OF 14
<input checked="" 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 type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. Patricia A. Davis

Mailing Address 2639 Foxhunt Trail

City Jacksonville State FL Zip Code 32259

FEC ID number of contributing federal political committee. **C**

Name of Employer JM Service Center, LLC Occupation Director, End User Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250**

Date of Receipt **04 / 30 / 2012**

Transaction ID : C10218

Amount of Each Receipt this Period **62.5**

* Payroll Deduction: \$31.25 Bi-Monthly

Full Name (Last, First, Middle Initial)
B. Sonya R. Deen

Mailing Address 347 N. New River Drive
E PH1

City Fort Lauderdale State FL Zip Code 33301

FEC ID number of contributing federal political committee. **C**

Name of Employer JM Family Enterprises, Inc. Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **416.64**

Date of Receipt **04 / 30 / 2012**

Transaction ID : C10222

Amount of Each Receipt this Period **104.16**

* Payroll Deduction: \$52.08 Bi-Monthly

Full Name (Last, First, Middle Initial)
C. Jon K. Fleeger

Mailing Address 41 Bermuda Greens Avenue

City Ponte Verde State FL Zip Code 32081

FEC ID number of contributing federal political committee. **C**

Name of Employer Southeast Toyota Distributors, LLC Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **416.64**

Date of Receipt **04 / 30 / 2012**

Transaction ID : C10200

Amount of Each Receipt this Period **104.16**

* Payroll Deduction: \$52.08 Bi-Monthly

SUBTOTAL of Receipts This Page (optional)..... **270.82**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 9 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Eric M. Gebhard

Mailing Address 1102 Vista Del Mar Drive North

City State Zip Code
 Delray Beach FL 33483

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 JM Family Enterprises, Inc. Vice President & Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 833.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : C10238

Amount of Each Receipt this Period
 208.34

* Payroll Deduction: \$104.17 Bi-Monthly

Full Name (Last, First, Middle Initial)
B. David Gabel

Mailing Address 125 Reed Street

City State Zip Code
 Lexington MA 02421

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 DataScan Field Services, LLC Director, Application Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : C10198

Amount of Each Receipt this Period
 62.5

* Payroll Deduction: \$31.25 Bi-Monthly

Full Name (Last, First, Middle Initial)
C. Juan C. Guerrero

Mailing Address 7535 N.W. 125th Way

City State Zip Code
 Parkland FL 33076

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Southeast Toyota Distributors, LLC Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 416.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : C10183

Amount of Each Receipt this Period
 104.16

* Payroll Deduction: \$52.08 Bi-Monthly

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00

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

**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 10 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Robert J. Haeffner
Full Name (Last, First, Middle Initial)

Mailing Address 6620 N.E. 21st Avenue

City Fort Lauderdale State FL Zip Code 33308

FEC ID number of contributing federal political committee. **C**

Name of Employer Jim Moran & Associates, Inc. Occupation Director, Business Process Integration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : C10234

Amount of Each Receipt this Period
104.16

* Payroll Deduction: \$52.08 Bi-Monthly

B. Carmen S. Johnson
Full Name (Last, First, Middle Initial)

Mailing Address 6952 SW 149th Terrace

City Palmetto Bay State FL Zip Code 33158

FEC ID number of contributing federal political committee. **C**

Name of Employer JM Family Enterprises Inc. Occupation Vice President, Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
833.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : C10225

Amount of Each Receipt this Period
208.34

* Payroll Deduction: \$104.17 Bi-Monthly

C. Richard M Luceri
Full Name (Last, First, Middle Initial)

Mailing Address 2366 NE 28 Street

City Lighthouse Point State FL Zip Code 33064

FEC ID number of contributing federal political committee. **C**

Name of Employer JM Family Enterprises, Inc. Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
833.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : C10239

Amount of Each Receipt this Period
208.34

* Payroll Deduction: \$104.17 Bi-Monthly

SUBTOTAL of Receipts This Page (optional)..... ▶ 520.84

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

**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 11 OF 14
<input checked="" 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 type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. Travis M. Mazza

Mailing Address 2380 Champlain Street, N.W.
Apt. 30

City Washington State DC Zip Code 20009

FEC ID number of contributing federal political committee. **C**

Name of Employer Jim Moran & Associates, Inc. Occupation Manager, Division Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.64

Date of Receipt
04 / 30 / 2012
Transaction ID : C10242

Amount of Each Receipt this Period
104.16

* Payroll Deduction: \$52.08 Bi-Weekly

Full Name (Last, First, Middle Initial)
B. Erin Neal

Mailing Address 101 Lismore street

City Simpsonville State SC Zip Code 29680

FEC ID number of contributing federal political committee. **C**

Name of Employer Southeast Toyota Distributors, LLC Occupation Manager, District Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
333.28

Date of Receipt
04 / 30 / 2012
Transaction ID : C10217

Amount of Each Receipt this Period
83.32

* Payroll Deduction: \$41.66 Bi-Monthly

Full Name (Last, First, Middle Initial)
c. Craig J. Pollock

Mailing Address 18003 Lake Azure Way

City Boca Raton State FL Zip Code 33496

FEC ID number of contributing federal political committee. **C**

Name of Employer Southeast Toyota Distributors, LLC Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.64

Date of Receipt
04 / 30 / 2012
Transaction ID : C10228

Amount of Each Receipt this Period
104.16

* Payroll Deduction: \$52.08 Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....▶	291.64
TOTAL This Period (last page this line number only).....▶	

**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 12 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Rajeev Ravindran		Date of Receipt MM / DD / YYYY 04 / 30 / 2012
Mailing Address 8077 Laurel Ridge Court		Transaction ID : C10177
City Delray Beach	State FL	Zip Code 33446
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100	
Name of Employer JM Service Center LLC	Occupation Vice President & CTO	* Payroll Deduction: \$50.00 Bi-Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400	

Full Name (Last, First, Middle Initial) B. James W. Reed		Date of Receipt MM / DD / YYYY 04 / 30 / 2012
Mailing Address 7275 Hunters Trace Drive		Transaction ID : C10233
City Cumming	State GA	Zip Code 30040
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 62.5	
Name of Employer JM Service Center, LLC	Occupation Director, System Administration	* Payroll Deduction: \$31.25 Bi-Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250	

Full Name (Last, First, Middle Initial) C. Eduardo A. Rivera Jr.		Date of Receipt MM / DD / YYYY 04 / 30 / 2012
Mailing Address 16270 SW 16th Street		Transaction ID : C10232
City Pembroke Pines	State FL	Zip Code 33027
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 104.16	
Name of Employer JM Service Center LLC	Occupation Vice President, Project Management	* Payroll Deduction: \$52.08 Bi-Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.64	

SUBTOTAL of Receipts This Page (optional).....▶	266.66
TOTAL This Period (last page this line number only).....▶	

**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 13 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Alan J. Savage
Full Name (Last, First, Middle Initial)
Mailing Address 271 Lake Mist Drive
City Mooresville State NC Zip Code 28117
FEC ID number of contributing federal political committee. **C**
Name of Employer Jim Moran & Associates, Inc. Occupation Division Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **706.64**

Date of Receipt **04 / 30 / 2012**
Transaction ID : C10219
Amount of Each Receipt this Period **176.66**
* Payroll Deduction: \$88.33 Bi-Monthly

B. Ken Yerves
Full Name (Last, First, Middle Initial)
Mailing Address 22472 Tiki Drive
City Boca Raton State FL Zip Code 33428
FEC ID number of contributing federal political committee. **C**
Name of Employer JM Family Enterprises, Inc. Occupation Executive Vice President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1664**

Date of Receipt **04 / 30 / 2012**
Transaction ID : C10197
Amount of Each Receipt this Period **416**
* Payroll Deduction: \$208.00 Bi-Monthly

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date

Date of Receipt
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	592.66
TOTAL This Period (last page this line number only).....	3062.60

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Friends Of Cliff Stearns

Mailing Address P.O. Box 308

City Silver Springs State FL Zip Code 34489

Purpose of Disbursement
Contribution

Candidate Name

Clifford Stearns

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: FL District: 06

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 03 / 2012

Transaction ID : D369

Amount of Each Disbursement this Period

1000

B.

Full Name (Last, First, Middle Initial)

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

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

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

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

1000.00

1000.00