

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

APR 16 1 55 PM '96

USE FEC MAILING LABEL OR PRINT TYPE OR PRINT

<b>1. NAME OF COMMITTEE (in full)</b> JM Family Enterprises, Inc.      PAC C00240911	
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported 100 NW 12th Avenue	<b>2. FEC IDENTIFICATION NUMBER</b> C00240911
<b>CITY, STATE and ZIP CODE</b> Deerfield Beach, FL 33442	<b>3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)</b>

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report      Monthly Report Due On:
- February 20     June 20       October 20  
 July 15 Quarterly Report     March 20     July 20       November 20  
 October 15 Quarterly Report     April 20     August 20     December 20  
 January 31 Year End Report     May 20       September 20     January 31
- July 31 Mid Year Report (Non-election Year Only)
- 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 \_\_\_\_\_
- Termination Report
- (b) Is this Report an Amendment?     YES     NO

96030421943

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Covering Period <u>1/1/96</u> through <u>3/31/96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u> ..... \$13,967.73		\$13,967.73
(b) Cash on Hand at Beginning of Reporting Period .....	\$13,967.73	
(c) Total Receipts (from Line 19) .....	\$ -0-	\$ -0-
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	\$13,967.73	\$13,967.73
7. Total Disbursements (from Line 30) .....	\$ 5,500.00	\$ 5,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	\$ 8,467.73	\$ 8,467.73
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	\$	For further information contact: Federal Election Commission 969 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
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 Paul Anderson		
Signature of Treasurer <i>Paul Anderson</i>		Date 4/12/96

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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**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		REPORT COVERING PERIOD	
JM Family Enterprises, Inc. PAC CD024D911		FROM 1/1/96	TO: 3/31/96
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11.	Contributions (other than loans) From:		
a.	Individual/Persons Other Than Political Committees		
i.	Itemized (use Schedule A)	-0-	-0-
ii.	Unitemized		
iii.	Total (add i and ii) >	-0-	-0-
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contributions (add a ii, b and c) >	-0-	-0-
12.	Transfers From Affiliated/Other Party Committees		
13.	All Loans Received		
14.	Loan Repayments Received		
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-	-0-
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	-0-	-0-
17.	Other Federal Receipts (Dividends, Interest, etc.)		
18.	Transfers from Nonfederal Account for Joint Activity		
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	-0-	-0-
20.	Total Federal Receipts (subtract line 16 from line 19) >		
<b>II. Disbursements</b>			
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 a i, a ii, and b) >	-0-	-0-
22.	Transfers to Affiliated/Other Party Committees		
23.	Contributions to Federal Candidates/Committees and Other Political Committees	4,500	4,500
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 a, b and c) >		
29.	Other Disbursements Non-Federal candidates	1,000	1,000
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	5,500	5,500
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	5,500	5,500
<b>III. Net Contributions/Operating Expenditures</b>			
32.	Total Contributions (other than loans)(from line 11d)	-0-	-0-
33.	Total Contribution Refunds (from line 28d)		
34.	Net Contributions (other than loans)(subtract line 33 from 32)		
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	-0-	-0-
36.	Offsets to Operating Expenditures (from line 15)		
37.	Net Operating Expenditures (subtract line 36 from 35) >	-0-	-0-

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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 CD0240911 1/1/96-3/31/96

96030421945

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hastings for Congree PO Box 9352 Ft. Lauderdale, FL 33310	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/24/96	500
B. Full Name, Mailing Address and ZIP Code Friends of Connie Mack PO Box 23264 Tampa, FL 33623-3264	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/8/96	1,000
C. Full Name, Mailing Address and ZIP Code Allen Boyd for Congress PO Box 15703 Tallahassee, FL 32317-5703	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/19/96	500
D. Full Name, Mailing Address and ZIP Code Friends of Mark Foley PO Box 19536 West Palm Beach, FL 33416	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/26/96	1,000
E. Full Name, Mailing Address and ZIP Code Lincoln Diaz-Balart Campaign 431 Cannon House Office Bldg Washington, DC 20515	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/13/96	500
F. Full Name, Mailing Address and ZIP Code Continue The Majority PO Box 533971 Orlando, FL 32853	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/96	1,000
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

**SUBTOTAL** of Disbursements This Page (optional) ..... 4,500

**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 C00240911 1/1/96-3/31/96

96030421946

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 George Holmes 2510 White Oak Rd Raleigh, NC 27602	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/14/96	250
B. Full Name, Mailing Address and ZIP Code Committee to Re-Elect Richard Conder PO Box 2537 Raleigh, NC 27602	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/14/96	250
C. Full Name, Mailing Address and ZIP Code Committee to Re-Elect Aaron Plyler PO Box 2537 Raleigh, NC 27602	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/14/96	250
D. Full Name, Mailing Address and ZIP Code Bob Hunter Campaign Committee PO Box 1330 Marion, NC 28752	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/96	250
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) .....	1,000
<b>TOTAL</b> This Period (last page this line number only) .....	5,500

**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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POSTMARKED

4-12-96

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

*[Signature]*  
 PREPARER

4-16-96  
 DATE PREPARED

96030421947