

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FILED
JUL 24 2 29 PM '95

USE FEC MAILING LABEL
OR
TYPE OR PRINT

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

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 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 NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>1/1/95</u> through <u>6/30/95</u>		
6. (a) Cash on Hand January 1, 19 <u>95</u>		\$ 3,167.73
(b) Cash on Hand at Beginning of Reporting Period	\$ 3,167.73	
(c) Total Receipts (from Line 1B)	\$ 28,050.00	\$ 28,050.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 31,217.73	\$ 31,217.73
7. Total Disbursements (from Line 3D)	\$ 9,350.00	\$ 9,350.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 21,867.73	\$ 21,867.73
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20483 Toll Free 800-424-9530 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
H. Logan Piergon

Signature of Treasurer _____ Date 7/5/95

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)

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**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FED FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
JM Family Enterprises, Inc. PAC C00240911		FROM 1/1/95	TO: 6/30/95	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	27,850	27,850	11(a)(i)
ii.	Unitemized	200	200	11(a)(ii)
iii.	Total (add i and ii) >	28,050	28,050	11(a)(iii)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions (add a iii, b and c) >	28,050	28,050	11(d)
12.	Transfers From Affiliated/Other Party Committees			12
13.	All Loans Received			13
14.	Loan Repayments Received			14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17.	Other Federal Receipts (Dividends, Interest, etc.)			17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	28,050	28,050	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	28,050	28,050	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share			21(a)(i)
ii.	Non-Federal Share			21(a)(ii)
b.	Other Federal Operating Expenditures			21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >			21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	7,600	7,600	23
24.	Independent Expenditures (use Schedule E)			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..			25
26.	Loan Repayments Made			26
27.	Loans Made			27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees			28(a)
b.	Political Party Committees			28(b)
c.	Other Political Committees (such as PACs)			28(c)
d.	Total Contribution Refunds (add a, b and c) >			28(d)
29.	Other Disbursements Non-Federal Candidates	1,750	1,750	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	9,350	9,350	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	9,350	9,350	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	-0-	-0-	32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans)(subtract line 33 from 32)			34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	-0-	-0-	35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 36 from 35) >	-0-	-0-	37

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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 8
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

JM FAMILY ENTERPRISES, INC. PAC CU0240911

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael F. Nixon 120 NW 12th Avenue Deerfield Beach, FL 33442	World Omni Financial Corp.	4/2/95	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation Exec. V.P. JMFE Pres/World Omni Aggregate Year-to-Date > \$ 500		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Casey L. Gunnell 2240 NW 23rd Way Boca Raton FL 33431	JM Family Enterprises, Inc.	3/31/95	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation Exec. V.P. Chief Financial Officer Aggregate Year-to-Date > \$ 500		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kenneth M. Czubay 8140 NW 51st Place Coral Springs, FL 33067	JM Family Enterprises, Inc.	4/10/95	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation Sr. V.P./JMFE Gen. Mgr./Southeast Toy. Aggregate Year-to-Date > \$ 250		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence S. Rich 4450 NW 98th Avenue Coral Springs, FL 33065	JM Family Enterprises, Inc.	4/8/95	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation Chief Operating Officer Aggregate Year-to-Date > \$ 500		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patricia G. Moran c/o JM Family Enterprises, Inc. 100 NW 12th Avenue Deerfield Beach, FL 33442	JM Family Enterprises, Inc.	3/27/95	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation President Aggregate Year-to-Date > \$ 500		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John L. Williams 100 NW 12th Avenue Deerfield Beach, FL 33442	JM Family Enterprises, Inc.	3/29/95	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation Exec. Vice President Aggregate Year-to-Date > \$ 250		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kenneth McCoy 21119 Sweetwater Lane, N. Boca Raton, FL 33428	Southeast Toyota Distributors, Inc.	4/28/95	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation V.P./Fleet Operations Aggregate Year-to-Date > \$ 500		

SUBTOTAL of Receipts This Page (optional) 3,000

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 8
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

JM Family Enterprises, Inc. PAC C00240911

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard A. Noland 641 SW 15th Street Boca Raton, FL 33486	JM Family Enterprises, Inc.	4/30/95	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Vice President Aggregate Year-to-Date > \$500		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harvey J. Rimsfield 1100 SE 15th Avenue Deerfield Beach, FL 33441	Southeast Toyota Distributors, Inc.	5/2/95	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Sales Training Manager Aggregate Year-to-Date > \$500		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Arnett 4120 Prima Vista Circle S. Jacksonville, FL 32217	Southeast Toyota Parts	5/1/95	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Group V.P./ Parts & Service Aggregate Year-to-Date > \$500		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Marler 2050 NW 69th Terrace Margate, FL 33063	Southeast Toyota Distributors, Inc.	5/1/95	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Dir./Marine Operations Aggregate Year-to-Date > \$500		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven J. May 5099 NW 84th Road Coral Springs, FL 33067	Southeast Toyota Distributors, Inc.	5/2/95	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Director, Fleet Adm. Aggregate Year-to-Date > \$500		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Janice Moran PO Box 1160 Deerfield Beach, FL 33442	JM Family Enterprises, Inc.	5/2/95	5,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Senior Vice President Aggregate Year-to-Date > \$5,000		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Majcher 8187 Sabal Oak Lane Jacksonville, FL 32256	Southeast Toyota Service	5/4/95	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: V.P. Parts Svc. Opng. Aggregate Year-to-Date > \$500		

SUBTOTAL of Receipts This Page (optional)	8,000
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
 JM Family Enterprises, Inc. PAC C00240911

95039064976

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Darryl Head 8180 NW 51st Place Coral Springs, FL 33067	Southeast Toyota Distributors, Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Information Systems Dir.	5/4/95	500
	Aggregate Year-to-Date > \$500		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Andra Smith 902 SW 33rd Place Boynton Beach, FL 33435	JM Family Enterprises, Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: V.P./Corp. Accounting	5/3/95	1,000
	Aggregate Year-to-Date > \$1,000		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Phillips 7670 Bedford Court Mobile, AL 36695	World Omni Financial Corp.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Vice President	5/2/95	500
	Aggregate Year-to-Date > \$500		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fred Bartholomew 2117 Pinehurst Way Coral Springs, FL 33071	Southeast Toyota Distributors, Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: District Service Manager	6/12/95	250
	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
Jeffrey A. Geisler 2346 Beschcomber Trail Atlantic Beach, FL 32233	Joyserve		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Dir. of Port Operations	5/8/95	500
	Aggregate Year-to-Date > \$500		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Hall 3769 Julington Creek Road Jacksonville, FL 32223	Joyserve		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Group V.P. of Port Operations	5/8/95	500
	Aggregate Year-to-Date > \$500		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John W. Hill 14741 Compass Drive Jacksonville, FL 32226	Joyserve		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Director of Production	5/10/95	500
	Aggregate Year-to-Date > \$500		

SUBTOTAL of Receipts This Page (optional)	3,750
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 8 FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

JM Family Enterprises, Inc. PAC C00240911

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Blanton 1660 SW 72nd Avenue Plantation, FL 33317	JM Family Enterprises, Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation V.P. Taxation	5/10/95	500
	Aggregate Year-to-Date > \$ 500		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur B. Dahm 9945 Chelsea Lake Road Jacksonville, FL 32256	Southeast Toyota Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation Body Parts Marketing Mgr.	5/5/95	500
	Aggregate Year-to-Date > \$ 500		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rhonda Gallaspy 2027 Woodlake Terrace Deerfield Beach, FL 33442	JM Family Enterprises, Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation V.P. Human Resources	5/9/95	500
	Aggregate Year-to-Date > \$ 500		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Kump 3070 NE 44 Street Ft. Lauderdale, FL 33308	JM Family Enterprises, Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation Corporate Physician	5/12/95	500
	Aggregate Year-to-Date > \$ 500		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Wettlaufer 11285 SW 1st Street Coral Springs, FL 33071	Fidelity Warranty Serv.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation Assistant V.P. Vehicle Services	6/13/95	500
	Aggregate Year-to-Date > \$ 100		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerry Roche 14710 Plumosa Drive Jacksonville, FL 32250	Southeast Toyota Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation Field Serv. Oper. Mgr.	5/8/95	500
	Aggregate Year-to-Date > \$ 500		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George R. Shepard 12835 Ft. Caroline Road Jacksonville, FL 32225	Southeast Toyota Parts		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation V.P./Parts Supply & Dist.	5/12/95	500
	Aggregate Year-to-Date > \$ 500		

SUBTOTAL of Receipts This Page (optional) 3,500

TOTAL This Period (last page this line number only)

95039064977

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 5 OF 8
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NAME OF COMMITTEE (In Full)

JM Family Enterprises, Inc. PAC CD0240911

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce Wohlleb 7239 San Salvador Drive Boca Raton, FL 33433	World Omni Financial Corp.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Vice President	5/24/95	250
	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerald Florence 5188 Deerhurst Crescent Circle Boca Raton, FL 33486	JM Family Enterprises, Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Vice President	5/19/95	250
	Aggregate Year-to-Date > \$ 250		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Forrest Heathcott 3745 Canterbury Court Boca Raton, FL 33434	World Omni Financial Corp.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: V.P./Remarketing	5/21/95	250
	Aggregate Year-to-Date > \$250		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Jackson 12677 Eagle Trace Blvd., N. Coral Springs, FL 33071	Southeast Toyota Distributors, Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Director of Sales	5/18/95	250
	Aggregate Year-to-Date > \$ 250		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steve Shannon 8133 Bahia Blanca Street Jacksonville, FL 32256	Southeast Toyota Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Service Development Mgr.	5/15/95	500
	Aggregate Year-to-Date > \$ 500		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patrick Sreanan 4221 NE 23rd Terrace Lighthouse Point, FL 33064	JM & A Group		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Asst. V.P./ Insur. & Finance Svc	5/17/95	500
	Aggregate Year-to-Date > \$500		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Grant Wilson 6532 NW 99th Avenue Parkland, FL 33076	Southeast Toyota Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: District Parts Manager	5/19/95	500
	Aggregate Year-to-Date > \$ 500		

95039064970

SUBTOTAL of Receipts This Page (optional)

2,500

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 6 OF 8
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NAME OF COMMITTEE (in Full)

JM Family Enterprises, Inc. PAC C00240911

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Tucker Allen 751 Villa Portofino Circle Deerfield Beach, FL 33442	JM Family Enterprises, Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Corporate Treasurer Aggregate Year-to-Date > \$ 500	6/5/95	500
B. Frank W. Carstens 11170 NW 26th Drive Coral Springs, FL 33065	World Omni Financial Corp.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Vice President Aggregate Year-to-Date > \$ 250	5/30/95	250
C. Greg English 1900 Ivanhoe Road Orlando, FL 32804	Southeast Toyota Distributors, Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: District Sales Manager Aggregate Year-to-Date > \$250	6/5/95	250
D. Randall Filice 4755 Berwyn Court Palm Harbor, FL 34685	Southeast Toyota Distributors, Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: District Sales Manager Aggregate Year-to-Date > \$250	5/9/95	250
E. Gary Galligar 2910 W. Beaver Street Jacksonville, FL 32205	JM Family Enterprises, Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: V.P./Sales & Marketing Aggregate Year-to-Date > \$ 500	6/3/95	500
F. Wayne K. Givens P.O. Box 41585-32203 Jacksonville, FL 32203	Petro Chemical Products, Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: President Aggregate Year-to-Date > \$ 500	6/7/95	500
G. Robert Hogan 8625 Hunter Creek Road, So. Jacksonville, FL 32256	Southeast Toyota Distributors, Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: District Sales Manager Aggregate Year-to-Date > \$ 250	6/1/95	250

SUBTOTAL of Receipts This Page (optional) 2,500

TOTAL This Period (last page this line number only)

95039064919

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 8 FOR LINE NUMBER 18

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NAME OF COMMITTEE (In Full)

JM Family Enterprises, Inc. PAC C240911

95039364930

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Johnson 445 Spring Ridge Drive Roswell, GA 30076	Southeast Toyota Distributors, Inc. Occupation: Regional Sales Manager	5/23/95	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Aggregate Year-to-Date > \$250		
Michael A. Lee 8 Leewood Court Greensboro, NC 27455	Southeast Toyota Distributors, Inc. Occupation: District Sales Manager	5/15/95	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Aggregate Year-to-Date > \$250		
John P. Lynch 284 NW 9th Terrace Boca Raton, FL 33486	Southeast Toyota Distributors, Inc. Occupation: District Sales Manager	5/11/95	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Aggregate Year-to-Date > \$250		
James A. Marriott 28 Seneca Lane Richmond Hill, GA 31324	Southeast Toyota Distributors, Inc. Occupation: District Manager	5/15/95	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Aggregate Year-to-Date > \$250		
James R. Malchiorre 4050 Alsbury Drive Jacksonville, FL 32224	Southeast Toyota Service Occupation: Fixed Operations Consultant	6/5/95	600
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Aggregate Year-to-Date > \$		
Robert Galaska 13478 Jonquil Ct. West Palm Beach, FL 33414	World Omni Financial Corp. Occupation: Regional Sales Manager	6/16/95	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Aggregate Year-to-Date > \$		
Don Moffett 8988 NW 52nd Court Coral Springs, FL 33067	Southeast Toyota Distributors, Inc. Occupation: Regional Sales Manager	5/12/95	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Aggregate Year-to-Date > \$250		

SUBTOTAL of Receipts This Page (optional) 2,350

TOTAL This Period (last page this line number only)

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 C00240911

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mineta for Congress P.O. Box 65873 Washington, DC 20035-5873	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/95	500
B. Full Name, Mailing Address and ZIP Code N.C. Republican Legislative Forum P.O. Box 26611 Raleigh, NC 27611-6611	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/95	250
C. Full Name, Mailing Address and ZIP Code Peter Deutsch for Congress P.O. Box 26778 Tamarac, FL 33320	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/95	1,000
D. Full Name, Mailing Address and ZIP Code Democratic Legislative Campaign Committee - House 6300-138 Creedmoor Rd., Suite 175 Raleigh, NC 27612	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/16/95	250
E. Full Name, Mailing Address and ZIP Code Democratic Senatorial Campaign Comm. 430 S. Capitol Street Washington, DC 20003	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/31/95	1,000
F. Full Name, Mailing Address and ZIP Code North Carolina Senate Leadership Comm. P.O. Box 2537 Raleigh, NC 27602	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/13/95	1,000
G. Full Name, Mailing Address and ZIP Code North Carolina Legislative Forum P.O. Box 26611 Raleigh, NC 27611-6611	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/27/95	250
H. Full Name, Mailing Address and ZIP Code Diaz-Balart for Congress 9737 NW 41st Street, Suite 131 Miami, FL 33178	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/27/95	600
I. Full Name, Mailing Address and ZIP Code Hastings for Congress 421 New Jersey Avenue, SE Washington, DC 20003	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/14/95	1,000

SUBTOTAL of Disbursements This Page (optional) 6,350

TOTAL This Period (last page this line number only)

2
3
4
5
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8
9

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
 JM Family Enterprises, Inc. PAC C00240911

2503964953

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends for Max Baucus c/o Reece & Associates 1100 Spring Street, Ste. 350 Atlanta, GA 30309	Reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/3/95	500
B. Full Name, Mailing Address and ZIP Code The Republican Senate-House Dinner 1101 17th Street, NW Suite 808 Washington, DC 20036	Reception/Dinner Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/95	1,500
C. Full Name, Mailing Address and ZIP Code Peter Deutsch Campaign PO Box 26778 Tamarac, FL 33320-9929	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/20/95	500
D. Full Name, Mailing Address and ZIP Code Friends of Dave Weldon 2267 Royal Poinciana Blvd Melbourne, FL 32935	1996 Primary Election Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/29/95	500
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

SUBTOTAL of Disbursements This Page (optional)	3,000
TOTAL This Period (last page this line number only)	9,350

**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

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Received from the Senate Office of Public Records DATE OF RECEIPT

Other (Specify): POSTMARKED
and/or DATE OF RECEIPT

JLB
 PREPARER

7-24-95
 DATE PREPARED

95039664934