

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 / 33	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial)
A. Samuel C. Jones

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 0 2

Mailing Address
7078 Chesapeake Circle

City State Zip Code
Boynton Beach FL 33436

Amount of Each Receipt this Period
300.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Fidelity Warranty Services Director, Customer Services

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 300.00

Transaction ID: SA11A1.4167

Full Name (Last, First, Middle Initial)
B. George Kokineks

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 0 2

Mailing Address
11998 NW 2nd Street

City State Zip Code
Coral Springs FL 33071-9019

Amount of Each Receipt this Period
300.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
JM Family Enterprises, Inc. Director, Aviation

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 300.00

Transaction ID: SA11A1.4169

Full Name (Last, First, Middle Initial)
C. Joseph G. Kump

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 2

Mailing Address
100 Jim Moran Boulevard

City State Zip Code
Deerfield Beach FL 33442

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
JM Family Enterprises, Inc. VP., Corporate Physician

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 500.00

Transaction ID: SA11A1.4171

SUBTOTAL of Receipts This Page (optional) ▶ **1100.00**

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