

**SCHEDULE A**

**ITEMIZED RECEIPTS**

4/1/00 - 6/30/00

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

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FOR LINE NUMBER 11, A, I

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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John J. Whelan 100 NW 12th Ave. Deerfield Beach, FL 33443	JM Family Enterprises, Inc.	6/7/00	400
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President, Corporate Secretary	Aggregate Year-to-Date > \$ 400	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David M. Williams 500 Treyburn View Alpharetta, GA 30004	Jim Moran & Associates, Inc.	6/8/00	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager, Regional Sales	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
Edward D. Adams III 87 SW 10th Drive Boca Raton, FL 33486	Southeast Toyota Distributors, LLC	6/12/00	300
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director, Customer Service	Aggregate Year-to-Date > \$ 300	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Shirley Guidroz 4972 NW 106th Ave. Coral Springs, FL 33076	Southeast Toyota Distributors, LLC	5/21/00	300
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director, Human Resources	Aggregate Year-to-Date > \$ 300	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James M. McDavid 6017 Kipps Colony Dr. E. Gulfport, FL 33707	Jim Moran & Associates, Inc.	5/30/00	400
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager, Regional Sales	Aggregate Year-to-Date > \$ 400	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William H. Wettlaufer 11285 SW 1st Street Coral Springs FL 33071	Southeast Toyota Distributors, LLC	6/15/00	300
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director, Sales	Aggregate Year-to-Date > \$ 300	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

**SUBTOTAL** of Receipts This Page (optional) ..... 2,200

**TOTAL** This Period (last page this line number only) ..... 25,800