

**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 1 OF 3	
	<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)
BAYPAC

A. Full Name (Last, First, Middle Initial)
LEE TUBIN

Mailing Address
639 RIVIERA DR

City **Tampa** State **FL** Zip Code **33606**

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

Name of Employer Occupation
PACKAGING EXECUTIVE

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500-

Date of Receipt
2 4 2008

Amount of Each Receipt this Period
500-

RECEIVED
MAIL CENTER
JUN 29 PM 9:25

B. Full Name (Last, First, Middle Initial)
MARTIN SUTOMON

Mailing Address
4925 BAYWAY PLACE

City **Tampa** State **FL** Zip Code **33629**

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

Name of Employer Occupation
ACCOUNTANT EXECUTIVE

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
180-

Date of Receipt
2 5 2008

Amount of Each Receipt this Period
180-

C. Full Name (Last, First, Middle Initial)
GREGORY WAKSMAN

Mailing Address
7015 PELICAN ISLAND DR

City **Tampa** State **FL** Zip Code **33634**

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

Name of Employer Occupation
ATTORNEY

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
400-

Date of Receipt
2 5 2008

Amount of Each Receipt this Period
400-

SUBTOTAL of Receipts This Page (optional)..... **1080-**

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

56020865082

**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 2 OF 3	
	<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)
BAYPAC

A. MARK LINSKY
 Full Name (Last, First, Middle Initial)
 Mailing Address: **2911 S. DUNDIE ST**
 City: **Tampa** State: **FL** Zip Code: **33629**
 Date of Receipt: **2/14/2008**
 Amount of Each Receipt this Period: **500-**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: Occupation: **ATTORNEY**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: **500-**

B. Blossom Leibowitz
 Full Name (Last, First, Middle Initial)
 Mailing Address: **1039 GUINDADO DE AVILA**
 City: **Tampa** State: **FL** Zip Code: **33613**
 Date of Receipt: **2/20/2008**
 Amount of Each Receipt this Period: **2500-**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: Occupation: **HOUSWIFE**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: **2500-**

C. ABBE MARRERAS
 Full Name (Last, First, Middle Initial)
 Mailing Address: **5127 W. SAN JOSE ST**
 City: **Tampa, Fla** State: Zip Code: **33629**
 Date of Receipt: **2/20/2008**
 Amount of Each Receipt this Period: **500-**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: Occupation: **PLASTIC SURGEON**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: **500-**

SUBTOTAL of Receipts This Page (optional)..... **3500-**
TOTAL This Period (last page this line number only).....

28039802096

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

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

FOR LINE NUMBER: PAGE 3 OF 3
(check only one)

<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)
BAYPAC

A. Full Name (Last, First, Middle Initial)
Douglas Cohrt

Mailing Address
4616 San Miguel

City **Tampa** State **FL.** Zip Code **33629**

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

Name of Employer **TRANS Corp of Tampa** Occupation **OWNER**

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500-**

Date of Receipt **3 / 7 / 2008**

Amount of Each Receipt this Period **500-**

B. Full Name (Last, First, Middle Initial)
John Ellis

Mailing Address
1404 SPRINGTON RD

City **BRANDON** State **FL.** Zip Code **33511**

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

Name of Employer Occupation **ATTORNEY**

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1,000-**

Date of Receipt **3 / 7 / 2008**

Amount of Each Receipt this Period **1,000-**

C. Full Name (Last, First, Middle Initial)
LES BARNETT

Mailing Address
2805 BAY POINTE CIRCLE

City **TAMPA** State **FL.** Zip Code **33611**

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

Name of Employer Occupation **ATTORNEY**

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500-**

Date of Receipt **3 / 2 / 2008**

Amount of Each Receipt this Period **500-**

SUBTOTAL of Receipts This Page (optional)..... ▶ **2000-**

TOTAL This Period (last page this line number only)..... ▶ **6580-**

28039802097

**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)

PAGE 1 OF 2

<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

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NAME OF COMMITTEE (In Full)

BAYPAC

Full Name (Last, First, Middle Initial)

A. Cong. ERIC CLAYTON RE-ELECTION Camp.

Date of Disbursement

1 28 2008

Mailing Address

HANDED TO CONG. IN TAMPA

City

Wash.

State

D.C.

Zip Code

Purpose of Disbursement

CAMPAIGN CONTRIBUTION

Candidate Name

ERIC CLAYTON

Category/
Type

Amount of Each Disbursement this Period

1000 -

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: VA

District: 7th

Full Name (Last, First, Middle Initial)

B. Cong. CONNIE MACK RE-ELECTION Camp.

Date of Disbursement

2 15 2008

Mailing Address

CONTRIBUTION MADE AT FUNDRAISOR IN TAMPA

City

Wash.

State

D.C.

Zip Code

Purpose of Disbursement

CAMPAIGN CONTRIBUTION

Candidate Name

CONNIE MACK

Category/
Type

Amount of Each Disbursement this Period

1000 -

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: FL

District: 14th

Full Name (Last, First, Middle Initial)

C. Cong. LINCOLN DIAZ-BALART RE-ELECTION Camp.

Date of Disbursement

3 13 2008

Mailing Address

GIVEN AS CONTRIBUTION AT FUNDRAISING EVENT IN MIAMI

City

Wash.

State

D.C.

Zip Code

Purpose of Disbursement

CAMPAIGN CONTRIBUTION

Candidate Name

LINCOLN DIAZ-BALART

Category/
Type

Amount of Each Disbursement this Period

500 -

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: FL

District: 21st

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

2500 -

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

28039802098

**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

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NAME OF COMMITTEE (In Full)
SAFPA

Full Name (Last, First, Middle Initial) A. Cong Gus Bilirakis Re-Election Camp.		Date of Disbursement 3 / 8 / 2008
Mailing Address GIVEN AS CONTRIBUTION AT FUNDRAISING EVENT IN Tampa		Amount of Each Disbursement this Period 1,000 -
City Wash.	State D.C.	
Purpose of Disbursement CAMPAIGN CONTRIBUTION		Category/ Type
Candidate Name Gus Bilirakis		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 9th	

Full Name (Last, First, Middle Initial) B. Cong. Cathy Castor Re-Election Camp.		Date of Disbursement 3 / 26 / 2008
Mailing Address GIVEN AS CONTRIBUTION AT FUNDRAISING EVENT IN Tampa		Amount of Each Disbursement this Period 2,500 -
City Wash.	State D.C.	
Purpose of Disbursement CAMPAIGN CONTRIBUTION		Category/ Type
Candidate Name Cathy Castor		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 11th	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	3,500 -
TOTAL This Period (last page this line number only).....▶	6,000 -

28039802099



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RECEIVED
FEC MAIL CENTER
2008 JUL 29 PM 9:25

July 11, 2008

Herb Swartzman, Treasurer
BAYPAC
Box 271082
Tampa, FL 33688

**Response Due Date:
August 11, 2008**

Identification Number: C00155713

Reference: April Quarterly Report (1/01/08-3/31/08)

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **Failure to adequately respond by the response date noted above could result in an audit or enforcement action.** Additional information is needed for the following item:

- Please amend Schedule B supporting Line 23 by providing the address, date and congressional district for each contribution made. 11 CFR §104.3(b)(3)(ii) and (v)
- On Schedule A supporting Line 11(a)(i) of the Detailed Summary Page, your report disclosed contributions from individuals that omit the address. Please amend your report by supplying the information. 11 CFR §104.3(a)(4)(i)

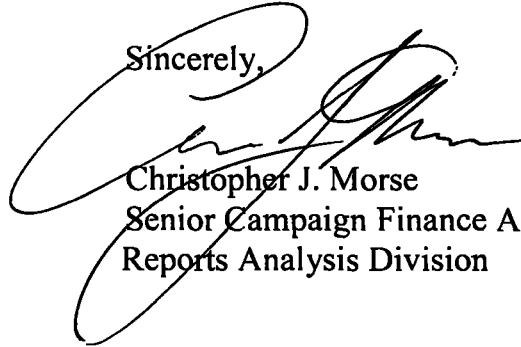
Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. **Requests for extensions of time in which to respond will not be considered.**

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended.

28039802100

If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1133.

Sincerely,



Christopher J. Morse
Senior Campaign Finance Analyst
Reports Analysis Division

298

28039802101

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 7/22/08
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


 PREPARER

7/29/08
 DATE PREPARED

28039802102