

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
PUBLIC DISCLOSURE  
DIVISION



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

2015 SEP -1 AM 10: 35

RQ-7

August 20, 2015

HERB SWARZMAN, TREASURER  
BAYPAC  
BOX 271082  
TAMPA, FL 33688

IDENTIFICATION NUMBER: C00155713

REFERENCE: MID-YEAR REPORT REPORT (01/01/2015 - 06/30/2015)

Dear Treasurer:

It has come to the attention of the Federal Election Commission that you may have failed to file the above referenced report of receipts and disbursements or failed to file a report covering the entire reporting period as required by the Federal Election Campaign Act, as amended. 52 U.S.C. §30104(a)

It is important that you file this report immediately with the Federal Election Commission, 999 E Street, N.W., Washington, DC 20463. Please note that electronic filers must submit their reports electronically, as per 11 CFR §104.18. A copy of the report or relevant portions must also be filed with the Secretary of State or equivalent State officer unless the State is exempt from the federal requirement to receive and maintain paper copies. You can verify the Commission's receipt of any documents submitted by your committee on the FEC website at [www.fec.gov](http://www.fec.gov).

The failure to timely file a complete report may result in civil money penalties, an audit or legal enforcement action. The civil money penalty calculation for late reports does not include a grace period and begins on the day following the due date for the report. Due to heightened security screening measures, delivery of mail by the US Postal Service may be delayed. The Commission recommends that you submit your report via overnight delivery or courier service.

If you have any questions regarding this matter, please contact Marlene Colucci in the Reports Analysis Division on our toll free number (800)424-9530. The analyst's direct number is (202)694-1394.

424-1394 (202) 694-1394

Sincerely,

*Debbie Chacona*

Deborah Chacona  
Assistant Staff Director  
Reports Analysis Division

250

UNIVERSITY OF CALIFORNIA

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER  
2015 SEP -1 AM 10:18

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

BAYPAC

ADDRESS (number and street) BOX 271082

Check if different than previously reported. (ACC) TAMPA FL 33688

2. FEC IDENTIFICATION NUMBER ▼ C00155713 CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y in the State of  

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

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 HERB SWARZMAN

Signature of Treasurer *Herb Swartzman* Date M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**BAYPAC**

Report Covering the Period: From:

**1 / 1 / 2015**

To:

**6 / 30 / 2015**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2015</b>		<b>4650 -</b>
(b) Cash on Hand at Beginning of Reporting Period.....	<b>4650 -</b>	
(c) Total Receipts (from Line 19).....	<b>9350 -</b>	<b>9350 -</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<b>14000 -</b>	<b>14000 -</b>
7. Total Disbursements (from Line 31).....	<b>1500 -</b>	<b>1500 -</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<b>12500 -</b>	<b>12500 -</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<b>0</b>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<b>0</b>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**BAPAC**

Report Covering the Period: From:

1 / 1 / 2015

To:

6 / 30 / 2015

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees  
(i) Itemized (use Schedule A).....

9,350 -

9,350

(ii) Unitemized .....  
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

9,350 -

9,350 -

(b) Political Party Committees .....  
(c) Other Political Committees (such as PACs).....  
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

9,350 -

9,350 -

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

9,350 -

9,350 -

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

9,350 -

9,350 -

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	1,800-	1,500-
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (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 Lines 28(a), (b), and (c)) .....		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1,500-	1,500-
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	1,500-	1,500-

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	9,350 -	9,350 -
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9,350 -	9,350 -
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....		
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....		

DUPLICATE COPY TO BE RETURNED TO THE OFFICE OF THE CLERK OF THE HOUSE OF REPRESENTATIVES

**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 2

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/>

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)

BAIRPAE

Full Name (Last, First, Middle Initial)

A. Douglas Cohn

Mailing Address

4616 SAN MIGUEL

City  
TAMPA

State  
FLA

Zip Code  
33629

FEC ID number of contributing federal political committee.

C

Name of Employer

TRAME Corp.

Occupation

OWNER TAMPA TRAME

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

850-

Date of Receipt

5 / 20 / 2015

Amount of Each Receipt this Period

850-

Full Name (Last, First, Middle Initial)

B. ROBERT LEWENSEN

Mailing Address

BUNYMAN ROAD

City  
TAMPA

State  
FLA

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

OPTICAL OUTLETS

Occupation

OWNER

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

2000-

Date of Receipt

5 / 28 / 2015

Amount of Each Receipt this Period

2000-

Full Name (Last, First, Middle Initial)

C. SHARON STEIN

Mailing Address

BAYSHURE BLVD 1825

City  
TAMPA

State  
FLA

Zip Code  
33606

FEC ID number of contributing federal political committee.

C

Name of Employer

HOUSEWIFE

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1500-

Date of Receipt

6 / 19 / 2015

Amount of Each Receipt this Period

1500-

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

4350-

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



**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 2

<input 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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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)

BAJPAE

Full Name (Last, First, Middle Initial)

A. SUE SCHNEIDERMAN

Mailing Address

City CLARKSBURG

State MD

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

5000-

Date of Receipt

5 / 22 / 2015

Amount of Each Receipt this Period

5000-

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

5000-

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

9350-

**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 1				
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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)  
**BATPAE**

**A. KATHY CASTOR**  
Full Name (Last, First, Middle Initial)

Mailing Address

Date of Disbursement: **4 / 21 / 2015**

City: **TAMPA, FLORIDA** State: **FL** Zip Code: **33604**

Purpose of Disbursement: **CAMP CONTRIBUTION**

Candidate Name: **CONG KATHY CASTOR**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **FLA** District: **14**

Amount of Each Disbursement this Period: **500.-**

Category/Type

**B. LINDSAY GRAHAM**  
Full Name (Last, First, Middle Initial)

Mailing Address: **FUNDRAISOR IN TAMPA**

Date of Disbursement: **5 / 8 / 2015**

City: **TAMPA, FLORIDA** State: **FL** Zip Code: **33604**

Purpose of Disbursement: **CAMP CONT.**

Candidate Name: **SENATOR LINDSAY GRAHAM**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **FLA** District: **14**

Amount of Each Disbursement this Period: **500.-**

Category/Type

**C. KATHY CASTOR**  
Full Name (Last, First, Middle Initial)

Mailing Address

Date of Disbursement: **6 / 10 / 2015**

City: **TAMPA, FLORIDA** State: **FL** Zip Code: **33604**

Purpose of Disbursement: **CAMP CONTRIBUTION**

Candidate Name: **CONG KATHY CASTOR**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **FLA** District: **14**

Amount of Each Disbursement this Period: **500.-**

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... **1,500.-**

**TOTAL** This Period (last page this line number only)..... **1,500.-**

20150508 10:00 AM

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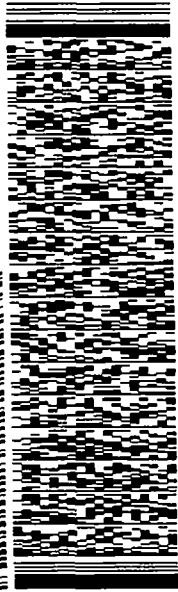
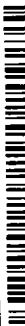
UNITED STATES US

TO DEBORAH CHAEONA  
FEC AUDIT DIVISION  
999 E ST NW

WASHINGTON DC 20463

(202) 694-1400 REF:  
PO#:

DEPT:



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Express



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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.

Hand Delivered Date of Receipt

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USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *fed Ex* Shipping Date  
*8/31/15*  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

  
 PREPARER

*9/1/15*  
 DATE PREPARED

2015-09-01 10:00:00 AM