

**FEC
FORM 3X**

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

**RECEIVED
FEC MAIL ROOM**
2001 JUL 31 A 10:22

Office Use Only

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

**FOWLER, WHITE, GILLEN, BOGGS, VILLAREAL AND
BANKER, PA. SUNCOAST FEDERAL PAC**

ADDRESS (number and street) **POST OFFICE BOX 1438**

Check if different than previously reported. (ACC) **TAMPA FL 33601**

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

000230516

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) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

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

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on _____ in the State of _____

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


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

Election on _____ in the State of _____

5. Covering Period **01 01 2001** through **06 30 2001**

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 **E. JACKSON BOGGS**

Signature of Treasurer  Date **07 27 2001**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name
**FOWLER, WHITE, GILLEN, BOGGS, VILLAREAL AND BANKER, P.A.
 SUNCOAST FEDERAL PAC**

Report Covering the Period: From: **01 01 2001** To: **06 30 2001**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2001		1,000.00
(b) Cash on Hand at Beginning of Reporting Period	1,000.00	
(c) Total Receipts (from Line 19)	500.00	500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1,500.00	1,500.00
7. Total Disbursements (from Line 30)	500.00	500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1,000.00	1,000.00
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	0	

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

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Write or Type Committee Name
FOWLER WHITE, GILLEN, BOGGS, VILLAREAL AND BANKER, P.A.
SUNCOAST FEDERAL PAC

Report Covering the Period: From: **01 01 2001** To: **06 30 2001**

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)	0	
(ii) Unitemized	50,000	
(ii) TOTAL (add Lines 11(a)(i) and (ii))	50,000	50,000
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contributions (add Lines 11(a)(ii), (b), and (c)) (Carry Totals to Line 32, page 4)	50,000	50,000
12. Transfers From Affiliated/Other Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0
18. Transfers from Nonfederal Account for Joint Activity	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	50,000	50,000
20. Total Federal Receipts (subtract Line 18 from Line 19)	50,000	50,000

DETAILED SUMMARY PAGE
of Disbursements

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II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share	0	0	0
(ii) Non-Federal Share	0	0	0
(b) Other Federal Operating Expenditures	0	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0	0	0
22. Transfers to Affiliated/Other Party Committees	0	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	50,000	50,000	50,000
24. Independent Expenditures (use Schedule E)	0	0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)	0	0	0
26. Loan Repayments Made	0	0	0
27. Loans Made	0	0	0
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0	0	0
(b) Political Party Committees	0	0	0
(c) Other Political Committees (such as PACs)	0	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0	0	0
29. Other Disbursements	0	0	0
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	50,000	50,000	50,000
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	50,000	50,000	50,000
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from Line 11(d), page 3)	50,000	50,000	50,000
33. Total Contribution Refunds (from Line 28(d))	0	0	0
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	50,000	50,000	50,000
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0	0	0
36. Offsets to Operating Expenditures (from Line 15, page 3)	0	0	0
37. Net Operating Expenditures (subtract Line 36 from Line 35)	0	0	0

**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		OF	
	<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"/> 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)
**FOWLER, WHITE, GILLEN, BOGGS, VILLOREAL AND BANKER, P.A.
SUNCOAST FEDERAL PAC**

A. THURMAN, KAREN L.

Full Name (Last, First, Middle Initial)

Mailing Address: **POST OFFICE BOX 5058**

City: **INVERNESS** State: **FL** Zip Code: **34450-5058**

Purpose of Disbursement: **CAMPAIGN CONTRIBUTION** Category/Type: **011**

Candidate Name: **KAREN L THURMAN**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **FL** District: **5**

Date of Disbursement: **05 04 2001**

Amount of Each Disbursement this Period: **50000**

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) **50000**

TOTAL This Period (last page this line number only) **50000**

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 7-27-01
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JEI</i> PREPARER	7-31-01 DATE PREPARED