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FEC
FORM 3X

REPORT OF RECEIPTS
AND DISBURSEMENTS
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

BA7PAC

ADDRESS (number and street)

BOX 271082

Check if different than previously reported. (ACC)

TAMPA

FL

33688

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00155713

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 [] / [] / [] 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

4 / 1 / 2010 through 6 / 30 / 2010

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 Swarzman

Date

7 / 15 / 2010

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

Office Use Only

FEC FORM 3X
Rev. 12/2004

10030404260

**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:

4 / 1 / 2010

To:

6 / 30 / 2010

**COLUMN A
This Period**

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

6. (a) Cash on Hand January 1, 2010	4670 -	4670 -
(b) Cash on Hand at Beginning of Reporting Period	4670 -	
(c) Total Receipts (from Line 19)	14400 -	14400 -
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	19070	19070
7. Total Disbursements (from Line 31)	6500 -	6500 -
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	12570	12570 -
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

10030404261

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

BAYPAC

Report Covering the Period: From: MM / DD / YYYY 4 / 1 / 2010 To: MM / DD / YYYY 6 / 30 / 2010

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).....

11,900 -

11,900 -

(ii) Unitemized.....

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

11,900 -

11,900 -

(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).....▶

11,900 -

11,900 -

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.....

2,500 -

2,500 -

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)).....▶

14,400 -

14,400 -

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

10030404262

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.....	6,500-	6,500-
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))..	6,500-	6,500-
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6,500-	6,500-

10030404263

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)	11,900 -	11,900 -
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11,900 -	11,900 -
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)		

10030404264

**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"/> 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)
GOERGE KARPAY

Mailing Address
MADACA LANE

City **Tampa** State **FLA** Zip Code **33618**

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

Name of Employer
Self Occupation **INVESTOR/BUILDER**

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **5000-**

Date of Receipt
4 / 2 / 2010

Amount of Each Receipt this Period
5000-

B. Full Name (Last, First, Middle Initial)
DAVID WAKOSMAN, GREGORY

Mailing Address
7015 PELICAN ISLAND DR

City **TAMPA** State **FLA** Zip Code **33634**

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

Name of Employer
RETIRED Occupation

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **400-**

Date of Receipt
4 / 2 / 2010

Amount of Each Receipt this Period
400-

C. Full Name (Last, First, Middle Initial)
MARK LINSKY

Mailing Address
2411 S. DUNDUB

City **TAMPA, FLA** State Zip Code **33629**

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

Name of Employer
Self Occupation **ATTORNEY**

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **500-**

Date of Receipt
4 / 28 / 2010

Amount of Each Receipt this Period
500-

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

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

5900-

10030404265

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

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

FOR LINE NUMBER: 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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BAYPAC

A. Full Name (Last, First, Middle Initial)
JACK RUTH

Mailing Address
1209 S. SUFFOLK DR

City **Tampa** State **FLA** Zip Code **33629**

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

Name of Employer **Ruth Bros Roofing** Occupation **OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000 -

Date of Receipt
9 / 30 / 2010

Amount of Each Receipt this Period
5000 -

B. Full Name (Last, First, Middle Initial)
SHARON STEIN AND DR BERNARD STEIN

Mailing Address
1825 BAYSHORE BLVD

City **Tampa** State **FLA** Zip Code **33606**

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

Name of Employer Occupation **DOCTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000 -

Date of Receipt
5 / 14 / 2010

Amount of Each Receipt this Period
1000 -

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

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).....▶ **6000 -**

TOTAL This Period (last page this line number only).....▶ **11900 -**

10030404266

**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

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

BAYPAC

Full Name (Last, First, Middle Initial)

A. **TEO DEVTCH**

Date of Disbursement

4 / 2 / 2010

Mailing Address

15340 Jog Rd

City **Delray Beach**

State **FLA**

Zip Code **33446**

Purpose of Disbursement

CAMPAIGN CONT.

Candidate Name

TEO DEVTCH

Category/
Type

Amount of Each Disbursement this Period

1,000 -

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **FLA** District:

Full Name (Last, First, Middle Initial)

B. **Atty Genl. Bill McCollum**

Date of Disbursement

4 / 6 / 2010

Mailing Address

GAVE IT TO HIM AT FUNDRAISOR IN TAMPA

City **TALLAHASSEE, FLA**

State

Zip Code

Purpose of Disbursement

CAMP CONTRIB.

Candidate Name

Bill McCollum

Category/
Type

Amount of Each Disbursement this Period

500 -

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **Gov.** District:

Full Name (Last, First, Middle Initial)

C. **Cong KATHY CASTOR**

Date of Disbursement

4 / 12 / 2010

Mailing Address

GAVE IT TO HER AT FUNDRAISOR IN TAMPA

City State Zip Code

Purpose of Disbursement

CAMP. CONT.

Candidate Name

KATHY CASTOR

Category/
Type

Amount of Each Disbursement this Period

2,500 -

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **FLA** District: **11R**

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

4,000 -

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

10030404267

**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 2 OF

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

BAYPAC

Full Name (Last, First, Middle Initial)

A. **FRIENDS OF Rich Nugent**

Mailing Address

City **HERNANDO County** State **FLA** Zip Code

Purpose of Disbursement

Comp. CONTRIBUTION

Candidate Name

Rich Nugent

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **FLA**

District: **5th**

Date of Disbursement

3 / 17 / 2010

Amount of Each Disbursement this Period

1500-

Full Name (Last, First, Middle Initial)

B. **FRIENDS OF Rich Nugent**

Mailing Address

HANDD IT TO him AT MEETING IN TAMPA

City State Zip Code

Purpose of Disbursement

Comp CONTRIBUTION

Candidate Name

Rich Nugent

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **FLA**

District: **5th**

Date of Disbursement

6 / 9 / 2010

Amount of Each Disbursement this Period

500-

Full Name (Last, First, Middle Initial)

C. **DONNIS RUSS For Congress**

Mailing Address

HANDD IT TO him AT MEETING IN TAMPA

City State Zip Code

Purpose of Disbursement

Comp. CONTRIBUTION

Candidate Name

DONNIS RUSS

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **FLA**

District: **12**

Date of Disbursement

6 / 9 / 2010

Amount of Each Disbursement this Period

500-

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

2500-

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

6500-

10030404268

RECEIVED
FEC MAIL CENTER
2010 AUG 11 AM 9:11



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

August 4, 2010

RQ-7

HERB SWARZMAN, TREASURER
BAYPAC
BOX 271082
TAMPA, FL 33688

IDENTIFICATION NUMBER: C00155713

REFERENCE: JULY QUARTERLY REPORT 4/1/2010 - 6/30/2010

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 EXPENDITURES AS REQUIRED BY THE FEDERAL ELECTION CAMPAIGN ACT, AS AMENDED.

IT IS IMPORTANT THAT YOU FILE THIS REPORT IMMEDIATELY WITH THE FEDERAL ELECTION COMMISSION, 999 E STREET, N.W., WASHINGTON, D.C., 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 THE 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.

THE FAILURE TO TIMELY FILE THIS 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 CHRISTOPHER RITCHIE AT OUR TOLL FREE NUMBER (800)424-9530. OUR DIRECT LOCAL NUMBER IS (202)694-1130.

SINCERELY,

Debbie Chacona

DEBBIE CHACONA
ASSISTANT STAFF DIRECTOR
REPORTS ANALYSIS DIVISION (RAD)

10030404269

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

USPS First Class Mail Postmarked

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USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *fed Ex* Shipping Date
8/10/10
 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

EW *8/10/10*
 PREPARER DATE PREPARED

10030404270