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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) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Citizens for Cancer Awareness Federal PAC

ADDRESS (number and street) 610 S. Boulevard
 Check if different than previously reported. (ACC)
Tampa FL 33606

2. FEC IDENTIFICATION NUMBER C00455907
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 Quarterly 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 (12G)
Election on 11 04 2008 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 10 01 2008 through 10 15 2008

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 Nancy H. Watkins

Signature of Trear *Nancy H. Watkins* Date 10 20 2008

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)

28039901268

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Citizens for Cancer Awareness Federal PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	0	8									
0.00												
0.00												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td>2250.00</td></tr></table>	2250.00	<table border="1" style="width: 100%;"><tr><td>2250.00</td></tr></table>	2250.00								
2250.00												
2250.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td>2250.00</td></tr></table>	2250.00	<table border="1" style="width: 100%;"><tr><td>2250.00</td></tr></table>	2250.00								
2250.00												
2250.00												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td>2000.00</td></tr></table>	2000.00	<table border="1" style="width: 100%;"><tr><td>2000.00</td></tr></table>	2000.00								
2000.00												
2000.00												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td>250.00</td></tr></table>	250.00	<table border="1" style="width: 100%;"><tr><td>250.00</td></tr></table>	250.00								
250.00												
250.00												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												

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

28039901269

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Citizens for Cancer Awareness Federal PAC

Report Covering the Period:

From:

MM
10

DD
01

Y Y W Y
2008

To:

MM
10

DD
15

Y Y Y Y
2008

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)

2250.00

2250.00

(ii) Unitemized

0.00

0.00

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

2250.00

2250.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) Total Contributions (add Lines
11(a)(iii), (b) and (c)) (Carry
Totals to Line 33, page 5)

2250.00

2250.00

12. Transfers From Affiliated/Other
Party Committees

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

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

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

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

0.00

0.00

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

2250.00

2250.00

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

2250.00

2250.00

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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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.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	2000.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2000.00	2000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2000.00	2000.00

DETAILED SUMMARY PAGE

of Disbursements

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)	2250.00	2250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2250.00	2250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 8

(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			

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)

Citizens for Cancer Awareness Federal PAC

A.

Full Name (Last, First, Middle Initial)

William S. Dalton

Mailing Address 505 S. Riverhills Drive

City State Zip Code
Temple Terrace FL 33617

FEC ID number of contributing federal political committee.

C []

Name of Employer
H. Lee Moffitt Cancer Center

Occupation
health care admin.

Receipt For:
 Primary General
 Other (specify)▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 09 / 2008

Transaction ID: C-1-000A01

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

John A. Kolosky

Mailing Address 17813 Arbor Greene Drive

City State Zip Code
Tampa FL 33647

FEC ID number of contributing federal political committee.

C []

Name of Employer
H. Lee Moffitt Cancer Center

Occupation
health care admin.

Receipt For:
 Primary General
 Other (specify)▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 13 / 2008

Transaction ID: C-2-000902

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Carol J. McKee

Mailing Address 30249 Lettingwell Circle

City State Zip Code
Wesley Chapel FL 33543

FEC ID number of contributing federal political committee.

C []

Name of Employer
H. Lee Moffitt Cancer Center

Occupation
govt. relations

Receipt For:
 Primary General
 Other (specify)▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 09 / 2008

Transaction ID: C-3-000602

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

28039901273

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

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

FOR LINE NUMBER: PAGE 7 / 8

(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)
Citizens for Cancer Awareness Federal PAC

A.

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

Mailing Address 5224 Fairway One Drive

City State Zip Code
Valrico FL 33596

FEC ID number of contributing
federal political committee.

C

Name of Employer
H. Lee Moffitt Cancer Cen-
ter

Occupation
health care admin.

Receipt For:
 Primary General
 Other (specify)▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

MM / DD / YYYY
10 / 09 / 2008

Transaction ID: C-4-000702

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
W. James Wilson

Mailing Address 445 12th Street, S., #708

City State Zip Code
Tampa FL 33602

FEC ID number of contributing
federal political committee.

C

Name of Employer
H. Lee Moffitt Cancer Cen-
ter

Occupation
govt. relations

Receipt For:
 Primary General
 Other (specify)▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

MM / DD / YYYY
10 / 10 / 2008

Transaction ID: C-5-000802

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

2250.00

28039901274

**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 8 / 8
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b			

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NAME OF COMMITTEE (In Full)
Citizens for Cancer Awareness Federal PAC

A.

Full Name (Last, First, Middle Initial) Congressman Bill Young Campaign Committee		Transaction ID: D1-000D01 Date of Disbursement																					
Mailing Address P. O. Box 47025		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	4		2	0	0	8														
City St. Petersburg	State FL	Zip Code 33743	Amount of Each Disbursement this Period																				
Purpose of Disbursement contribution-FL10		<input type="checkbox"/>	2000.00																				
Candidate Name C.W. Bill Young		Category/ Type																					
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: FL	District: 10																						

28039901275

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	2000.00

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 type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) <i>10/20/08</i>
<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

Jm P
 PREPARER

10/27/08
 DATE PREPARED

28039901276