

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL
OPERATIONS CENTER
2006 JUL 17 A 8:32
Office Use Only

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

BAY PAC

Box 271082

ADDRESS (number and street)

Check if different than previously reported. (ACC)

TAMPA FL 33681

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) 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:

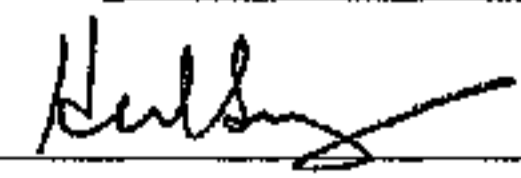
General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period 4 / 1 / 2006 through 6 / 30 / 2006

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  Date 7 / 10 / 2006

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

25039130564

**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** **2006** To: **6** **30** **2006**

**COLUMN A
This Period**

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

6. (a) Cash on Hand January 1,	8,250	8,250 -
(b) Cash on Hand at Beginning of Reporting Period.....	3,750 -	
(c) Total Receipts (from Line 19)	5,500 -	5,500 -
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	9,250 -	13,750
7. Total Disbursements (from Line 31)	7,000 -	11,500 -
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2,250 -	2,250
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	

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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

BAYPAC

Report Covering the Period: From:

4 / 1 / 2006

To:

6 / 30 / 2006

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).....

5500-

13750-

(ii) Unitemized.....

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

5500-

13750-

(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).....▶

5500-

13750-

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))..

0

0

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

5500-

13750-

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

5500-

13750-

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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)	5500-	13750-
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5500-	13750-
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)	0	0

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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:
(check only one)

PAGE 1 OF 2

11a 11b 11c 12
 13 14 15 16 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

Full Name (Last, First, Middle Initial)

A. **John Ellis**

Mailing Address

101 E. Kennedy Blvd Suite 200

City

Tampa

State

FLA

Zip Code

Date of Receipt

5 / 18 / 2006

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

1,000 -

Name of Employer

Occupation

ATTORNEY

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,000 -

Full Name (Last, First, Middle Initial)

B. **Hopie Barutti**

Mailing Address

2805 Baypointe Circle

City

Tampa

State

FLA

Zip Code

33611

Date of Receipt

5 / 15 / 2006

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

500 -

Name of Employer

Occupation

HOUSEWIFE

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500 -

Full Name (Last, First, Middle Initial)

C. **Jack Roth**

Mailing Address

1209 S. Surrelic Dr.

City

Tampa

State

FLA

Zip Code

33629

Date of Receipt

5 / 22 / 2006

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

2,000 -

Name of Employer

Occupation

ROOFING BUSINESS

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

2,000 -

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

3,500 -

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

3,500 -

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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:
(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"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

BAYPAC

Full Name (Last, First, Middle Initial)

A. **CALY CATANIA**

Mailing Address

13336 Conoral Ave N.

City **Tampa** State **FLORIDA** Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

CATANIA & BRENDA Sole

Occupation

Attorney

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,000-

Date of Receipt

5 / 26 / 2006

Amount of Each Receipt this Period

1,000-

Full Name (Last, First, Middle Initial)

B. **Marshall Chretien**

Mailing Address

17949 Cachet Isla Dr.

City **Tampa** State **FLA** Zip Code **33647**

FEC ID number of contributing federal political committee.

C

Name of Employer

Meat Wholesaler

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,000-

Date of Receipt

Amount of Each Receipt this Period

1,000-

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).....▶

2,000-

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

5,500-

26039130570

**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

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. **RE-ELECT JOE LIUBBERMAN**

Mailing Address

WASHINGTON, D.C.

City State Zip Code

CAMPAIGN CONTRIBUTION
Purpose of Disbursement

Candidate Name

SENATOR JOE LIUBBERMAN

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **CONN.** District:

Date of Disbursement

4 / 6 / 2006

Amount of Each Disbursement this Period

500-

Full Name (Last, First, Middle Initial)

B. **BILIRAKIS FOR CONGRESS**

Mailing Address

TARPON SPRINGS, FLA

City State Zip Code

CAMP. CONTRIBUTION
Purpose of Disbursement

Candidate Name

GUS BILIRAKIS

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **FLA** District: **9th**

Date of Disbursement

5 / 18 / 2006

Amount of Each Disbursement this Period

1000-

Full Name (Last, First, Middle Initial)

C. **DIJAZ-BALMAZ FOR CONGRESS**

Mailing Address

MIAMI, FLORIDA

City State Zip Code

CAMP. CONTRIBUTION
Purpose of Disbursement

Candidate Name

MARIO DIJAZ-BALMAZ

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **FLA** District:

Date of Disbursement

5 / 16 / 2006

Amount of Each Disbursement this Period

1000-

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

2500-

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

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**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 2
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 28	<input type="checkbox"/> 26 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
BAYPAC

A. CASTOR FOR CONGRESS

Full Name (Last, First, Middle Initial)
CASTOR FOR CONGRESS

Mailing Address
TAMPA, FLORIDA

City State Zip Code

Purpose of Disbursement
CAMP CONTRIBUTION

Candidate Name
KATHY CASTOR

Office Sought: House Senate President
State: **FLA** District: **11th**

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
5 / 24 / 2006

Amount of Each Disbursement this Period
3500-

B. RE-ELECT JOE KYL

Full Name (Last, First, Middle Initial)
RE-ELECT JOE KYL

Mailing Address
WASHINGTON, D.C.

City State Zip Code

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name
SENATOR JOHN KYL

Office Sought: House Senate President
State: **ARIZ** District: _____

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
6 / 7 / 2006

Amount of Each Disbursement this Period
~~1000-~~
1000-

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶ **4500-**

TOTAL This Period (last page this line number only).....▶ **7000-**

26039130372

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
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<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
(3/2005)

7/17/06

DATE PREPARED

200309130573