

**FEC  
FORM 3X**

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

RECEIVED  
FEC MAIL CENTER  
2008 JUL -8 AM 9:32  
Office Use Only

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

BATPAC

ADDRESS (number and street) Box 271082

Check if different than previously reported. (ACC) JAM, PA 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)     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 M M M / D D D / 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 in the State of   

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

4 / 1 / 2008 through 6 / 30 / 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 HERBERT SWARZMAN

Signature of Treasurer *Herbert Swarzman*

Date M M / D D / Y Y Y Y

6 / 30 / 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.

28039762571

**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 ' 2008

To:

6 ' 30 ' 2008

**COLUMN A  
This Period**

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

6. (a) Cash on Hand January 1,	1660	1660 -
(b) Cash on Hand at Beginning of Reporting Period.....	2240 -	
(c) Total Receipts (from Line 19) .....	5250 -	11830 -
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	7490 -	13490
7. Total Disbursements (from Line 31) .....	1000 -	7000 -
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	6490 -	6490 -
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	/	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	/	



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

28039762572

**DETAILED SUMMARY PAGE  
of Receipts**

Write or Type Committee Name

**BAYPAC**

Report Covering the Period: From:

**4 / 1 / 2008**

To:

**6 / 30 / 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).....

**5,250 -**

**11,830 -**

(ii) Unitemized.....

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

**5,250 -**

**11,830 -**

(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).....▶

**5,250 -**

**11,830 -**

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)).....▶

**5,250 -**

**11,830 -**

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

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**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.....	1,000 -	7,000 -
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))..	1,000 -	7,000 -
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1,000 -	7,000 -

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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) .....	5,250 -	11,830 -
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1,000 -	7,000 -
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) .....		

To: FEE

No OPERATING EXPENSES - I DO EVERYTHING MYSELF.

H. Swartzman

28039762575

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

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. DR. ROBERT ENTOL**  
Full Name (Last, First, Middle Initial)

Mailing Address

City **CLARKSWOOD, FLORIDA** State Zip Code

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

Name of Employer **SUP** Occupation **MEDICAL DOCTOR**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1,000-**

Date of Receipt **4/21/2008**

Amount of Each Receipt this Period **1,000-**

**B. DR. RALPH MARCADIS**  
Full Name (Last, First, Middle Initial)

Mailing Address

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

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

Name of Employer **SUP** Occupation **ATTORNEY**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1,250-**

Date of Receipt **4/22/2008**

Amount of Each Receipt this Period **1,250-**

**C. MR JACK ROSS**  
Full Name (Last, First, Middle Initial)

Mailing Address

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

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

Name of Employer **SUP** Occupation **REAL ESTATE INVESTOR**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1,000-**

Date of Receipt **4/22/2008**

Amount of Each Receipt this Period **1,000-**

**SUBTOTAL** of Receipts This Page (optional)..... **3,250-**

**TOTAL** This Period (last page this line number only)..... **3,250-**

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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 2 OF 2  
(check only one)

<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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NAME OF COMMITTEE (In Full)  
**BAYPAC**

A. Full Name (Last, First, Middle Initial)  
**DR BERNHARD STEIN**

Mailing Address

City **Tampa** State **FL** Zip Code

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

Name of Employer **Memorial Hospital** Occupation **RADIOLOGIST**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2000 -**

Date of Receipt  
**4 / 23 / 2008**

Amount of Each Receipt this Period  
**2000 -**

B. 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

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) ..... ▶ **2000 -**

TOTAL This Period (last page this line number only) ..... ▶ **5250 -**

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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 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

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NAME OF COMMITTEE (In Full)  
**BAYPAC**

**A.** Full Name (Last, First, Middle Initial)  
**McCain For President**

Date of Disbursement  
MM / DD / YYYY  
**4 / 28 / 2008**

Mailing Address  
**DOLIBED IN TAMPA FLORIDA AT FUNDRAISER**

City State Zip Code  
**CAMPAIGN CONTRIBUTION**

Purpose of Disbursement  
**Sen John McCain**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

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

Date of Disbursement  
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

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

Date of Disbursement  
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....▶ **1000-**

**TOTAL** This Period (last page this line number only).....▶ **1000-**

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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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked <i>7/8/08</i>
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<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

*JmW*  
 PREPARER

*7/8/08*  
 DATE PREPARED

28039762579