

**FEC  
FORM 3X**

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

RECEIVED  
2012 FEB 29 AM 8:50

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12 FEDERAL MAIL CENTER

**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)

(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)

(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)

(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

**July 1, 2011**

through

**Dec 31, 2011**

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

**12 31 2011**

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									
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**FEC FORM 3X**  
Rev. 12/2004

12030750693

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**BA1PAC**

Report Covering the Period:

From:

**7 1 2011**

To:

**12 31 2011**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2720</b>		<b>2720 -</b>
(b) Cash on Hand at Beginning of Reporting Period.....	<b>10,770</b>	
(c) Total Receipts (from Line 19).....	<b>9200</b>	<b>16250 -</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<b>18,970</b>	<b>18,970 -</b>
7. Total Disbursements (from Line 31).....	<b>11,500</b>	<b>11,500 -</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<b>7,470 -</b>	<b>7,470 -</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<b>—</b>	<b>—</b>
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<b>—</b>	<b>—</b>

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

12030750694

**DETAILED SUMMARY PAGE  
of Receipts**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**BAYPAC**

Report Covering the Period: From: **7 / 1 / 2011**

To: **12 / 31 / 2011**

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

**8200 -**

**16250 -**

**8200 -**

**16250 -**

- (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).....▶

**8200 -**

**16250 -**

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)).....▶

**8200 -**

**16250 -**

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

**8200 -**

**16250 -**

12030750695

DETAILED SUMMARY PAGE  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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  
Committee.....

23. Contributions to  
Federal Candidates/Committees  
and Other Political Committees.....

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)) ..

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

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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) .....	8200-	16250-
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8200-	16250-
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

12030750697

**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. Phyllis Coulo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **13009 EC Drive**  
 City: **Tampa** State: **FLA** Zip Code: **33625**  
 Date of Receipt: **8 / 16 / 2011**  
 Amount of Each Receipt this Period: **1,000 -**  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer: \_\_\_\_\_ Occupation: **HOUSEWIFE**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: **1,000 -**

**B. JACK RUSSELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: \_\_\_\_\_  
 City: **Tampa** State: **FLA** Zip Code: \_\_\_\_\_  
 Date of Receipt: **8 / 20 / 2011**  
 Amount of Each Receipt this Period: **1,000 -**  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer: \_\_\_\_\_ Occupation: **LAWYER**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: **1,000 -**

**C. RALPH MARCADIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **4915 ST CROIX DR.**  
 City: **Tampa** State: **FLA** Zip Code: **33629**  
 Date of Receipt: **8 / 16 / 2011**  
 Amount of Each Receipt this Period: **1,200 -**  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer: \_\_\_\_\_ Occupation: **LAWYER**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: **1,200 -**

SUBTOTAL of Receipts This Page (optional)..... **3,200 -**  
 TOTAL This Period (last page this line number only).....

12030750698

**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 3 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	

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

A. Full Name (Last, First, Middle Initial) <b>SHARON STEIN</b>		Date of Receipt <b>8 / 16 / 2011</b>
Mailing Address		Amount of Each Receipt this Period <b>1,500 -</b>
City <b>Tampa</b>	State <b>FLA</b> Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date <b>1,500 -</b>
Name of Employer <b>SELF</b>	Occupation <b>OFFICE MANAGER</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▾		

B. Full Name (Last, First, Middle Initial) <b>JUDATHON ELLIS</b>		Date of Receipt <b>9 / 12 / 2011</b>
Mailing Address		Amount of Each Receipt this Period <b>1,000 -</b>
City <b>Tampa</b>	State <b>FLA</b> Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date <b>1,000 -</b>
Name of Employer <b>SHUMAKA, LOUP</b>	Occupation <b>ATTORNEY</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▾		

C. Full Name (Last, First, Middle Initial) <b>BLISSON LOJACWITZ</b>		Date of Receipt <b>12 / 14 / 2011</b>
Mailing Address		Amount of Each Receipt this Period <b>2,500 -</b>
City <b>Tampa</b>	State <b>FLA</b> Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date <b>2,500 -</b>
Name of Employer <b>SELF</b>	Occupation <b>COMMUNITY WORKER</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▾		

SUBTOTAL of Receipts This Page (optional).....▶	<b>5,000 -</b>
TOTAL This Period (last page this line number only).....▶	<b>9,200 -</b>

12030750699

**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 3

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

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NAME OF COMMITTEE (In Full)

**BAYPAE**

Full Name (Last, First, Middle Initial)

A. **Cong Pus Bilirakis Re-Election Camp**

Date of Disbursement

9 / 2 / 2011

Mailing Address

**BY HAND**

City

**TARPON SPRINGS**

State

**FLA**

Zip Code

Purpose of Disbursement

**Cong Pus Bilirakis**

Candidate Name

**CAMPAIGN CONTRIBUTION**

Category/  
Type

Amount of Each Disbursement this Period

**2,500.00**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **FLA**

District: **9th**

Full Name (Last, First, Middle Initial)

B. **Cong Dennis Ross Re-Election Camp.**

Date of Disbursement

9 / 6 / 2011

Mailing Address

**BY HAND AT FUND-RAISER**

City

**TAMPA FLA**

State

Zip Code

Purpose of Disbursement

**Camp. CONTRIBUTION**

Candidate Name

**Cong. Dennis Ross**

Category/  
Type

Amount of Each Disbursement this Period

**500.00**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **FLA**

District: **12th**

Full Name (Last, First, Middle Initial)

C. **Cong Rich Nugent Re-Election Camp.**

Date of Disbursement

9 / 6 / 2011

Mailing Address

**By Hand at fundraiser**

City

**TAMPA**

State

**FLA**

Zip Code

Purpose of Disbursement

**Camp. CONTRIBUTION**

Candidate Name

**Cong Rich Nugent**

Category/  
Type

Amount of Each Disbursement this Period

**1,000.00**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **FLA**

District: **5th**

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

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

**4,000.00**

12030750700



**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 3
	<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"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. CONG ERIC CANTOR</b>		Date of Disbursement 9 / 8 / 2011
Mailing Address <b>By HAND AT FUNDRAISER</b>		
City <b>Tampa</b>	State <b>FLA</b>	Zip Code
Purpose of Disbursement <b>Camp Contribution</b>	Category/Type	Amount of Each Disbursement this Period <b>1000-</b>
Candidate Name <b>CONG ERIC CANTOR</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <b>VA.</b>	District:	

Full Name (Last, First, Middle Initial) <b>B. SPEAKER HOWT GINGRICH</b>		Date of Disbursement 9 / 12 / 2011
Mailing Address <b>By HAND AFTER TAMPA DEBATE</b>		
City <b>Tampa, FLA</b>	State	Zip Code
Purpose of Disbursement <b>CAMPAIGN CONTRIBUTION</b>	Category/Type	Amount of Each Disbursement this Period <b>5000-</b>
Candidate Name <b>HOWT GINGRICH</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. SEN MITCH MCCONNELL</b>		Date of Disbursement 9 / 24 / 2011
Mailing Address <b>By HAND AT TAMPA FUNDRAISER</b>		
City <b>Tampa, FLA</b>	State	Zip Code
Purpose of Disbursement <b>Camp Contribution</b>	Category/Type	Amount of Each Disbursement this Period <b>1000-</b>
Candidate Name <b>MITCH MCCONNELL</b>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <b>KY.</b>	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	<b>7000-</b>
TOTAL This Period (last page this line number only).....▶	<b>5</b>

12030750701

**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 3 OF 3	
	<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"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b		

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

A. Full Name (Last, First, Middle Initial) <b>Cong Ted Deutsch</b>		Date of Disbursement <b>10 17 2011</b>
Mailing Address <b>AT FUNDRAISER IN TAMPA, FLA</b>		Amount of Each Disbursement this Period <b>500 -</b>
City <b>Tampa</b>	State Zip Code <b>FLA</b>	
Purpose of Disbursement <b>CAMP CONTRIBUTION</b>	Candidate Name <b>Cong Ted Deutsch</b>	Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FLA</b> District: <b>14th</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	<b>500 -</b>
TOTAL This Period (last page this line number only).....▶	<b>11,500 -</b>

12030750702

**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  
2/21/12

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark


Overnight Delivery Service (Specify): Shipping Date  
 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

  
 PREPARER  
 (3/2005)

2/29/12  
 DATE PREPARED

12030750703