

2014 MAR 12 AM 11:05

from the desk of...

HERB SWARZMAN  
4214 FAIRWAY RUN  
TAMPA, FLA 33618  
813-962-1930 / FAX 813-962-4831

3-7-14

To: DEBORAH Chaeonn  
From: Herb Swarzman

I am sorry for the delay. I do everything myself - including all records. As soon as I got your letter, I prepared report and sent it to you Federal express.

While reviewing my files, I noticed that the disbursement page for the report filed for Jan 1, 2013 to 6:30 - 2013 was missing. Perhaps, I sent it to you and failed to make a copy for myself. To make sure I am in compliance, I am sending you a new disbursement page with the appropriate information.

Please forgive an old man his forgetfulness. I will be 77 in May.

Thank you for your consideration.

Herb Swarzman

RECEIVED

2014 MAR 11 PM 3:48

FEC MAIL CENTER

14031193870

14031193871

We attempted to send this notice via e-mail, however the email address provided on your committee's Statement of Organization is not valid. Please amend your committee's Statement of Organization (FEC Form 1) to provide a current and correct e-mail address.

PLEASE BE ADVISED THAT WE NO LONGER USE E-MAIL, BUT WE HAVE  
OUR OWN FAX MACHINE - 813-962-4831

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FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-7

February 26, 2014

HERB SWARZMAN, TREASURER  
BAYPAC  
BOX 271082  
TAMPA, FL 33688

IDENTIFICATION NUMBER: C00155713

REFERENCE: YEAR-END REPORT (07/01/2013 - 12/31/2013)

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 disbursements or failed to file a report covering the entire reporting period 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, DC 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 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](http://www.fec.gov).

The failure to timely file a complete 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 in the Reports Analysis Division on our toll free number (800)424-9530. Our local number is (202)694-1130.

14031193872

BAYPAC  
Page 2 of 2

Sincerely,

*Debbie Chacona*

Deborah Chacona  
Assistant Staff Director  
Reports Analysis Division

250

14031193873

**FEC  
FORM 3X**

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

RECEIVED

2014 MAR 11 PM 3:48  
Office Use Only

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

BAYPAC

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)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)

Election on MM / DD / YYYY in the State of   


- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on MM / DD / YYYY in the State of   

5. Covering Period 7 / 1 / 2013 through 12 / 31 / 2013

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 3 / 7 / 2014

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

1403119387A

**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:

**7** / **1** / **2013**

To:

**12** / **31** / **2013**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2013</b>		6650-
(b) Cash on Hand at Beginning of Reporting Period.....	6650-	
(c) Total Receipts (from Line 19).....	6800-	11800-
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	13450	18450-
7. Total Disbursements (from Line 31).....	2700-	7700-
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	10750	10750
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

14031193875

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**BA-PAE**

Report Covering the Period:

From:

7 / 1 / 2013

To:

12 / 30 / 2013

**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).....

6,800 -

11,800 -

(ii) Unitemized.....

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

(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).....▶

6,800 -

11,800 -

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)).....▶

6,800 -

11,800 -

20. Total Federal Receipts

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

6,800 -

11,800 -

14031193876

**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 .....	0	0
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0	0
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	2,700.-	7,700.-
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 .....	0	0
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)) ..	2,700.-	7,700.-
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	2,700.-	7,700.-

14031193877



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

2700 -
0
0

7700 -
0
0

14031193878

**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. TOBIH, LEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **639 RIVIERA DR.**  
 City: **Tampa** State: **FLA** Zip Code: **33606**  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer: **All. Am. Contractors** Occupation: **Owner Packaging Comp.**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: **1,250-**

Date of Receipt: **11 / 5 / 13**  
 Amount of Each Receipt this Period: **1,250-**

**B. DEBORAH ROTH**  
 Full Name (Last, First, Middle Initial)  
 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: **Self** Occupation: **Psychologist**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: **1,800-**

Date of Receipt: **11 / 8 / 2013**  
 Amount of Each Receipt this Period: **1,800-**

**C. Bill Young Camp**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **RETAINED camp check**  
 City: **ST. PETERS BAY** State: **FLA** 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: **1,000-**

Date of Receipt: **12 / 3 / 2013**  
 Amount of Each Receipt this Period: **1,000-**

**SUBTOTAL** of Receipts This Page (optional).....▶ **4,050-**  
**TOTAL** This Period (last page this line number only).....▶

14031193879

**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  
 11a  11b  11c  12  17  
 13  14  15  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. Full Name (Last, First, Middle Initial)  
**BLOSSOM LEIBOWITZ**

Mailing Address  
**AVILA**

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

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

Name of Employer **SELF** Occupation **HOUSEWIFE - VOLUNTEER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2500 -**

Date of Receipt  
**12 / 10 / 2013**

Amount of Each Receipt this Period  
**2500 -**

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

Mailing Address  
**959 HARBOUR Bay Dr**

City **Tampa** State **FLA** Zip Code **33602**

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

Name of Employer **SELF** Occupation **DMTIST**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250 -**

Date of Receipt  
**12 / 13 / 2013**

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

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).....▶ **2750 -**

TOTAL This Period (last page this line number only).....▶ **6800 -**

14031193880

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

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)  
**BAIPAC**

Full Name (Last, First, Middle Initial) <b>A. CASTOR, Cong Kathy CASTOR</b>		Date of Disbursement <b>11 / 20 / 2013</b>
Mailing Address <b>Tampa FUNDRAISER</b>		Amount of Each Disbursement this Period <b>200.-</b>
City <b>Tampa</b>	State <b>FLA</b>	
Purpose of Disbursement <b>CAMPAIGN CONTRIBUTION</b>		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <b>FLA</b>	District: <b>14</b>	

Full Name (Last, First, Middle Initial) <b>B. CASTOR, Cong Kathy CASTOR</b>		Date of Disbursement <b>12 / 8 / 2013</b>
Mailing Address <b>Tampa FUNDRAISER</b>		Amount of Each Disbursement this Period <b>2500.-</b>
City <b>Tampa</b>	State <b>FLA</b>	
Purpose of Disbursement <b>CAMPAIGN CONTRIBUTION</b>		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <b>FLA</b>	District: <b>14</b>	

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

SUBTOTAL of Disbursements This Page (optional).....▶	<b>2700.-</b>
TOTAL This Period (last page this line number only).....▶	

14031193881

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

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)

BAYPAE

Full Name (Last, First, Middle Initial)

A. Cong Gus Bilirakis

Date of Disbursement

MM / DD / YYYY

Mailing Address

Tampa FUNDRAISOR

City

Tampa, Fla

State

Zip Code

Purpose of Disbursement

Campaign Contribution

Candidate Name

Category/Type

Amount of Each Disbursement this Period

2,500-

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: Fla

District: 12

Full Name (Last, First, Middle Initial)

B. Cong Rich Hugart

Date of Disbursement

MM / DD / YYYY

Mailing Address

Tampa FUNDRAISOR

City

Tampa

State

Zip Code

FLA

Purpose of Disbursement

Campaign Contribution

Candidate Name

Category/Type

Amount of Each Disbursement this Period

2,500-

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: Fla

District: 11

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Amount of Each Disbursement this Period

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

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

5,000-

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

14031193882



ROSS

X-RAYED BY FEC SECURITY

RT 677 6

9748  
03.11

FZ

ORIGIN ID:TPFA

SHIP DATE: 10MAR14  
ACTWGT: 0.2 LB  
CAD: OFFC1501  
DIMS: 0x0x0 IN

BILL SENDER

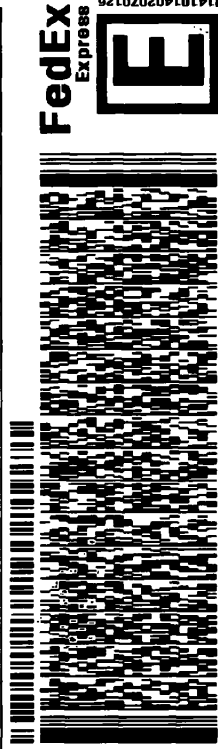
UNITED STATES US

TO **DEBORAH CHACONA**  
**FEC(FEDERAL ELECTION COMMITTEE**  
**999 E ST NW**

**WASHINGTON DC 20463**

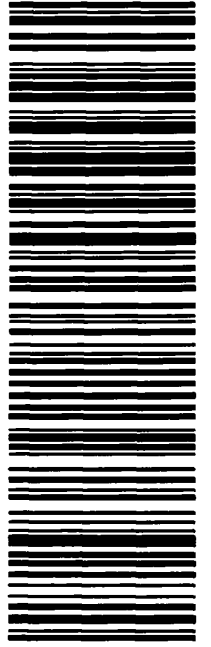
(202) 884-1155  
REF: 141702119552

DEPT:



TRK# **8050 4397 9748**  
0200 STANDARD OVERNIGHT  
TUE - 11 MAR AA

**XC RDVA** 20463  
DC-US IAD



Part # 156297-45221

fedex.com 1800.GoFedEx 1800.463.3339

**FedEx** NEW Package  
Express US Airbill

FedEx Tracking Number  
8050 4397 9748

1 From  
Date 3-9-14

Sender's Name  
HERB SWARZ-MAN Phone 813 962-1930

Company  
GRYPAC

Address  
Box 271092

City  
Tampa State FL ZIP 33688

2 Your Internal Billing Reference

3 To  
Recipient's Name  
DEBORAH CHACONA Phone

Company  
FEE

Address  
999 9 ST. N.W.

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Address  
Use this line for the HOLD location address or for continuation of your shipping address.

City  
WASH. State D.C. ZIP 20463

HOLD Weekday  
FedEx location address  
REQUIRED. NOT available for  
FedEx First Overnight.  
HOLD Saturday  
FedEx location address  
REQUIRED. Available ONLY for  
FedEx Priority Overnight and  
FedEx 2Day to select locations.



8050 4397 9748

Tot. 7  
Our 7  
Rev.

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 type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
--	------------------

<input type="checkbox"/> USPS Priority Mail	Postmarked
---	------------

<input type="checkbox"/> USPS Priority Mail Express	Postmarked
---	------------

<input type="checkbox"/> Postmark Illegible	
---	--

<input type="checkbox"/> No Postmark	
--------------------------------------	--

<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>fed ex</i>	Shipping Date <i>3/10/14</i>	
Next Business Day Delivery	<input checked="" 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
---	-------------------------------

<i>ls</i> PREPARER	<i>3/12/14</i> DATE PREPARED
-----------------------	---------------------------------

14031193884