

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Venice Unites
 Name
 (2) 521 Harbor Dr. S.
 Address (number and street)
Venice, FL 34285
 City, State, Zip Code

OFFICE USE ONLY

CITY OF VENICE
 OCT 7 2022 AM 10:19

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: _____

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 9 / 10 / 22 To 9 / 23 / 22 Report Type: 2022 G3

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 500.00

Loans \$ _____, _____, _____

Total Monetary \$ _____, _____, 500.00

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures (\$ _____, _____, 202.00)

Transfers to Office Account \$ _____, _____, _____

Total Monetary (\$ _____, _____, 202.00)

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 2,090.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 1,499.25

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Franklin E. Wright

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

[Signature]
 Signature

(Type name) _____

Candidate Chairperson (only for PC and PTY)

X
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name _____ (2) I.D. Number _____

(3) Cover Period 9, 10, 22 through 9, 23, 22 (4) Page _____ of _____

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
9, 14, 22	Calarco, Peter 701 Gondola Park Dr. Venice 34292	I	UNK	CHE			500.00
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Venice United (2) I.D. Number _____

(3) Cover Period 9, 10, 22 through 9, 23, 22 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
9/19/22	Jarvio, Lisa 231 Airport Ave E. Venice, FL #411 34285	Refund	REF		(202.00)
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