

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
 NOV 4 22 PM '02

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 10/22/22 To 11/03/22 Report Type: G7

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 \$ _____, _____, 180.97

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, 180.97

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 2,590.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 2,231.01

(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)

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 ____ / ____ / ____ through ____ / ____ / ____ (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
10/27/22 1	Curt Whitaker 613 W. Venice A. Venice, FL 33428	I	Att	CHE			500.00
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name _____

(2) I.D. Number _____

(3) Cover Period 10, 22, 22 through 11, 03, 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
10/24/22	Office Depot 1864 US 41 Bypass	1,500 Bus Cards	MON		124.34
1					
10/26/22	Office Depot 1864 US 41 Bypass	252 FAQ sheets	MON		56.63
2					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					