

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) PATRICIA M. OUELLETTE  
 Name  
 (2) 995 LAGUNA DR. #801  
 Address (number and street)  
VENICE FL 34285  
 City, State, Zip Code

OFFICE USE ONLY

CITY OF VENICE

MAY3'24 14:22

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate Office Sought: VENICE CITY COUNCIL
- 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 03 / 05 / 2024 To 03 / 31 / 2024 Report Type: \_\_\_\_\_

Original       Amendment       Special Election Report

### (6) Contributions This Report

Cash & Checks      \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Loans      \$ 2 , 0 , 0 . 0

Total Monetary      \$ 2 , 0 , 0 . 0

In-Kind      \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures      \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . \_\_\_\_\_

Transfers to Office Account      \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . \_\_\_\_\_

Total Monetary      \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . \_\_\_\_\_

### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 0

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 0

### (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) DAVID E. REMICK

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

X [Signature]  
 Signature

(Type name) PATRICIA M. OUELLETTE

Candidate     Chairperson (only for PC and PTY)

X [Signature]  
 Signature

**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name PATRICIA M. OUELLETTE (2) I.D. Number \_\_\_\_\_

(3) Cover Period 03 / 05 / 2024 through 03 / 31 / 2024 (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		
03/19/2024	PATRICIA M. OUELLETTE 995 LALUNA DR 801 VENICE FL	I	ATTORNEY	LOA			\$ 2,000.00
/ /							
/ /							
/ /							
/ /							CITY OF VENICE
/ /							MAY 3 '24 14:22
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name PATRICIA M. OUELLETTE (2) I.D. Number \_\_\_\_\_  
(3) Cover Period 03 / 05 / 2024 through 03 / 31 / 2024 (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
//					
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					CITY OF VENICE
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					MAY 3 '24 14:22
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**CAMPAIGN LOANS  
REPORT**

(Section 106.075, F.S.)

(PLEASE TYPE)

OFFICE USE ONLY

CITY OF VENICE

MAY 3 2014 14:23

This report applies to all candidates ELECTED to office who had loans exceeding \$500 in value, which were accepted and used for campaign purposes within the 12 months preceding the election. All such loans must be reported to the filing officer within 10 days after the candidate's election to office.

PATRICIA M. OUELLETTE

Full Name of Newly Elected Official

VENICE COUNCIL

Office

995 LAGUNA DR # 801

Mailing Address

VENICE

City

FL

State

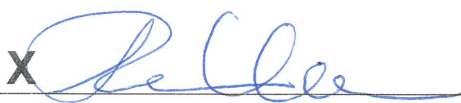
34285

Zip Code

I CERTIFY THAT I HAVE EXAMINED THIS REPORT  
AND IT IS TRUE, CORRECT AND COMPLETE.

PATRICIA M. OUELLETTE

Type or Print Name of Newly Elected Official

X 

Signature

# CAMPAIGN LOANS REPORT ITEMIZED

MAY 31 2024 14:23

Page 1 of 1

(PLEASE TYPE)

FULL NAME AND ADDRESS OF LENDER:

PATRICIA M. QUELLETTE

995 LAGUNA DR. #801

VENICE, FL

OCCUPATION: ATTORNEY

AMOUNT OF LOAN: 2,000.00

DATE RECEIVED: 03/19/2024

FULL NAME AND ADDRESS OF LENDER:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

OCCUPATION: \_\_\_\_\_

AMOUNT OF LOAN: \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_

FULL NAME AND ADDRESS OF LENDER:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

OCCUPATION: \_\_\_\_\_

AMOUNT OF LOAN: \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_

FULL NAME AND ADDRESS OF LENDER:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

OCCUPATION: \_\_\_\_\_

AMOUNT OF LOAN: \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_

FULL NAME AND ADDRESS OF LENDER:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

OCCUPATION: \_\_\_\_\_

AMOUNT OF LOAN: \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_

FULL NAME AND ADDRESS OF LENDER:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

OCCUPATION: \_\_\_\_\_

AMOUNT OF LOAN: \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_