

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) PATRICIA MARY OUELLETTE
Name

(2) 995 LAGUNA DRIVE # 801
Address (number and street)

VENICE FL 34285
City, State, Zip Code

OFFICE USE ONLY CITY OF VENICE

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Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: VENICE CITY COUNCIL SEAT 3
- 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 8 / 3 / 24 To 8 / 15 / 24 Report Type: 2024 P7

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 350⁰⁰
~~330⁰⁰~~

Loans \$ _____, _____, 420⁰⁰

Total Monetary \$ _____, _____, 770⁰⁰

In-Kind \$ _____, _____, _____ 0

(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

\$ _____, _____, 7,245⁰⁰

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 3,585⁰⁰

(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 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 MARY OUELLETTE (2) I.D. Number CITY OF VENICE

(3) Cover Period 8 / 3 / 24 through 8 / 15 / 24 (4) Page 1 of 1

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| (5) Date | (7) Full Name (Last, Suffix, First, Middle) | (8) Contributor Type Occupation | | (9) Contribution Type | (10) In-kind Description | (11) Amendment | (12) Amount |
|--|--|---------------------------------------|--------------------|-----------------------------|--------------------------------|-------------------|-----------------------------|
| (6) Sequence Number | Street Address & City, State, Zip Code | Type | Occupation | Type | Description | | |
| 8 / 9 / 24 <u>①</u> | NANCY DEFORGE 332 LAUREL HOLLOW DR NOKOMIS, FL 34275 | I | RETIRED | CHE | | | 50 ⁰⁰ |
| 8 / 12 / 24 <u>②</u> | JOAN FARRELL 617 TAMMAMI TRM LOT 112 VENICE FL 34285 | I | RETIRED | CHE | | | 100 ⁰⁰ |
| 8 / 12 / 24 <u>③</u> | CAROL CORRYAN STEEN 500 PRODUCE WAY N VENICE, FL 34275 | I | RETIRED | CHE | | | 100 ⁰⁰ |
| 8 / 12 / 24 <u>④</u> | LAMONT ANDREWS 744 NOKOMIS AVE S VENICE FL 34285 | I | RETIRED | CHE | | | 100 ⁰⁰ |
| 8 / 15 / 24 ⑤ | PATRICIA OUELLETTE 995 LACINA DR UNIT 801 VENICE FL 34287 | I | UNKNOWN | LCA | PMO | | 400⁰⁰ |
| | | | | | | | |
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CAMPAIGN LOANS REPORT ITEMIZED

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(PLEASE TYPE)

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|--|--|
| <p>FULL NAME AND ADDRESS OF LENDER: <u>PATRICIA M. OUELLETTE</u> <u>995 LAGUNA DR #801</u> <u>VENICE, FL</u></p> <p>OCCUPATION: <u>ATTORNEY</u></p> <p>AMOUNT OF LOAN: <u>420.40</u></p> <p>DATE RECEIVED: <u>8-15-2024</u></p> | <p>FULL NAME AND ADDRESS OF LENDER: _____ _____ _____</p> <p>OCCUPATION: _____</p> <p>AMOUNT OF LOAN: _____</p> <p>DATE RECEIVED: _____</p> |
| <p>FULL NAME AND ADDRESS OF LENDER: _____ _____ _____</p> <p>OCCUPATION: _____</p> <p>AMOUNT OF LOAN: _____</p> <p>DATE RECEIVED: _____</p> | <p>FULL NAME AND ADDRESS OF LENDER: _____ _____ _____</p> <p>OCCUPATION: _____</p> <p>AMOUNT OF LOAN: _____</p> <p>DATE RECEIVED: _____</p> |
| <p>FULL NAME AND ADDRESS OF LENDER: _____ _____ _____</p> <p>OCCUPATION: _____</p> <p>AMOUNT OF LOAN: _____</p> <p>DATE RECEIVED: _____</p> | <p>FULL NAME AND ADDRESS OF LENDER: _____ _____ _____</p> <p>OCCUPATION: _____</p> <p>AMOUNT OF LOAN: _____</p> <p>DATE RECEIVED: _____</p> |