

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) **Patricia Louise Duaybes**

Name

(2) **4106 Oxbow Drive**

Address (number and street)

Coconut Creek, Florida 33073

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: **City of Coconut Creek Commissioner - District C**

☐ 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 **02 / 26 / 2021** To **03 / 04 / 2021** Report Type: **G3**

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , **300** . **00**

Loans \$ _____ , **2** , **000** . **00**

Total Monetary \$ _____ , **2** , **300** . **00**

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , **3** . **00**

Transfers to Office Account \$ _____ , _____ , **0** . **00**

Total Monetary \$ _____ , _____ , **3** . **00**

(8) Other Distributions

\$ _____ , _____ , **0** . **00**

(9) TOTAL Monetary Contributions To Date

\$ _____ , **6** , **800** . **00**

(10) TOTAL Monetary Expenditures To Date

\$ _____ , **3** , **623** . **87**

(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) **Patricia Louise Duaybes**

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

X *Patricia L. Duaybes*
Signature

(Type name) **Patricia Louise Duaybes**

☒ Candidate ☐ Chairperson (only for PC and PTY)

X *Patricia L. Duaybes*
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name **Patricia Louise Duaybes**

(2) I.D. Number _____

(3) Cover Period **02 / 26 / 2021** through **03 / 04 / 2021**

(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
03 / 01 / 21	Adams Consulting Firm 3952 Lake Worth Rd Lake Worth, FL 33461	B	Business	CHE			\$ 300.00
1							
03 / 04 / 21	Patricia Duaybes 4106 Oxbow Drive Coconut Creek FL 33073	I	Candidate	LOA			\$ 2,000.00
2							
/ /							
/ /							
/ /							
/ /							
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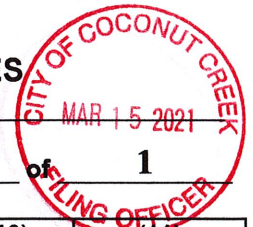
CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Patricia Louise Duaybes

(2) I.D. Number _____

(3) Cover Period 2 / 26 / 2021 through 3 / 04 / 2021

(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
02/26/21	TD Bank	Paper Statement	MON		\$ 3.00
1	6700 N. State Road 7 Coconut Creek, FL 33073	Fee			
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