

COUNTY ELECTED OFFICERS AND CANDIDATES FOR THE OFFICES OF COUNTY MAYOR,
COUNTY COMMISSIONER, COMMUNITY COUNCIL, SUBMIT SIGNED COPY TO ELECTIONS AT
CAMPAIGNS@miamidade.gov
MUNICIPAL OFFICIALS AND CANDIDATES SUBMIT FORM TO MUNICIPAL CLERK



MIAMI-DADE COUNTY ELECTIONS DEPARTMENT
REPORTING OF SOLICITATION OF CONTRIBUTIONS FOR
POLITICAL COMMITTEES, ELECTIONEERING COMMUNICATIONS ORGANIZATIONS,
501(c)(4) ORGANIZATIONS AND POLITICAL PARTIES

Reset Form

Elected Official's or Candidate's Name
Danielle Cohen Higgins

Address (number and street)
2332 Galiano Street, 2nd Floor

City, State, Zip Code
Coral Gables, FL 33134

☐ **CHECK IF ADDRESS HAS CHANGED**

OFFICE USE ONLY

MIAMI-DADE
ELECTIONS

025 APR 15 PM 12:31

RECEIVED

Filing as:

☒ **Elected Official**

Office: County Commissioner, District 8

☐ **Miami-Dade County Candidate**

Office: _____

☐ **Municipal Candidate**

(Name of Municipality) _____

Office: _____

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. (SECTION APPLICABLE TO CANDIDATES ONLY)

(Type name) _____

☐ **Treasurer**

☐ **Deputy Treasurer**

X

Signature

Date

I certify that I have examined this report and it is true, correct, and complete. (FOR BOTH ELECTED OFFICIALS AND CANDIDATES)

(Type name) _____

☒ **Elected Official**

☐ **Candidate**

X

Signature

4/11/2025

Date

**REPORTING OF SOLICITATION OF CONTRIBUTIONS FOR
POLITICAL COMMITTEES, ELECTIONEERING COMMUNICATIONS ORGANIZATIONS,
501(C)(4) ORGANIZATIONS AND POLITICAL PARTIES**

This report must be filed by Miami-Dade County and Municipal Elected Officers and Candidates to publicly disclose their fundraising activities for Political Committees, Electioneering Communications Organizations, 501(C)(4) Organizations and Political Parties within five days (includes weekends and holidays) of commencing solicitation activities, either directly or indirectly, on behalf of said organization(s).

(1) Elected

Official's or
Candidate's
Name

Danielle Cohen Higgins

I.D. Number _____

(Only for County Candidates)

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of

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[illegible]

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES