CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Daniella Levine Cava	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	2929 SW 3rd Ave; Suite 220	Submitted on:								
	Address (number and street)	10/23/2017 11:38:48 (eastern)								
	Miami, Fl 33129									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:								
(4)	Check appropriate box(es):									
	 ☐ Candidate Office Sought: County Commission District 08 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) 									
	(5) Report	Identifiers								
Cov		9 / 30 / 2017 Report Type: 17M09								
	riginal 🖾 Amendment 🔲 Spr	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$, , ,000	Monetary								
Loar		Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$, ,000	Total Monetary \$, , 0 . 00								
In-Ki	ind \$,,									
		(8) Other Distributions \$, , 000_								
(9)	TOTAL Monetary Contributions To Date \$, <u>346</u> , <u>269</u> . <u>54</u>	(10) TOTAL Monetary Expenditures To Date \$,58 , _35981								
(T		tification on to falsify a public record (ss. 839.13, F.S.) rect, and complete: (Type name) Candidate Chairperson (only for PC and PTY)								
X		_X								
Si	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	<u>Daniella Levine Ca</u>	va			2) I.D. Numbe	e r	2010
	9/1/2017		9	/30/2017			
(3) Cover Perio	od///	thro			(4) Pag	e ¹	of ⁰
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(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name		(5)	(5)	(.0)	X = 10	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Type	Occupation	Туре	Description	Amendment	Amount
Number	Oity, Otate, Zip Code	Турс	Occupation	турс	Description		Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Daniella	Levir	ne	Cava			(2) I.D. Num	nber	2	2010	200
	9,	/1/201	7		9/30/2	2017					
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
9/1/2017	Edge Communications, LLC, 2929 SW 3rd Ave, Ste 220 Miami, FL 33129	reimbursement for ngp and day of action materials	RE	Delete	\$398.88
9/1/2017	Edge Communications, LLC, 2929 SW 3rd Ave, Ste 220 Miami, FL 33129	reimbursement for ngp and day of action materials	RM	Add	\$398.88
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