	CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1)	Daniella Levine Cava	OFFICE USE ONLY
(-)	Name	ONLINE SUBMISSION
(2)	1742 West Flagler Street	[1241849]
	Address (number and street)	Submitted on: 1/20/2021 14:10:37 (eastern)
	Miami, FL 33135	
	City, State, Zip Code	
	Check here if address has changed	(3) ID Number:2241
(4)	Check appropriate box(es):	
	Political Committee (PC)	Cheek have if DC as FCO has dishauded
	☐ 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	☐ Check here if no other IE or EC reports will be filed
	individual making electioneering communications)	
	(5) Report	Identifiers
Cove	er Period: From 5 / 1 / 2019 To	
		ecial Election Report
		<u> </u>
(6)	Contributions This Report	(7) Expenditures This Report
Casl	h & Checks \$, , , 000	Monetary
Loar	s , , , ,	Transfers to Office Account \$
Tota	I Monetary \$, , 0 . 00	Office Account \$, , , 0 . 00
Tota	$\Psi_{\underline{}}$, $\underline{}$, $\underline{}$	Total Monetary \$, ,556 . 02
In-Ki	ind \$, , 0.00	,, 350 . 02
III-IXI	, , , , , , , , , , , , , , , , , , ,	(8) Other Distributions
		(8) Other Distributions \$, , 000_
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
	\$ <u>1</u> , 742, 180. 99	\$ <u>1</u> , <u>624</u> , <u>062</u> . <u>48</u>
		tification on to falsify a public record (ss. 839.13, F.S.)
Ic	certify that I have examined this report and it is true, corr	ect, and complete:
_(T	ype name)	(Type name)
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)
Х		×
	gnature	Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Daniella Levine Cav	a	(2) I.D. Number							
	5/1/2019		5	/31/2019						
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Pag	e	of			
				7						
(5)	(7)		(8)	(9)	(10)	(11)	(12)			
Date	Full Name									
(6)	(Last, Suffix, First, Middle)	_	SOLD CONTROL OF THE C		Data Pressure					
Sequence Number	Street Address &		ontributor Occupation	Contribution	In-kind	Amendment	Amount			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount			
.7 7										
1 1	-									
1 1										
1 1										
5			<u>.</u>							
I I										
1 1										
I = I										
100.										
1 1										
3										
1 1										

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _D	aniella	Levi	lne Ca	va			 (2) I.D. Nun	nber		2241	
	5,	/1/20	19		5/31/2	019					
(3) Cover Pe	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
5/1/2019	Burger, Jonathan 6103 Agua Ave, apt 806 Miami Beach, FL 33141	reimbursement dinner dem meeting	RM	Delete	\$94.12
5/1/2019	Burger, Jonathan 6103 Agua Ave, apt 806 Miami Beach, FL 33141	reimbursement dinner dem meeting	RM	Add	\$39.46
5/1/2019	NGP Van, Inc , P.O. Box 392264 Pittsburgh, PA 15251	voter access	МО	Add	\$600.00
5/28/2019	Amazon , PO Box 81226 Seattle, WA 98108-1226	party supplies for fundraiser	МО	Add	\$10.68
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