	CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Daniella Levine Cava	OFFICE USE ONLY							
(· /	Name	ONLINE SUBMISSION							
(2)	2929 SW 3rd Ave; Suite 220	[1234693]							
	Address (number and street)	Submitted on: 10/15/2020 14:22:25 (eastern)							
	Miami, FL 33129	10/13/2020 11-22-23 (custelli)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:2241							
(4)	Check appropriate box(es):								
	☐ Candidate Office Sought: Mayor								
	☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded							
	Party Executive Committee (PTY)	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 9 / 12 / 2020 To	9 / 25 / 2020 Report Type: 20G3							
□ 0	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
(-)		Monetary							
Cast	n & Checks \$, , 0 . 00	Expenditures \$, , 0 . 00							
		· - · - · - ·							
Loar	ns \$,,,000	Transfers to							
		Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , 0 . 00								
		Total Monetary \$, , 0 . 00							
In-Ki	ind \$, , 0 . <u>00</u>								
		(8) Other Distributions							
		\$, , <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$ 1, 461, 789. 49	\$ 1,374,171.56							
		tification							
1	It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)								
10	I certify that I have examined this report and it is true, correct, and complete:								
_(T	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
Х		X							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	(2) I.D. Numb	er	r <u>2241</u>			
	9/12/2020		9	/25/2020			
(3) Cover Peri	od//	thro	ough	<i>I I</i>	(4) Pa	ge <u>1</u>	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)		(9)	(10)	(11)	(12)
Sequence	Street Address &	Contributor Type Occupation		Contribution	In-kind	Amendment	A
Number 9/14/2020 /	City, State, Zip Code NANCY, NANCY 2650 Southeast 7th Place Homestead , FL 33033		retired	Type CH	Description	Delete	Amount \$65.
9/14/2020	Goodell Sittig, NANCY 2650 Southeast 7th Place Homestead , FL 33033	I	retired	СН		Add	\$65.
2			,				
1 1							
J J							
f I							
J I							

9/14/2020	Goodell Sittig, NANCY	I	retired	СН		Add	\$65.00
	2650 Southeast 7th Place Homestead , FL 33033						
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, ,	-						
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/ /	_						
DS-DE 13 (Rev. 11/1	3)	SEE RE	EVERSE FOR	NSTRUCTIONS	S AND CODE VAL	UES	

C, 1) Name _ ^{Daniel}	AMPAIGN TREASURER la Levine Cava	'S REPORT - ITEMIZ 		ED EXPENDITURES (2) I.D. Number 2241		
3) Cover Period _	9/12/2020 //through	9/25/2020 /	(4) Page1	of_	0	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sough contribution to candidate)		(10)	(11) Amount	
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