CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Danielle Cohen Higgins	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	2030 South Douglas Road; Suite 202	Submitted on:							
	Address (number and street)	2/2/2021 12:52:33 (eastern)							
	Coral Gables, FL 33134								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 2246							
(4)	Check appropriate box(es):								
	<ul> <li>         ☐ Candidate Office Sought: County Commission District 08     </li> <li>         ☐ Political Committee (PC)         ☐ Electioneering Communications Org. (ECO)         ☐ Party Executive Committee (PTY)         ☐ Check here if PTY has disbanded         ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)         ☐ Check here if no other IE or EC reports will be filed         ☐</li></ul>								
	(5) Report	Identifiers							
Cove	er Period: From 9 $\frac{1}{2020}$ To	9 / 30 / 2020 Report Type: 20M09							
		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$,,	Monetary							
Loar		Transfers to Office Account \$ , , , 0 . 00							
Tota	I Monetary \$ , , , 000	Total Monetary \$ . 5 . 00							
In-Ki	and \$ , , 0.00	Total Monetary \$ , , 5 . 00							
		(8) Other Distributions \$ , , 000							
(9)	(9) TOTAL Monetary Contributions To Date \$,199,55665_								
(T	(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)    Individual (only for IE								
X		<u>X</u>							
Si	gnature	Signature							

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	Danielle Cohen Higg	ins			2) I.D. Numbe	er <u>2</u>	246
	9/1/2020		9	/30/2020			
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Pag	e	of
		ľ					
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6) Sequence	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	ACT COLOR DE LA CO	Туре	Description	Amendment	Amount
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DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name _	Danielle	Cohen	n Higg	ins			 (2) I.D. Nun	nber	2	2246	70
	9,	/1/202	0		9/30/20	020					
(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
9/30/2020	ANEDOT , 1340 Poydras Street, Ste 1770 New Orleans, LA 70112	fees	МО	Add	\$5.00
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