CAMPAIGN TREASUR	ER'S REPORT SUMMARY
(1) ANNA HACH KAMMER Name (2) 1041 W SUBUPPHO O Address (number and street) FINE CHEST FOR 33/50 City, State, Zip Code Check here if address has changed	OFFICE USE ONLY
Cover Period: From 10 1 20 120 To	t Identifiers 3 1 1 8 20 1 20 Report Type: TR
(6) Contributions This Report	(7) Expenditures This Report
Cash & Checks \$,,	Monetary Expenditures \$, , 247 . 23
Total Monetary \$,,	Office Account \$,,
In-Kind \$,,	(8) Other Distributions \$,
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date \$, <u>25</u> , <u>780</u> . <u>00</u>
(11) Cert It is a first degree misdemeanor for any pers I certify that I have examined this report and it is true, corn (Type name) HWWA HOULDAMME Individual (only for IE or electioneering comm.) X Signature	conto falsify a public record (ss. 839.13, F.S.) ect, and complete: (Type name) ANNA (CHICAMME) Sandidate Chairperson (only for PC and PTY) X Signature

(1) Name CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES (2) I.D. Number					
(3) Cover Perio	d 10, 30, 10 through 11	3,00		of	4
(5) Date	(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
11/30/10	ANNA KOEHKAMMER 10041 W SUBURBAN DR PINECUEST FL 33456	RMB	MONA		147.73
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	CAMPAIGN TREASURE	R'S REPORT SUMMARY	
(1)	ANNA HOCH KAMMER	OFFICE USE ONLY	
(0)	Name		
(2)	Address (number and street)		
	PINECUEST FO 3315E		
	City, State, Zip Code		
	Check here if address has changed	(3) ID Number:	
(4)	Check appropriate box(es): Candidate Office Sought: Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications)	Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed	
	(5) Report	Identifiers 2	
Cove	er Period: From 10 1 20 To	1182120 Report Type: TR	
	riginal Amendment Spe	ecial Election Report	
(6)	Contributions This Report	(7) Expenditures This Report	
Cash	n & Checks \$, ,	Monetary	
Loar	s , ,	Transfers to Office Account \$, , .	
Tota	I Monetary \$, ,	Total Monetary \$,,	
In-Ki	nd \$, , <u>O</u>		
		(8) Other Distributions \$, ,	
(9)	* , , , ,	(10) TOTAL Monetary Expenditures To Date \$, 25, 200.	
	(11) Cert It is a first degree misdemeanor for any pers		
Ιc	certify that I have examined this report and it is true, corr		
(Type name) ANNA Hockkammel ☐ Individual (only for IE or electioneering comm.) (Type name) ANNA Hockkammel ☐ Chairperson (only for PC and PT)			
X		x (ll)	
Si	gnature //	Signature	

(1) Name (2) I.D. Number						
(3) Cover Perio	d <u>10, 30, 10</u> through <u>11</u>	3, w	4) Page	of		
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11)	
11/20/20	ANNA HOCHKAMMER JOUGH W SUBURBAN DR PINECREST A 33156	- RMB	MEDIA		147.13	
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CAMPAIGN TREASUR	CAMPAIGN TREASURER'S REPORT SUMMARY					
(1) ANNA HOCHKAMMER	OFFICE USE ONLY					
Name (2) 10041 W SUBURBAN DR						
Address (number and street)						
City, State, Zip Code						
☐ Check here if address has changed	(3) ID Number:					
(4) Check appropriate box(es):						
Candidate Office Sought: Council	MEMBER, SEAT					
☐ Electioneering Communications Org. (ECO)	☐ Check here if PC or ECO has disbanded					
☐ Party Executive Committee (PTY)☐ Independent Expenditure (IE) (also covers an	☐ Check here if PTY has disbanded☐ Check here if no other IE or EC reports will be filed					
individual making electioneering communications)						
	rt Identifiers					
Cover Period: From / / / / / / T	o 10 29 20 Report Type: 63					
☐ Original ☐ Amendment ☐ S	pecial Election Report					
(6) Contributions This Report	(7) Expenditures This Report					
Cash & Checks \$,	Monetary					
Loans \$	Transfers to Office Account \$, ,					
Total Monetary \$,						
In-Kind \$,,	Total Monetary \$, // , 66/ . /**					
	(8) Other Distributions \$, , O O					
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary/Expenditures To Date					
\$, <u>J</u> , <u>/0</u> 0. <u>**</u>	\$, <u>49</u> _, <u>932</u> . <u>27</u>					
(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, co						
(Type name) ANNA Hocokamune						
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)					
The state of the s						
X Signature	Signature					

(1) Name	ANNA	HOCH KAMMER	(2) I.D. Number	
(3) Cover P	Period 10	117 1 % through 10 129	/ 20 (4) Page	/ of /

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
10,19 20	BERCON RADEL FORNANDEZ + LARKIN. 200 SOUTH BISCAGNE BLUD. SOITE 850 MIAMI PL 33131	B	CAW MRM.	CAS			500.00
10,19,20	THE COLRADIND GROUP FIRST TRUST CENTER SUITE 300 LOUISHILLE KY 40202	B	ENGINE	CAS			1000,00
10, 19,20	COPPADINO LLC 200 S. MEMPIAN ST. SUITE 320 INDIANAPOLIS IN 46225	B	ENGN-	CAS			1000 00
10,19,20	JOSEPHA AMALIA CORRADINO 6485 SWBZST PINECRESTFL 33156		ENGIN EDZ/ RANNOR	CAS			1000.00
10,19, w.	BECKER+ POLIMICOTE 1 BAST BROWARD BLVD. SUME 1800 FT LAUDERDALE FL 33301	B	(Au) FIRM	CAS			1000.0D
10,21,20	MICHAEL TEND 11045 SW 69 AVE PINECREST FL 33156	I	ATTORNE	CAS			500.00
1 1						·	

DS-DE 13 (Rev. 11/13)

1) Name (2) I.D. Number							
(3) Cover Perio	d 10, 17, 20 through 10,	29,20	l) Page	of _			
(5) Date Full Name (Last, Suffix, First, Middle) Sequence Street Address &		(8) Purpose (add office sought if contribution to a	(9)	(10)	(11)		
Number	City, State, Zip Code	candidate)	Туре	Amendment	Amount		
10/19/10	MPW COMMUNICATIONS 2201 WASHINGTON AVENW HTOD WASHINGTON DE 20009	Communicat-	CAN		17661.72		
	WELLING INC.						
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CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1) AWA HOCHKAMMER Name (2) / DOY W SUBJURDAN OF Address (number and street) City, State, Zip Code	
Check here if address has changed (4) Check appropriate box(es): Candidate Office Sought: Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications)	Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed
Cover Period: From $\frac{10}{2}$ / $\frac{3}{2}$ / To	Identifiers (0) (6) 1 20 Report Type: 62, ecial Election Report
(6) Contributions This Report	(7) Expenditures This Report
Cash & Checks \$,,,	Monetary Expenditures \$,, 4590
Loans \$, <u>2</u> , <u>000</u> . <u>80</u> Total Monetary \$, 3, /25. 80	Transfers to Office Account \$, ,
Total Monetary \$,,,	Total Monetary \$, , , /5. 90
	(8) Other Distributions \$,
(9) TOTAL Monetary Contributions To Date \$, \frac{20}{20}, \frac{700}{20}	(10) TOTAL Monetary Expenditures To Date \$
(11) Cert It is a first degree misdemeanor for any pers I certify that I have examined this report and it is true, corr (Type name)	on to falsify a public record (ss. 839.13, F.S.)
Signature	Signature

(1) Name	WNA	that lamma	R	(2) I.I	D. Number		
(3) Cover Perio	d 101	3 A through	10,16	,20	(4) Page	of	

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
10,5,20	PAUL SASSO 12384 SW 82 AVE PINÆREST FL 33156.	I	ATTOENEY				10 00.00
10,5,50	VRENY ARNOLD 6709 8U 885T #202 PINECREST FL 33156	I	KETIRED	CAS			25,00
191250	KETTH DONNER 1821 &U SS NE MIAMI FL 33143	I	CONSULT- ANT	CAS			100.0
10,8,20	ANNA HOCH KAMMER 10041 WSUBLEBANDR PINECRES KL	I	fomewaxer	LOA			2000.00
/ /							,
1 1							
1 1							47

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(1) Name CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES
(2) I.D. Number (3) Cover Period 10 13 1 20 through 10, 16, 20 (4) Page (8) (11) (7)(9) (10)(5) **Date Full Name Purpose** (Last, Suffix, First, Middle) (add office sought if (6) Expenditure Street Address & contribution to a Sequence Type City, State, Zip Code candidate) Amendment Amount Number ANEDOT 5555 HILTON AVE SUUTE 106 BATON ROYETLA 70808

CAMPAIGN TREASURE	R'S REPORT SUMMARY			
Name (2) / ODY / W SUBURBAN DAUTE Address (number and street) PINEQUEST 33156. City, State, Zip Code Check here if address has changed (4) Check appropriate box(es): Candidate Office Sought: Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications)	Check here if PTY has disbanded Check here if no other IE or EC reports will be filed			
Cover Period: From 1 1 191 20 To	Identifiers			
(6) Contributions This Report	(7) Expenditures This Report			
Cash & Checks \$,/_, _425	Monetary Expenditures \$,, 483.			
Loans \$,, Total Monetary \$,	Transfers to Office Account \$, ,			
In-Kind \$, , .	Total Monetary \$, , <u>48</u> . <u>~</u>			
	(8) Other Distributions \$,			
(9) TOTAL Monetary Contributions To Date \$,,	(10) TOTAL Monetary Expenditures To Date \$,,,,			
(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, corr				
(Type name) → The Hock As A Hock As	(Type name) HWAA HICHICAM WIK. Candidate Chairperson (only for PC and PTY)			
x My	x Clark			
Signature	Signature			

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES
(1) Name HOCHKAMMEN (2) I.D. Number _____ \mathcal{D} through $\frac{9}{100}$ (3) Cover Period (4) Page of (7) (8) (9) (10)(11) (5)**Date Full Name Purpose** (Last, Suffix, First, Middle) (add office sought if (6)Expenditure Street Address & contribution to a Sequence Type City, State, Zip Code candidate) Amendment Amount Number ANNA HOCHKAMMER 10041 W SUBUPBAN DR PINEERES FR 33156 COMMUNICATHONS SOCIAL MEDIA FEES. BATON ROLLE LA 10808

(1) Name	ANNA	HocHKAMMER		(2) I.D. Number	
(3) Cover P	eriod 9	1 19 120 through	h 10, 2,	20 (4) Page) of /

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6)	Full Name (Last, Suffix, First, Middle)	4					
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
7,19,20	HEATHER CARRUTHERS		ia .				7.50
,	KEY WEST FL 33040	I	REALTOR	CAS			50.00
/	75040						
9,22,30	PAVIDE ENERES	-				. 1	
9,22,20	6463 SW/01 ST	T	RETIRED	CAR	,0.		1000.00
2	MIAMI /2 33156	_	re mes	043			7000
9,26,20	NAWEY CAINTHER	,	-				
11 6 120	NAWAY CAWTHER 9140 SWSGAVE	7	n -	1010			2.0
3	MIAMI K 33,56	1	RETIRED	CAS			300.00
9,27,20	Oppy LUBEL					9	2
	8831 SW 68 AVE	7	PETIRO	CAS			25.00
7	PINECPEST FL 53126	I	19211120				
10,2,50	KARYN CLEWNWEHAM		,		·		
101211	13985 SU12 CT		TEACHER	CAC		-	50.00.
3	PAIMETTO BAYFL 33/58	1	- ner	413		80.	20.
	02/30		-				
				*:			
1 1 .							
						,	-1
						-	

DS-DE 13 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) ANNA HOCHKAMMED	OFFICE USE ONLY							
Name								
(2) 10041 W SUBURBAN DR								
Address (number and street) **Proceedings**: Address**: Address**								
City, State, Zip Code								
☐ Check here if address has changed	(3) ID Number:							
(4) Check appropriate box(es):								
Candidate Office Sought: Council Montal SOAT Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed								
(5) Repor	rt Identifiers							
Cover Period: From 9 / 1 / 1 25 To	o 9 1 30 1 20 Report Type: M 9							
	pecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$,	Monetary Expenditures \$, , 483							
Loans \$, ,	Transfers to Office Account \$, , .							
Total Monetary \$, 2, 800. 00	Total Monetary \$, 483							
In-Kind \$, , .	, , , , , , , , , , , , , , , , , , , ,							
	(8) Other Distributions \$,							
(9) TOTAL Monetary Contributions To Date \$,	(10) TOTAL Monetary Expenditures To Date \$							
	ertification reson to falsify a public record (ss. 839.13, F.S.) errect, and complete:							
(Type name)	(Type name)							
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)							
Χ	X							
Signature	Signature							

(1) Name <u>ANNA HOCHKAMMER</u> (2) I.D. Number ______ (3) Cover Period <u>9</u> 1 <u>10</u> through <u>9</u> 1 <u>30</u> 1 <u>70</u> (4) Page _____ of ____ 2

(5)	(7)		(8)	(9)	(10)	(11)	(12)
(6)	Full Name (Last, Suffix, First, Middle)	×			-		
Sequence Number	Street Address & City, State, Zip Code	Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
9,1,20	CAREMEN PARMIER)	I	RETIRED				50.00
9,2%	JERRY HASHBURN 601 MOSS PANCH RD PINECREST FL 3302	I	RETIRED	CAS			100.00
9,9,30	JASHINE GARDENS LLY 808 BRICKELIKEY DR # 1001 MIAMI FL 33131	В	ALF	CAS			250.00.
777 90	JAMES COURTNEY 5930 SW 102 ST MIAMI FL 33156	I	ATTORNEY	CA-S			100.00
	VRENY ARNOLD 6709 SW 88 ST # JOZZ PINECREST FZ 33152	I	RETIRES	CAS			25.00
,	CHARLES RUFFNER 6901 SW 94 ST PINEEREST FL 333156	I	TAY ATTORNEY	CAS			100.00
111100	HEATHER CARRICTHERS 1314 NEWTON ST KEY WEST FL 33040	I	REALTOR	CAS			50.°°

DS-DE 13 (Rev. 11/13)

(1) Name	HONA	HoctKAN	MER	(2) I.	D. Number		
(3) Cover F	Period 9	1/12	through 9/	30 121	(4) Page	2 of	2

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
9,22,30	DANIEL ENEKES 6463 SW 107 ST MIAMI PL331 SG	I	CAS	PETIRED)			1000.00
9,2420	NANCY LAWTHER 9140 SW 59 AVE MIAMI FR 33156	I	CAS	RETIRED			300.00
9,27,20	EARY LUBEL 8831 &U 68 AVE PINECREST FL 353156	I	OAS	RETIRES			25,00
9,30,20	JALED+ LINDA DWYEDZ 1781 PALMETTO CT PINECREST FL 33156	I	CAS	ATTORNEY			800.00
, ,							
1 1							
1 - 1						7	

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20through 101 2+ 20 (3) Cover Period 91 191 (4) Page (7)(8) (9) (10)(11) (5)Date **Full Name Purpose** (Last, Suffix, First, Middle) (add office sought if (6)Expenditure Street Address & contribution to a Sequence Type City, State, Zip Code candidate) Amendment Amount Number ANNA HOCHKAMMER COMMUNICATIONS 1001 WSUBURBAN DR SOCIAL MEDIA PINECREET FL 33186 5555 HLTOW ANT SUTTE 106 FEES DATON ROUGE LA 70808

CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) ANNA HOCHKAMMER	OFFICE USE ONLY						
Name (2) 10041 WEST SUBURBAN DR							
Address (number and street)	· · · · · · · · · · · · · · · · · · ·						
PINECREST PL 331Sla							
City, State, Zip Code							
Check here if address has changed	(3) ID Number:						
Check appropriate box(es): Candidate Office Sought: Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed							
(5) Report	Identifiers						
Cover Period: From $\frac{\delta}{2} / \frac{1}{2}$ To	8 131 120 Report Type:						
☐ Original ☐ Amendment ☐ Spe	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , <u>750</u>	Monetary Expenditures \$, 3_, 460. 60						
Loans \$,,	Transfers to Office Account \$, ,						
Total Monetary \$, , <u>750</u>							
In-Kind \$,,	Total Monetary \$, 3 , 60.						
	(8) Other Distributions \$,						
(9) TOTAL Monetary Contributions To Date \$,	(10) TOTAL Monetary Expenditures To Date						
(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, corr							
(Type name) ANNA HOCA (∠AMMEX. ☐ Individual (only for IE or electioneering comm) Treasurer ☐ Deputy Treasurer	(Type name) AND HOCHLOMMER Candidate Chairperson (only for PC and PTY)						
x ()	x // X						
Signature	Signature						

(1) Name	INNA HOCHKI	7mi	MBZ	(2)	I.D. Number	-	
(3) Cover Period	81/190	throu	gh <u>8</u> /	3/ 126	(4) Page		of/_
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12)
/	MJ WRIGHT 6300 CHAPMAN FIEZD DR MIAMI FL 33156	II	MANAGE WIT WORLD ENTERISE				500,00
8,8,20	PHILIP LETMAN 8791 SWGYCT PINECREST FL 33156	I	INVESTOR SELF- CONPLOYED	CAS.			250,00
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PS-DE 13 (Poy. 11/					S AND CODE VAL	,	,

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Hochicannen (2) I.D. Number

(3) Cover Period 8 / / 20 through 8 / / 20 (4) Page / of /

(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
8 130 120	ANEDOT 5355 HILTON AVE SUITE LOG BATON POLIGE LA 70808	FEES	CAN		30.60
8/11/20 2	HSA ENTERPRISES. 1300 N KENDALL 'DR SUITE 505 MIAMI PL 33156.	PROMOTIONAL MATERIALS	CAN.		2550.°°
6 /27/20 3	HWNA HOCAKAMMER 10041 WEST SUBURBAN DR PINECHEST FL 33156.	Common CATTON	RMB		400,00.
8/31/20	ANNA HOCHEAMMER 10041 W SUBURBAN DR PINECREST FZ 33152	Housey	RMB		480° 00
/ / .			1		
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//					

CAMPAIGN TREASURE	R'S REPORT SUMMARY
Name DOY WET SUBURBAN DR Address (number and street) NECLEST FL 33/5/4 City, State, Zip Code Check here if address has changed Check appropriate box(es): Candidate Office Sought: Council Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications)	SEP 0 1 2020 Guido H. Inquanzo, Ir Village Clerk
Cover Period: From $\frac{8}{1} / \frac{1}{20}$ To	Identifiers 8 1 31 1 20 Report Type: 8 9 9 9 9 9 9 9 9 9
(6) Contributions This Report	(7) Expenditures This Report
Cash & Checks \$,, <u>750</u> . <u>oo</u>	Monetary Expenditures \$, 3 , 460. 60 Transfers to
Total Monetary \$,, 250. 50	Total Monetary \$, , , ,
	(8) Other Distributions 5,,
(9) TOTAL Monetary Contributions To Date \$,	(10) TOTAL Monetary Expenditures To Date
	tification
Certify that I have examined this report and it is true, continued the report and i	rect, and complete: (Type name) ANA HOCHMAN (Candidate Chairperson (only for PC and PTY)
Signature	Signature //
DS-DE 12 (Rev. 11/13)	SEE REVERSE FOR INSTRUCTIONS

(1) Name ANNA HOCHKAMMER (2) I.D. Number									
(3) Cover Period 8 1 1 1 20 through 8 13/ 120 (4) Page 1 of 1									
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)		
Sequence Number	Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount		
8, 4,20	MJ WRIGHT 6300 CHAPMAN FIELD DR MIAMI FL 33156	I	M ANAGO WET WOFLD GUTGEPROS				500, ⁰⁰		
8,8,20	PHILIP LETHAN 8791 SWGYCT PINECREST FL 37156	I	INVESTOR SOLF – CONFLOYO	CAS.			250.00		
1 1						,			
1 1									
1 1									
1 1									
1 1									
					o 4	•			

DS-DE 13 (Rev. 11/13)

(1) Name ANA HOCHICAMMEN (2) I.D. Number									
(3) Cover Period	d 8 /// ∞ through 8 /	31,20 1	I) Page/	of _					
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11)				
8 30/20	ANEDOT 5355 HILTON AVE SUITE IOG BATON ROUGELA 70808	FEE.S	CAN		30.60				
8/11/20 Q	HSA ENTERPRISES. 7300 N KEWDALL DR SUITE SUS MIAMI PL 33156.	PROMOTIONAL MATERIALS	CAN.		2550. ⁰⁰				
6 127120 3	HANNA HOCH KAMMER 10041 WEST SUBURBAN DR PWECKEST FL 33156.	Commen CATTON	RMB		400,00,				
8 131 120	ANNA HOCHEAMMER_ 10041 W SUBURBAN DR PINECREST FZ 33152	Honery	RMB		480°00				
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//									
//									
//									

CAMPAIGN TREASURE	R'S REPORT SUMMARY				
Name (2) /OOYI W SUBURBAN DR Address (number and street) PINECREST TO 33156 City, State, Zip Code Check here if address has changed (4) Check appropriate box(es): Candidate Office Sought: Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications)	Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed				
Cover Period: From/					
(6) Contributions This Report	(7) Expenditures This Report				
Cash & Checks \$	Monetary Expenditures \$, , 45670 Transfers to				
Total Monetary \$,,	Office Account \$,, Total Monetary \$,, 456 . 70				
	(8) Other Distributions				
(9) TOTAL Monetary Contributions To Date \$, _13_, 975.	(10) TOTAL Monetary Expenditures To Date \$,3_,30/05				
It is a first degree misdemeanor for any pers I certify that I have examined this report and it is true, correctly that I have examined the report and it is true, correctly that I have examined the report and it is true, correctly that I have examined the report and it is tr	on to falsify a public record (ss. 839.13, F.S.)				

(1) Name	NA	Hoch	KAM	MER		(2) I.I	D. Number			
(3) Cover Period	7	//	120	through	7 131	120	(4) Page	_/	of	2

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name		(0)	(0)	(12)	(**)	(/
(6)	(Last, Suffix, First, Middle)	0	rai r	0 (-') ('	la Idad	-	1
Sequence Number	Street Address & City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
	CARIOS WOLF	71		7,6		,	
)	6465 SW 109 ST	1	DOCTOR	-CAS			250.00
	PINEREST FL 33156	+					
7,6,20	DAMODAR + LALITA AIRAN			9			07
7	9310 SW 71 AVE	T	ATTORNEY	CAS			100.
2	PINECREST PL		<u> </u>				
7, 6,20.	STEVEN SILVERMAN						
	9900 SW 72CT		ATEM ING	CAS			125.00
3	MIAMI FL 33156	上	ATTORNEY	U+3			, , ,
7,7,20	WILLIAM HOCHKAMMER	*		r			
, ,	1260 ARPMOOR DR	\mathcal{T}	ATTORNES	CHT			1000,00
9	BLOOMFIELD HUS MI 48301		Mares	C11 E			
7, 9,20	MARCIA HOCHKAMMER 1260 APDMORDE	<u>.</u>					
77 7700	BLOOMFIELD	T	•	C+6-			1000.00
5	HUS, MI 48301	1	ATTORNEY	SIE			, , , ,
7,7,20	SHE COGNELLE		*				4
	9275 SWISS TERE		POTÒ	DAC	*		150,00
6	CUTIER BAY, FL 3357	7	PETRED	CITS			130,
7,8,20	RUTHS LIST FL					4	
110 100	100 E MAIDISON 31	r	PAC	CAS			500.00
7	TAMPA FL 33602.			U/3			500,
/	- 3002,				1		2"

DS-DE 13 (Rev. 11/13)

(1) Name	HON	A H2	CHKAN	MER		(2) I.D). Number			
(3) Cover B	oriod	7,	1,20	through 1	, 31,	20	(4) Page	2	of	2

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
7, 14 i20 8	JAMES CROSCAND 6301 SW 99 TERR MIAMI FL 33156		ATTORNEY				1000.00
9.	MIAMI REALTORS PAC 700 ROYAZ POINCIANA BLVD STE 400 MIAMI SPRINGS FL 33166	F	PAC	CHE		,	D00. 00
7,2320	6761 SW 89 TELL MIAMI FZ 33156	B	CONSULTING	CHE	Tig		250.5
7,27,20 11	KATIE ACBOTT 6030 SW1/6 ST PINEREST FL 33156	I	DECTED	CAS			100.00
	GOLDMAN RESIDENTA BROWF 10501 SW 11 AVE PINECREST FL 333156		PEAL	CAS			250.00
7,31,20	ANN MEMASTER. 10100 SW 60 AVE PINECLEST FL 33156	I	MARCKETTINE	045			250,00
1 1							

DS-DE 13 (Rev. 11/13)

1) Name (2) I.D. Number								
(3) Cover Perio	d <u>7 / / / / / / / / / / through</u>	3/120 (4	l) Page	of _				
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11) Amount			
1 /28/20	ANNA HICHLAMMAZ: 10041 W SUBLEBBAN DR PINECREST FL 33156	SOCIAL MEDIA + COMMUNICATIONS	RMB		345,00,			
7/31/20	ANEDOT 5555 HILTON AVE SUITE 106 BATON ROUBE, LA 70808	Fæs	CAN		111.70			
/ /			v		*			
/ /								
_ / /				27 24				
/ /								
/ /								
/ /			-					

		RER'S REPORT SUMMARY					
(1) HNNA P	toch KAMMEN	OFFICE USE ONLY					
Name (2) /004/ (1)	SUBURBAN DR						
Address (number a		 '					
PINECRE	ST FZ 33/5						
City, State, Zip Cod							
☐ Check here if add	iress has changed	(3) ID Number:					
(4) Check appropriate box(es):							
Candidate Office Sought: COUNCICMEMBER, SEAT							
☐ Political Committee	e (PC) nmunications Org. (ECO)	Check have if BC as ECO has dishanded					
☐ Party Executive Co	•	 ☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded 					
☐ Independent Expen	diture (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed					
individual making elect	ioneering communications)						
	(5) Repo	ort Identifiers					
Cover Period: From		7 1 3/ 1 20 Report Type:					
							
Original Am	nendment	pecial Election Report					
(6) Contributions This I	Report	(7) Expenditures This Report					
Cash & Checks \$_4	5.975.00	Monetary Expenditures \$, 456. 70					
	N						
Loans \$	- ' ' ·	Transfers to Office Account \$					
Total Monetary \$, 5,925.00	,,,					
Total Monetary \$.,,	Total Monetary \$, ,456 . 70					
In-Kind \$, , ,	,, <u></u> ,, <u></u>					
	· · ·	(8) Other Distributions					
		\$					
(9) TOTAL Monetary Con	Atributions To Date	(40) TOTAL Manatani Evmanditurna Ta Data					
\$,		(10) TOTAL Monetary Expenditures To Date \$,3 , 30/ o S					
·,,	773	,					
	(11) Cert	ification					
	* "	on to falsify a public record (ss. 839.13, F.S.)					
	this report and it is true, corre	ect, and complete:					
(Type name) ANNA Hi	CITYAMER	(Type name) ANNA HICHKAMMED_					
Individual (only for IE or electioneering comm.)		☐ Candidate ☐ Chairperson (only for PC and PTY)					
1/00	**	806					
X	Ha	x Story					
Signature /		Signature					

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS									
(1) Name ANNA HOCHKAMMER (2) I.D. Number									
(3) Cover Period	1/1/20	throu	ugh	31 120	(4) Page		of 2		
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date	Full Name	1			(,	(,	(12)		
(6)	(Last, Suffix, First, Middle)	1				1			
Sequence	Street Address &	C	ontributor	Contribution	In-kind				
Number	City, State, Zip Code	Type	Occupation	Туре	Description	Amendment	Amount		
7,5,20	CARIOS WOLF 6465 SW 109 ST								
1	6465 SW 109 ST	TI	DOCTOR	CAS			250.00		

	Date	Full Name	\-'	1	,	(10)	(11)	(12)
	(6)	(Last, Suffix, First, Middle)					1	
	Sequence	Street Address &	Contributor	Contri	bution	In-kind		
- [Number	City, State, Zip Code	Type Occupa	1		Description	n Amendmer	nt Amount
	7,5,20	CARIOS WOLF						Amount
)	6465 SW 109 ST	I DOG	OR CA	-5			250.00
-		PINEREST FL 33156						
	110120	DAMOPAR + LALITA						
	,	9310 SW 71 AVE .	T AFTORA	ty CAS				100.00
	2	PINECREST FL	<u> </u>	9 012	>			
	11 6 100.	STEVEN SILVERMAN						
	- 1	9900 SW 72 CT	_		_			125.00
	3 1	33156	_ ATTORNE	y CAS				145.
	7, 7,20	WILLIAM HOCHKAMMEZ						
	1/ 2	260 ARPMORPE BLOOMFIELD	T Ama	سور دم ل	-			1000,00
-	/ H	145 HI 4830/	MIGGE	SCHE				
L	7, 9,20,2	HAPPINE POP						
			-	0.1-				_
	S th	US, MI 48701	ATTOONE	1 CME				1000.00
	7,7,30 8		· ·	-	+		-	-
	8	THE COGRACE						
	/ /	THER BAY, FL T	PETRED	CAS				50.00
,		ATHS USI FL						
	100	MADISON ST						
	7 TAN	MPA FL	PAC	CAS	, 1			500.00
	/	33602						500.
D	S-DE 13 (Rev. 11/13)				1	1	1	

13 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS							
(1) Name	TWAR HOCHKA	m	MER		(2) I.D. Number	·	
(3) Cover Perio	nd 7,1,2e	thro	ough/	31,3	(4) Page	2.	of 2
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Туре	(8) Contributor	(9) Contribution	(10) In-kind Description	(11)	(12)
	JAMES CHOSLAND 6301 SW 99 TERL MIAMI FL 33156	I	ATTORNEY				/000.00
7,22,20	MIAMI REALTORS PAC NO ROYAL PONCIANA BLUD STE 400 MIAMI SPRINGS FL 33166	F	PAC	CHE			D00. 00
7,2320	EME + ASSOCIATES BANGEMADORIST 6761 SW 89 TER MIAMI FZ 33156	B	CONSULTING	CHE			250.5
1,27,20	KAME ACCOTT 6030 SW1/6 ST PINECREST FL 33/56	I	ELECTED OFFICIAL	CAS			100.00
1,31,20	GOLDMAN RESIDENTA GROUP 10501 SW 71 AVE PINECREST FL 33156	- 1	PEAL	CAS			250.50
7,31,20	ANN MEMASTER	I	MARKETING	OAS .			250.00
1							

DS-DE 13 (Rev. 11/13)

(1) Name/	INNA HOCHKAMME) I.D. Number		
(3) Cover Perio	d 7, 1, 20 through 7	<u>131,20</u> () Page	of	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11)
1 /28/20	ANNA HICHLAMMER. 10041 W SUBLEBBAN DR. PINECREST FL 33156	SOCIAL MEDIA + COMMUNICATIONS	RMB		345.00.
7/31/20	ANEDOT 5555 HILTON AVE SUTTE 106 BATON ROUGE, LA 70808	Fæs	CAN		111.70
//					
//					
//					
/ /					
/ /					
//					

CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1) ANNA HOCHKAMMER	OFFICE USE ONLY					
Name (2) 10041 W SUBURBAN DR Address (number and street) PINECKST FL 33156. City, State, Zip Code						
Check here if address has changed	(3) ID Number:					
(4) Check appropriate box(es): Candidate Office Sought: Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications)	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed					
, (5) Repor	t Identifiers					
	6 1 30 12020 Report Type: 6					
☐ Original ☐ Amendment ☐ Sp	ecial Election Report					
(6) Contributions This Report	(7) Expenditures This Report					
Cash & Checks \$, <u>5</u> , <u>ó</u> \oo <u>o</u> \oo	Monetary Expenditures \$, 2,844.35					
Loans \$, ,	Transfers to Office Account \$					
Total Monetary \$,	Total Monetary \$, 2,844. 35					
In-Kind \$, ,						
	(8) Other Distributions					
(9) TOTAL Monetary Contributions To Date \$, \$, 600 00	(10) TOTAL Monetary Expenditures To Date					
(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, cor	rect, and complete:					
(Type name) ANNA HOCTICAMMOR ☐ Individual (only for IE or electioneering comm.) ☐ Deputy Treasurer	(Type name) AWA HECHEAMING Chairperson (only for PC and PTY)					
X Signature	X Signature					

(1) Name	ANA	IA	Hoch	tKAMI	MER			(2) I	.D. Number			
(3) Cover F	Period (6	, /	,20	through	6	30	120	(4) Page	/	of	3

	·						
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	C.	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Type	Description	Amendment	Amount
	20.00 (20.504)	Турс	Occupation	Турс	Description		Amount
6,11,20	MARK CREFTEN 1341 Sav 110 PERK		SOFTWARE				
7		+	PA	0.1.0			100
	PINEGREST FL 331Sb	I	54	CAS			, 00
/	7/130			*			,
1 10	111-100 10 10						
6, 12,20	NANCY LAWTHER						
		1	10) -	246			300
0	MIAMI FL33156	+	RETIRED	CAS			
<i>A</i>							
1 15 2	LISA ASKOWTZ						
6,15,20	10775 SW 63 AVE						
		T	RETIRED	CAS			100
3	MIAMI FL 33156	1	1 Ce med	(7, 3			100
6 1/2 m	MARY WELLS			-			
6,16,20	6135 SW 116 ST						1
	MIAMI FL 33156	7	HUMEMAKER	CAS			100
4	WITHING TO SISE						
,							
6, 16,20	ERIC LITTIMEN						
0110170	6050 POLLING RD			. 1 -			250
~	DRIVE	TI	ATTORNEY	CAS			250
5	PINECREST FL						
<i>F</i>	CARA ALTHUIS						7,
6,17,20							
	12510 RAMIRO ST	T	Coner	CAS			25
6	CORAL GABLES		CUICII	C/1 >		g 1	63
1 10 0	MARIKA LYNCH		Carlette				
6,18,20	-		COMMUNI -				4
	69% Sw 96 ST	T	CATIONS	CAS			250
7	MIAMI FL 33156		CONSULTANT				
/		-					

DS-DE 13 (Rev. 11/13)

(1) Name ANNA HOCHKAMMER (2) I.D. Number

(3) Cover Period 6 / 1 / 1 Dthrough 6 / 30/20 (4) Page 2 of 3

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
6,18,20	KATHIYN SORENSON 13200 SW 69 HE MIAMI FL 33156	I	RETIKED	CAS			100
6,22,30	DONNA SHALALA 60 EDEEWATER DR APT 16F FL CORAL GAPLES 33133	I	CONCRESS.	CA5		,	1000.
6,22,20 10	MAY MILAM 1480 SW 155 AVE DAVIE FL 33336	I	SUPER- MARKET EXECUTIVE	CAS			500
6,22,20	AMY SHAPIPO 1450 SW 116 ST MIAMI FL 33156	I	Cerrece Cempsercol	CAS			100
6,2220	MARIANA PESIN 12950 SWGIAVE PINECREST FL 33156	Ī	NONE	CA5	¥.		100
6, 22,20	GEBREE WILLIAMSON TII 5501 OAK LANE COPAL GARLES FL 33156	I	AUTO DEMER	CAS		,	500
6,22,20	MONA MAPKUS 8925 SW 61CT PINECPEST FL 33156	1	Атториеч	CAS			100

DS-DE 13 (Rev. 11/13)

(1) Name ANNA HOCHKAMMER (2) I.D. Number

(3) Cover Period 6 1 1 20 through 6 1 301 20. (4) Page 3 of 3

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6)	Full Name (Last, Suffix, First, Middle)						×
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
6, 22,20	SHANNA NYE		PHOTOGRA-				
4/00/00	12624 SW 17 AVE	,	PHER	0.0.6			4.)
	MMMI F2 33120	1	CAS	CAS			100
15				. *			
625 20	DANIELLE COHEN HIGGINS			-			*
	17635 Sev 83 CT		ATTONIO	CAS			100
16	PALMETTO BAY	7	ATTORNE	, UIS			700
70	FL 33157						
6,27,20	RIBERT POSS		,				
01111	6701 Sw 94 ST			COC			10
17	PINECREST	I	RETIRED	CAS			100
. / /	FL 33156						
6,22,20	THOMAS + CAPOLE ABBOTT			*			
	6871 SW138 ST		RET ROD	CHE			25
18	PINECREST FL	I.	MINAS	CIIL			, , ,
	33,56						
6,22,20	JEHN A HNA STANHAM		MANAGUERA	_			
	6430 SW 1265T RD	T	CENSULTANT				1000
19	PINECKET FL	1	C	CIIC			1000
,	33/56						
6 35 20	CYNTHA BLANCE						
	6400 SW 123 TERR MIAMI FL 33156	-	RETIRED	CAS			100
20	MIAMI FL 33156			4,3			, , ,
/ /							
			7		i.		

DS-DE 13 (Rev. 11/13)

(1) Name	NNA HOCHKAMMER		2) I.D. Number		
(3) Cover Perio	d <u>6 / / / 20</u> through <u>6 /</u>	30,20	1) Page	of _	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11)
6/15/20	MPW COMMUNICATIONS LLC 2001 WISCONSIN AVE NW SUITE ZOD WASHINGTON DC 20007	WEBSITE AND GRAPHCS.	CAN		2326.00
6 p 120	VILLAGE OF PINECREST 12645 PINECREST PARKAY PINECREST FL 33156	QUALIFYING FEE	CAN		100.00
6/12/20	WEDGLEET 10150 HIGHZAND MANDE DR. SUITE ZOO TAMPA FL 33610	DATA	CAN		261. 95
6 30po.	ANEDOT 1900 MCKINNES BUE DALLASTX 75201	CONTRIBUTION SOFTWARE	CAW.		162.40
/ /					
/ /		,			
,			,		
/ /					

CAMPAIGN TREASURE	R'S REPORT SUMMARY			
Name (2) 10041 W SUBURBAN DR Address (number and street) PINECHEST FL 33156. City, State, Zip Code	OFFICE USE ONLY			
(4) Check appropriate box(es): Candidate Office Sought: Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY)	(3) ID Number: LEMBEL SEAT Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed			
Cover Period: From 6 1 1 12020 To Original Amendment Spe	Identifiers C 1 30 12000 Report Type: 6 cial Election Report			
(6) Contributions This Report	(7) Expenditures This Report			
Cash & Checks \$, _5_, _00000.	Monetary Expenditures \$, 2 ,844 . 35			
Loans \$, ,	Transfers to Office Account \$			
Total Monetary \$,	Total Monetary \$,2 , 844. 35			
	(8) Other Distributions \$,			
(9) TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date \$,2_,99			
(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, corr	ect, and complete:			
(Type name) ANNA #*CHNAMM() ☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	(Type name) ANNA HXHXAMMER Candidate Chairperson (only for PC and PTY)			
Signature	X Signature			

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	ANNA	Hoch	HKAMI	MER			I.D. Number		
(3) Cover Pe	eriod 6	, /	,20	through	6 131	2 120	_ (4) Page	/_ of	3

(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	Occupation	Туре	Description	Amendment	Amount
6,11,20	MARK CHEFTEN 1341 Sub 110 TERR PINE-CREST FL 331 Sb	I	SOFTWARE	CAS			100
6, 12,20	NANCY LANTHER 9140 SW SG NE MIAMI PEBBISE	I	RETIRET	CAS			300
6, 15,20	LISA 1540WTZ 10775 SW 63 AVE MIAMI FL 3315B	I	RETIRE	CAS		•	100
1 1/2 20	MARY WELLS						
4	6135 SW 116 ST MIAMI FL 331 STS	/	HUMEMALLE	CAS			100
1 1/2-	ERIC LITTIMIN						
5	ERIC LITTMIN LOSO FOLLINGED OFFIVE PINECREST FL 33156	T	ATTORNEY	CAS		-	250
6,17,20	CARA ALTITUIS						
6	CORAL GABLES	I	Conten	CAS			25
6,18,20	MARIKA LYNCH 69% SW 96 ST MIAMI FL 33156	I	COMMUNI - CATIONS CONSULTANT				250
/							

DS-DE 13 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	ANNA	HOCHKAM	MER (2)	I.D. Number		
(3) Cover Per	iod 6	(, Dothrough	6,30,20	(4) Page	2 of	3

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)			18.1			
Sequence	Street Address &	C	ontributor	Contribution	In-kind		-
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
6,18,20	SORENSON						
8	13200 SW 69 HE MIAMI FL 33156	I	RETILED	CAS			100
6,22,20	DONNA SHALALA		Conspess-				
9	GOLDEEWATER DR APT 16F FL CORALGAPLES 33133	I	WOMAN	CAS		,	1000.
6,22,20	MAY MILAM		Sulpar-				
10	1480 SU: 155 ANE DAVIE R. 3333 G		MACKET EXECUTIVE	CAS			500
6,22,20	AMY SHAPIPO 1450 SW 116 ST		Cenece				
11	MIAM) FL 33156	I	CENDSTECK	<i>G</i> 5			100
6,2220	MARIANUA PESIN 12950 SWGIAUE		NONE		2		
12	PINECPEST FL 33156	I	Ġ	CAS			100
6,22,20	GERRE WILLIAMSON		AUTO		g.		
/3	5501 OAK LAWÉ CIPAL GADLES FL 331576	I	DEALER	CAS			500
6,22,20	MONA MAPRILS						
14	8925 SW 6 1 CT PINECIPEST FL 33156	I	ATTOPNEY	CAS			100
DS-DE 43 /B- 44/4						1	1

DS-DE 13 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(5)	(7)	Γ	(8)	(9)	(10)	(11)	(12)
Date (6)	Full Name			1			
Sequence	(Last, Suffix, First, Middle) Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	1	Туре	Description	Amendment	Amount
6, 22,20	SHANNA NYE		PHOTOGRA-				
	12624 SUS 17 AVE	T	PHER				
10	MIAMI F2 33190	1	CAS	CAS			100
15				*			
625 20	COMENHOGINS						
1 7 0 0	17635 SW 83 CT						
	PALMETTO BAY	T	ATTERNES	CAS			100
16	FL 33157						
1 27 2	RIBERT POSS						
6,27,20	6701 Sw 94 ST						,
10	PINECREST	τ	RETILET	95			100
17	FZ 33156		-//-				, ,
6,22,20	THOMAS + CAPOLE						
	ABBOTT			<i>a</i> .			
/8	6871 SW128 ST	I	PETROD	CHE			75
10	PINECLEST FL 33156						
6,22,20	JOHN A ANA						
	STANHAM		MANAGNOG				
19	6430 SW 126ST RD PINECKET FL	T	CENSULTANT	CHE	= 1		1000
/ /	3315E						,000
6 25 20							
	6400 SW 123TERP						
20	MIAMI FL 33156	I	RETIRED	CAS			100
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DS-DE 13 (Rev. 11/13)

(1) Name <u></u>	NNA HOCHKAMMER		2) I.D. Number		
(3) Cover Perio	d <u>6 </u>	30,20	1) Page	of _	/.
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11)
6/15/20	MDW COMMUNICATIONS LLC 2001 WISCONSIN AVE NW SUITE ZOD WASHINGTON DC 20007	WEBSITE AND CHAPHOS.	CAN		2,326.00
6 B 12	PINECULAT PL 3356	QUALIFYING FEE	CAN		100,00
6/12/20	WEBELEST JOISO HIGHLAND MANDE DR. SUITE ZOO TAMPA PL 33610	DATA	CAN		261. 9
6 Bopo.	PARIASTY 15201	CONTRIBUTION SOFTWARE	CAW.		162.40
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CAMPAIGN TREASURER	S REPORT SUMMARY
Name Name DOY WEST SUBURBAN DQ Address (number and street) PINECRUST FL 33156 City, State, Zip Code	OFFICE USE ONLY
Check here if address has changed	(3) ID Number:
Check appropriate box(es): Candidate Office Sought: Councilled Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications)	MBER, SEAT / Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed
(5) Report	
Cover Period: From 5隻1 1 2020 To	5 131 1 2020 Report Type: 5
☐ Original ☐ Amendment ☐ Spe	cial Election Report
(6) Contributions This Report	(7) Expenditures This Report
Cash & Checks \$,	Monetary Expenditures \$,,
Loans \$,, Total Monetary \$, ,	Transfers to Office Account \$,,
In-Kind \$	Total Monetary \$, ,
	(8) Other Distributions 5
(9) TOTAL Monetary Contributions To Date \$,3,	(10) TOTAL Monetary Expenditures To Date \$, ,
It is a first degree misdemeanor for any per	ertification record (ss. 839.13, F.S.)
(Type name) ANA HochkAmmed. Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	(Type name) ANNA Hocitic Annu? Candidate Chairperson (only for PC and PTY)
Signature	Signature SEE REVERSE FOR INSTRUCTION

CAMPAIGN TREASURER'S	S REPORT SUMMARY				
Name (2) DOY WEST SUBJECTION DR Address (number and street) PARTES FL 33156 City, State, Zip Code Check here if address has changed (4) Check appropriate box(es): Candidate Office Sought: COUNCILME Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications)	Office Use ion vest Office of the Village Clerk MAY 0 5 2020 Guido H. Inguanzo, Jr. Village Clerk (3) ID Number:				
Cover Period: From 4 11 12020 To					
(6) Contributions This Report	(7) Expenditures This Report				
Cash & Checks \$,,	Monetary Expenditures \$,,				
Total Monetary \$,,	Office Account \$, Total Monetary \$,				
In-Kind \$,,	(8) Other Distributions \$, ,				
(9) TOTAL Monetary Contributions To Date \$,,	(10) TOTAL Monetary Expenditures To Date				
(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, cor					
(Type name) AWA Hocate Amm R Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	(Type name) HOUA HOUTKANNER Chairperson (only for PC and PTY)				
Signature	Signature				

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SEE REVERSE FOR INSTRUCTIONS

CAMPAIGN TREASURE	ER'S REPORT SUMMARY
Name DOH WEST SUBUCKAN DEST SUBUCKAN DES	Villappice fustion cyest Office of the Village Clerk APR 0 1 2029 Guido H. Inguanzo, Jr. Village Clerk (3) ID Number: Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed
Cover Period: From 3 / 1 / 2020 To	t Identifiers 3 / 3/ / 2628 Report Type:
☐ Original ☐ Amendment ☐ Sp (6) Contributions This Report Cash & Checks \$	(7) Expenditures This Report Monetary Expenditures \$
	(8) Other Distributions
(9) TOTAL Monetary Contributions To Date \$,	(10) TOTAL Monetary Expenditures To Date \$
(11) Cert It is a first degree misdemeanor for any person I certify that I have examined this report and it is true, correctly considered the correctly considered the correctly considered the correctly considered the certification of the correctly considered the certification of	on to falsify a public record (ss. 839.13, F.S.)

CAMPAIGN TREASURE	R'S REPORT SUMMARY			
(1) ANNA HOCHKAMMER Name (2) 10041 WEST SUBURBAN DR Address (number and street) PINECREST FL 33156. City, State, Zip Code Check here if address has changed (4) Check appropriate box(es): Candidate Office Sought: Council Me	MAR 0 9 2020 Guido H. Inguanzo, Jr. Village Clerk (3) ID Number:			
☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)	☐ Check here if PC or ECO has disbanded☐ Check here if PTY has disbanded☐ Check here if no other IE or EC reports will be filed			
Cover Period: From 2 / 1 2020 To	Identifiers 2 1 29 1 2026 Report Type: 2			
☐ Original ☐ Amendment ☐ Spe	cial Election Report			
(6) Contributions This Report Cash & Checks \$,,,	(7) Expenditures This Report Monetary Expenditures \$, , \(\cdot			
Loans \$,,	Transfers to Office Account \$, ,			
Total Monetary \$	Total Monetary \$, ,			
	(8) Other Distributions \$, ,			
(9) TOTAL Monetary Contributions To Date \$, 3 , <u>000</u> . <u> oo</u>	(10) TOTAL Monetary Expenditures To Date \$,,,			
(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) ANA Hochkammer ☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	(Type name) ANNA HOCHKAMMER Candidate Chairperson (only for PC and PTY)			
Signature	Signature			

	Instructions for Campaign Treasurer's Report Summary
(1)	Name: full name of the candidate, political committee, party executive committee, electioneering communications organization, or individual making an independent expenditure or electioneering communication.
(2)	Address: the full address or post office box, city, state, and zip code. □ Check the box if the address has changed since the last report filed.
(3)	ID Number: identification number assigned by the filing officer.
(4)	Check the appropriate box(es).
(5)	Report Identifiers Cover Period: the dates this report covers (i.e., From 1/1/15 To 1/31/55). Important: use the appropriate cover period dates as published by the filing officer. Report Type: refer to the filing officer's calendar of reporting dates for the correct codes to be used for each reporting period. If report is for a special election add "S" in front of the report code (i.e., SC2)
	 each reporting period. If report is for a <u>special election</u> add "S" in front of the report code (i.e., <u>SG3</u>). Check one of the appropriate boxes: Original: first report filed for this reporting period. Amendment: must summarize only contributions/fund transfers and expenditures/distributions being reported as additions or deletions. Read instructions for sequence numbers and amendment types on the back of Forms DS-DE 13A and 14A. Special Election Report: <u>Important</u>: once a special election report is filed, the entity is required to file all remaining reports due for the special election.
(6)	Contributions This Report: Cash and Checks: total amount for this reporting period. Loans: total amount for this reporting period. Total Monetary: sum of Cash and Checks and Loans. In-Kind: the fair market value of the in-kind contribution at the time it is given for this reporting period.
(7)	Expenditures This Report:
	Monetary Expenditures: total amount of monetary expenditures for this reporting period. Transfers to Office Account: total amount transferred to an office account by <u>elected</u> candidates only. Total Monetary: sum of Monetary Expenditures and Transfers to Office Account.
(8)	Other Distributions: the total amount of goods and services contributed to a candidate or other committee by a PC, ECO, or PTY.
(9)	TOTAL Monetary Contributions To Date: the amount of total monetary contributions to date. Candidates keep cumulative totals from the time the campaign depository is opened through the termination report.
(10)	TOTAL Monetary Expenditures To Date: the amount of total monetary expenditures to date. Candidates keep cumulative totals from the time the campaign depository is opened through the termination report.
(11)	Type or print the required officer's name and have them sign the report: Candidate report: treasurer and candidate must sign. PC report: treasurer and chairperson must sign. PTY report: treasurer and chairperson must sign. ECO report: organization's treasurer must sign. IE or EC report: individual must sign (this applies when an individual acts alone to make these expenditures) AMENDMENT REPORTS: An amendment report summary should summarize only
	contributions, expenditures, distributions, & fund transfers being reported as additions or deletions. Read the instructions for the sequence number & amendment type fields on the back of forms DS-DE 13, 14, 14A and 94.

CAMPAIGN TREASURER'S REPORT SUMMARY					
Name (2) DOG WEST SUBULBAN DR Address (number and street) FINE COUNTY FL 33156 City, State, Zip Code Check here if address has changed (4) Check appropriate box(es): Candidate Office Sought: County County	(3) ID-Number: Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed				
individual making electioneering communications) (5) Report Identifiers Cover Period: From 1 / 2020 To 1 / 3 / 2020 Report Type:					
☐ Original ☐ Amendment ☐ Spe	cial Election Report				
(6) Contributions This Report Cash & Checks \$	(7) Expenditures This Report Monetary Expenditures \$,, 65.64 Transfers to Office Account \$,, Total Monetary \$,, 65.64				
TII-KIIU	(8) Other Distributions \$,				
(9) TOTAL Monetary Contributions To Date \$, 3, <u>600</u> . <u>00</u>	(10) TOTAL Monetary Expenditures To Date \$,,,				
(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)					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ANNA Hochkammer (2) I.D. Number							
(3) Cover Period / / 2020through / 31 / 2020 (4) Page of							
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12)
1,3,20	ANNA HOCHKAMMER 10041 WELLBURBAN DE PINECRESTEL 33156	S	HONEMAKER	LOA			3,000
1 1							
1 1							
1 1							
1 1							*
1 1							
1 1							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES 1) Name (2) I.D. Number							
(3) Cover Perio	d through	31 0.	1) Page	of			
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11)		
1/21/20	HARLAND CLARKE 5800 NORTHWEST PKWY SAN ANTONIO, TX 78249	CITECKS.	CAN		65.64		
/ /							
//							
/ /							
/ /							
/ /							
/ /							
//							

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying

Village of Pinecrest Office of the Village Clerk

JAN 0 7 2020

Guido H. Inguanzo, Jr. Village Clerk

officer before opening the campaig	n account.					OFFICE	USE	ONLY
1. CHECK APPROPRIATE BOX(ES)):							
	iling to Change:	Treasurer	/Deputy	Depository		Office		Party
2. Name of Candidate (in this order:	First, Middle, Last)		•	ide post office b		A		zip
ANNA MARSH HOCHK	AMMER	code	1	LI WEST SU NECREST				
4. Telephone 5. E-mail	address		P//	VECICES 1	7 -	25/26		
(305) 335 7555 ahoch	mail. com		_					
6. Office sought (include district, circ	cuit, group number)		1	ididate for a <u>no</u>	npartis	an office	, checl	k if
COUNCILMENBER, SE	EAT /		applica	able: My intent is to	run as	a Write-Ir	ı candi	date.
8. If a candidate for a partisan office	e, check block and	fill in nam	e of party as	s applicable:	My inter	nt is to run	as a	
☐ Write-In ☐ No Party Affilia	ation				Par	ty cand	lidate.	
9. I have appointed the following p	erson to act as my	<u> </u>	ampaign Tre	asurer	Deputy	Treasure	r	
10. Name of Treasurer or Deputy Tre								
11. Mailing Address				12	2. Telepl	none		
10041 WEST SUBU						335 7	555	_
13. City 14. Co	bunty 15. $MI - DADE$	State 1	6. Zip Code	17. E-mail ac ahochka	Idress mme	re g	mai	1.com
18. I have designated the following bank as my Primary Depository Secondary Depository								
19. Name of Bank WELLS FARGO			20. Address 11765 SOUTH DIXIE HWY.					
_	22. County		23. State			24. Zip C	ode	
PINECREST	MAMI-DAT	IE	FL			37156	7	
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.								
25. Date		26. Sig	nature of Ca	ndidaté				
Jan 7. 2020		X	Me	479)				
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)								
I, ANNA HOCHICAMMER , do hereby accept the appointment (Please Print or Type Name)								
designated above as: Campaign Treasurer Deputy Treasurer.								
Jun 7, 2020 X								
Date Signature of Campaign Treasurer or Deputy Treasurer								

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)
(Please print or type)

OFFICE USE ONLY
Village of Pinecrest
Office of the Village Clerk

JAN 0 7 2023

Guido H. Inguanzo, Jr. Village Clerk

I, ANNA HOCHKAMMER	_ ,
candidate for the office of	_ ;
have been provided access to read and understand the requirements of	
Chapter 106, Florida Statutes.	
\mathcal{A} 1	
x Jan. 7, 2020	
Signature of Candidate Date	

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).