

# WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

Xiomara Pazos

Candidate's Name (Last, Suffix, First, Middle)  
OR Political Committee, CCE or Party Name

Identification Number (Assigned by Division  
of Elections)

P.O. Box 661193 Miami Springs, FL  
Address (Number and Street)

33266-1193 Dist. 6  
Office Sought (Include District, Circuit or  
Group Number)

City State Zip Code

Candidate

Committee of Continuous  
Existence

Check box if address has changed since last  
report.

Political Committee

Party Executive Committee

Check here if PC or CCE has DISBANDED  
and will no longer file reports.

## TYPE OF REPORT (Check Appropriate Box)

### QUARTERLY REPORTS

January

April

July

October

### PRIMARY ELECTION

32nd day prior

18th day prior

4th day prior

### GENERAL ELECTION

46th day prior

32nd day prior

18th day prior

4th day prior

TERMINATION REPORT

SPECIAL ELECTION

## NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

Jan-06 through April-06

Xiomara Pazos  
Signature

4-3-06  
Date

**SIGNATURES REQUIRED FOR:** **Candidates**  
Candidate, Campaign Treasurer or Deputy Treasurer (S. 106.07(5), F.S.)  
**Political Committees**  
Chairman, Campaign Treasurer or Deputy Treasurer (S. 106.07(5), F.S.)  
**Committees of Continuous Existence**  
Treasurer (S. 106.04(4)(c), F.S.)  
**Party Executive Committees**  
Treasurer or Chairman (S. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

MIAMI-DADE  
ELECTIONS

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RECEIVED

Professional Medical Transportation Corp.

P.O. Box 661193

Miami Springs, FL. 33266

*Maria Costa  
Election Dept.*

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ELECTIONS

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