## WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

**Id: 480** [1250293]

Submitted on:

10/12/2021 19:06:56 (eastern)

OFFICE USE ONLY

Name 443 Kel Ave			Office Sought Titusville, FL 32796			
		Ti				
Addre	ess	City		State	Zip Code	
Candidate	X Political Committee		Party Exe	cutive Committee		
NOTE: This form does not appl waiver) that no reportable						
Check here if address has	changed since last report.	X Chec		SBANDED and will no	o longer file	
TYPE OF REPORT	(Check Appropriate	Box and Co	mplete Applic	able Line beneatl	Box)	
MONTHLY REPORT	PRIMARY ELECTIO	N GE	NERAL ELECTIO	N OTHER F	REPORT TYPE	
Indicate report #	Indicate report #	Indicate G	report#	Indicate repor as applicable:		
a comment of particles	TERMINATION REP	PORT SP	ECIAL ELECTION	ı		
NOTIFICATION OF	NO ACTIVITY IN CAM	PAIGN ACCOU	INT FOR THE F	REPORTING PERIO	D OF	
NOTIFICATION OF	0.41.40001	PAIGN ACCOU	9/30/202		D OF	
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X X	9/1/2021  Signature  Signature  Candidates:	THROUGH	9/30/202	Date		