(Section 106.07(7), F.S.)			ONLINE SUBMISSION Id: 819 [1201793]			
			Submitted on:			
(PLEASE TYPE)			3/10/2020 08:29:56 (eastern) OFFICE USE ONLY			
David Scott Wo	orrells	Sc	nool Board, Dis	trict 4		
Name			Office Sought			
33 Little John Lane		Ro	Rockledge, FL 32955			
Address		City		State	Zip Code	
X Candidate	Political Committe	e	Party Executiv	ve Committee		
NOTE: This form does not apply waiver) that no reportable						
Check here if address has o	changed since last rep	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ck here if PC has DISB orts.	ANDED and will no	longer file	
X MONTHLY REPORT	PRIMARY ELEC	Indicat G	PECIAL ELECTION	Indicate report t as applicable:	type and #	
NOTIFICATION OF	NO ACTIVITY IN C	AMPAIGN ACCO	UNT FOR THE REP		OF	
	2/1/2020	THROUGH	2/29/2020			
x						
Signature			-0.0.	Date		
X						
Signature				Date		
REQUIRED SIGNATURES FOR:	Political Committe Chairman and C Party Executive C	es: Campaign Treasurer	or Deputy Treasurer (or Deputy Treasurer (s 2), F.S.)			
Except as noted above for an ECC received) the filing of the require	red report is waived.		fficer must be notified			

Т