## WAIVER OF REPORT

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

(PLEASE TYPE)

## ONLINE SUBMISSION Id: 623 [1247151]

Submitted on:

7/8/2021 18:44:29 (eastern) OFFICE USE ONLY

Oweda Genus Name		County Commissioner District 5  Office Sought				
Address		City			State	Zip Code
X Candidate	Political Committee		Party Executive	Comr	mittee	
NOTE: This form does not appl waiver) that no reportable	y to an electioneering communi contributions or expenditures w					
Check here if address has	changed since last report.	Check he reports.	ere if PC has DISBA	NDED	and will no	longer file
TYPE OF REPORT	(Check Appropriate Box	x and Comp	lete <mark>Applicabl</mark> e	Line	beneath	Box)
MONTHLY REPORT	PRIMARY ELECTION	GENER	RAL ELECTION		OTHER RE	PORT TYPE
Indicate report #	Indicate report #	Indicate re	port#		ate report	type and #
NOTIFICATION OF	TERMINATION REPORT		AL ELECTION	RTIN	G PERIOT	OF
	C / I / O O O I		6/30/2021		0,2,00	
x						
Signature			1.00 m	ι	Date	
X						
5		\$ <del></del>	I	Date		
REQUIRED SIGNATURES FOR:	Candidates: Candidate and Campaign	Treasurer or D	Deputy Treasurer (s.	106.0	7(5), F.S.)	
	Political Committees: Chairman and Campaign	Treasurer or D	eputy Treasurer (s.	106.07	7(5), F.S.)	
	Party Executive Committee Treasurer and Chairman		F.S.)			
Except as noted above for an ECC received) the filing of the requi	O, in any reporting period when ired report is waived. However, reporting date that no	the filing office	r must be notified in			