WAIVER OF REPORT (Section 106.07(7), F.S.)			ONLINE SUBMISSION Id: 449 [1194481] Submitted on:			
						(PLEASE TYPE)
Sandy B Counts	5	Sc	nool Board Dist	trict 4		
Name		<u>1</u> 1 (1)	Office Sought			
P O Box 375		Но	Homosassa Springs, FL 34447			
Address		City		State	Zip Code	
X Candidate	Political Committee	e	Party Execut	ive Committee		
NOTE: This form does not apply waiver) that no reportable						
Check here if address has o	changed since last rep	Contraction of the second s	ck here if PC has DISE orts.	BANDED and will no	longer file	
Indicate report # M	Indicate report # P TERMINATION I	G	e report #	Indicate report as applicable:	type and #	
NOTIFICATION OF	NO ACTIVITY IN C	AMPAIGN ACCO	UNT FOR THE REP		OF	
	10/1/2019	THROUGH	10/31/2019	9		
x						
Signature			-0. 0	Date		
X						
Signature			-0. 8-	Date		
REQUIRED SIGNATURES FOR:	Political Committee Chairman and C Party Executive Co	es: ampaign Treasurer	or Deputy Treasurer or Deputy Treasurer (
Except as noted above for an ECC received) the filing of the requi), in any reporting peri red report is waived. H	od when there has l	been no activity in the fficer must be notified			