## WAIVER OF REPORT

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

(PLEASE TYPE)

## ONLINE SUBMISSION

**Id: 461** [1230601]

Submitted on:

9/11/2020 16:42:33 (eastern)

OFFICE USE ONLY

Theressa Amanda Foster West  Name		Mosquito Control Board - Seat 2  Office Sought	
Address		City	State Zip Code
X Candidate	Political Committee	Party Executiv	ve Committee
		cations organization (ECO). An E were made during the reporting per	
Check here if address has	changed since last report.	Check here if PC has DISB reports.	ANDED and will no longer file
TYPE OF REPORT	(Check Appropriate Box	x and Complete Applicabl	e Line beneath Box)
MONTHLY REPORT	PRIMARY ELECTION	X GENERAL ELECTION	OTHER REPORT TYPE
Indicate report #	Indicate report #	Indicate report #	Indicate report type and #
м	P	G_G2	as applicable:
NOTIFICATION OF	TERMINATION REPORT	SPECIAL ELECTION  SN ACCOUNT FOR THE REP	ORTING PERIOD OF
	8/22/2020 THR	OUGH 9/4/2020	
x	-	5.405 Avr 5.30	
Signature		-0 %	Date
X			
Signature		-2 29	Date
QUIRED SIGNATURES FOR:		Treasurer or Deputy Treasurer (	s. 106.07(5), F.S.)
		Treasurer or Deputy Treasurer (s	s. 106.07(5), F.S.)
	Party Executive Committee Treasurer and Chairman		
		there has been no activity in the a the filing officer must be notified i report is being filed.	