WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 461 [1221763]

Submitted on:

7/31/2020 16:00:30 (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
		ications 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 Bo	x and Complete Applicabl	e Line beneath Box)
MONTHLY REPORT	X PRIMARY ELECTION	GENERAL ELECTION	OTHER REPORT TYPE
Indicate report #	Indicate report #	Indicate report #	Indicate report type and # as applicable:
NOTIFICATION OF	TERMINATION REPORT	SPECIAL ELECTION	OPTING PERIOD OF
NothineAttowor	T (10 (0000	OUGH 7/24/2020	OKTING PERIOD OF
X	TIIK		
Signature			Date
X			
Signature			Date
QUIRED SIGNATURES FOR:		n Treasurer or Deputy Treasurer (s. 108.07(5), F.S.)
	Political Committees: Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.) Party Executive Committees: Treasurer and Chairman (s. 106.29(2), F.S.)		
	O, in any reporting period when red report is waived. However,	there has been no activity in the a the filing officer must be notified in report is being filed.	