WAIVER OF REPORT (Section 106.07(7), F.S.) (PLEASE TYPE)			ONLINE SUBMISSION Id: 501 [1105591]			
			Submitted on: 5/23/2016 13:45:34 (eastern) OFFICE USE ONLY			
						Carla Cran
Name			Office Sought			
460 Newport Dr.		Or	Orange Park, FL 32073			
Address		City		State	Zip Code	
X Candidate	Political Committe	e	Party Executiv	ve Committee		
NOTE: This form does not appl waiver) that no reportable						
Check here if address has	changed since last rep		ck here if PC has DISB orts.	ANDED and will no	longer file	
X MONTHLY REPORT	PRIMARY ELEC	Indica G	PECIAL ELECTION	Indicate report as applicable:	type and #	
NOTIFICATION OF	NO ACTIVITY IN C	AMPAIGN ACCO	UNT FOR THE REP		OF	
	4/1/2016	THROUGH	4/30/2016			
x						
Signature			-0 0	Date		
x						
Signature			-0. 0	Date		
REQUIRED SIGNATURES FOR:	Political Committe Chairman and C Party Executive Co	es: Campaign Treasurer	r or Deputy Treasurer (or Deputy Treasurer (s (2), F.S.)			
Except as noted above for an ECC received) the filing of the requi	red report is waived.		officer must be notified i			