## WAIVER OF REPORT

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

(PLEASE TYPE)

## ONLINE SUBMISSION

**Id: 348** [1126116]

Submitted on:

9/9/2016 19:19:09 (eastern) OFFICE USE ONLY

Florence Fruehan Name  15 Flagship Dr  Address		East Flagler Mosquito Control District S  Office Sought  Palm Coast, Fl							
						City		State	Zip Code
						X Candidate	Party Executive Committee		
			ly to an electioneering communic contributions or expenditures we						
Check here if address has	changed since last report.	Check he reports.	ere if PC has DISBA	ANDED and will no	longer file				
TYPE OF REPORT	(Check Appropriate Box	and Comp	lete Applicable	e Line beneath	Box)				
MONTHLY REPORT	PRIMARY ELECTION	X GENER	RAL ELECTION	OTHER R	EPORT TYPE				
Indicate report #	Indicate report #	Indicate rep	port#	Indicate report	type and #				
М	P	GG1	National Control of the Control of t	as applicable:					
NOTIFICATION OF	NO ACTIVITY IN CAMPAIG		AL ELECTION	ORTING PERIO	D OF				
	8/26/2016 THRO	OUGH	9/2/2016						
x									
Signature		₹30	10	Date					
X			6K						
Signature				Date					
EQUIRED SIGNATURES FOR:	Candidates: Candidate and Campaign Political Committees: Chairman and Campaign								
	Party Executive Committees: Treasurer and Chairman (s. 106.29(2), F.S.)								
	ACCUSAGE STREET, STATE OF THE S	Maria Control Control	110000		expended or				