(Section 106.07(7), F.S.)			ONLINE SUBMISSION Id: 458 [1232013]			
			Submitted on: 9/24/2020 21:51:40 (eastern)			
(PLEASE TYPE)			OFFICE USE ONLY			
Donald O'Brien			County Commission District 5			
Name			Office Sought			
42 Bickford Dr.			Palm Coast, Fl 32137			
Address		0	City		State	Zip Code
X Candidate	Political Committe	e		Party Execut	ive Committee	
NOTE: This form does not appl waiver) that no reportable						
Check here if address has	changed since last rep	oort.	Check report	here if PC has DISE s.	BANDED and will no	o longer file
MONTHLY REPORT	PRIMARY ELEC	in G	dicate r G3	report # - CIAL ELECTION	Indicate report as applicable:	
NOTIFICATION OF	NO ACTIVITY IN C	AMPAIGN A	ccou	NT FOR THE REP	PORTING PERIO	DOF
	9/5/2020	THROUG	н	9/18/2020		
-						
X						
Signature					Date	
X						
Signature				8 <del></del>	Date	
REQUIRED SIGNATURES FOR:	Political Committe	es: Campaign Treas ommittees:	surer or	r Deputy Treasurer Deputy Treasurer (		
Except as noted above for an ECC received) the filing of the requi	D, in any reporting per red report is waived.	iod when there	has bee	en no activity in the cer must be notified		