WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 623 [1283560]

Submitted on:

10/11/2022 17:21:09 (eastern)

OFFICE USE ONLY

Name		Office Sought				
5 Lake Success	s Dr	Palı	m Coast,	FL 32	137	
Addre	ess	City			State	Zip Code
Candidate	X Political Committee		Party Ex	ecutive Cor	mmittee	
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Check here if address has	changed since last report.	Check	here if PC has s.	DISBANDE	D and will no	longer file
TYPE OF REPORT	(Check Appropriate Box	and Com	plete Appli	cable Lin	ie beneath	Box)
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