## WAIVER OF REPORT

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

(PLEASE TYPE)

## ONLINE SUBMISSION

**Id: 172** [1178947]

Submitted on:

11/2/2018 14:13:25 (eastern)

OFFICE USE ONLY

-	Elect Barbara Sa	nder <b>s</b> ol		F-17		
Po Box 157  Address			Office Sought Apalachicoal, FL 32320			
		Apa				
		City		State	Zip Code	
Candidate	X Political Committee		Party Executiv	re Committee		
NOTE: This form does not appl waiver) that no reportable	y to an electioneering commun contributions or expenditures w					
Check here if address has	changed since last report.	Chec	k here if PC has DISB orts.	ANDED and will no	longer file	
TYPE OF REPORT	(Check Appropriate Bo	x and Co	mplete Applicabl	e Line beneath	Box)	
MONTHLY REPORT	PRIMARY ELECTION	X GE	NERAL ELECTION	OTHER R	EPORT TYPE	
Indicate report #	Indicate report #		e report#	Indicate report	type and #	
M	P	G		as applicable:		
NOTIFICATION OF	NO ACTIVITY IN CAMPAIG		UNT FOR THE REP	ORTING PERIO	O OF	
	10/20/2018 THR	OUGH	11/1/2018			
X						
Signature				Date		
X			<i>a</i>			
Signature			- X - XX	Date		
EQUIRED SIGNATURES FOR:	Candidates: Candidate and Campaign	n Treasurer	or Deputy Treasurer (	s. 106.07(5), F.S.)		
	Political Committees: Chairman and Campaign		or Deputy Treasurer (s	. 106.07(5), F.S.)		
	Party Executive Committee Treasurer and Chairman		2), F.S.)			
Except as noted above for an ECC received) the filing of the requi	D, in any reporting period when red report is waived. However, reporting date that no	the filing of	fficer must be notified i	THE RESERVE TO A STATE OF THE PARTY OF THE P		