WAIVER OF REPORT (Section 106.07(7), F.S.) (PLEASE TYPE)			ONLINE SUBMISSION Id: 172 [1149360] Submitted on: 2/11/2018 11:19:30 (eastern) OFFICE USE ONLY			
Committee to	Elect Barbar	a Sandersol	itical Committ.	cee		
Name			Office Sought			
Po Box 157		Ap	Apalachicoal, FL 32320			
Address		City		State	Zip Code	
Candidate	Political Committee		Party Executi	ve Committee		
NOTE: This form does not apply waiver) that no reportable	contributions or expend	litures were made o	luring the reporting pe	eriod (s. 106.0703(6), F.S.).	
Check here if address has changed since last report.			Check here if PC has DISBANDED and will no longer file reports.			
Indicate report # M	Indicate report # P TERMINATION R	G	ECIAL ELECTION	Indicate report as applicable:	type and #	
NOTIFICATION OF	NO ACTIVITY IN CA	THROUGH	UNT FOR THE REF 1/31/2018	PORTING PERIO	DOF	
X Signature				Date		
X						
Signature			12 - 10-	Date		
REQUIRED SIGNATURES FOR:	Political Committee Chairman and Ca Party Executive Co	s: ampaign Treasurer	or Deputy Treasurer (or Deputy Treasurer (2), F.S.)			
Except as noted above for an ECC received) the filing of the requi	red report is waived. H		fficer must be notified			