WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 172 [1169206]

Submitted on:

8/23/2018 14:30:25 (eastern)

OFFICE USE ONLY

	Elect Barbara Sa	nder s ol		E27 7577		
Po Box 157 Address			Office Sought Apalachicoal, FL 32320			
		Apa				
		City		State	Zip Code	
Candidate	X Political Committee		Party Executiv	ve Committee		
NOTE: This form does not appl waiver) that no reportable	y to an electioneering commun contributions or expenditures v					
Check here if address has	changed since last report.	Chec	k here if PC has DISB rts.	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	GE	NERAL ELECTION	OTHER R	EPORT TYPE	
Indicate report #	Indicate report #	Indicate	report#	Indicate report	type and #	
M	P	G		as applicable:		
NOTIFICATION OF	NO ACTIVITY IN CAMPAI			ORTING PERIO	D OF	
	8/11/2018 THR	OUGH	8/23/2018			
X						
Signature				Date		
X						
Signature				Date		
EQUIRED SIGNATURES FOR:	Candidates: Candidate and Campaign	n Treasurer	or Deputy Treasurer (s. 106.07(5), F.S.)		
	Political Committees: Chairman and Campaign	Treasurer o	or Deputy Treasurer (s	s. 106.07(5), F.S.)		
	Party Executive Committees: Treasurer and Chairman (s. 106.29(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	ficer must be notified	A COLUMN TO A COLU		