(Section 106.07(7), F.S.) (PLEASE TYPE)		ONLINE SUBMISSION Id: 200 [1187370] Submitted on: 4/30/2019 10:02:27 (eastern) OFFICE USE ONLY			
Shirley G. Knight	Suj	pervisor of Ele	ctions		
Name	12 65	Office Sought			
4150 Shade Farm Road	Qu	Quincy, FL 32352			
Address	City		State	Zip Code	
X Candidate Political Com	imittee	Party Executiv	e Committee		
NOTE: This form does not apply to an electioned waiver) that no reportable contributions or e	expenditures were made o		iod (s. 106.0703(6),	F.S.).	
Indicate report # Indicate report MP TERMINAT	G	e report #	Indicate report ty as applicable:	ype and #	
NOTIFICATION OF NO ACTIVITY		UNT FOR THE REP 4/30/2019	ORTING PERIOD	OF	
X		-8 0	Date		
X					
Signature REQUIRED SIGNATURES FOR: Candidates: Candidate Political Com Chairman : Party Executi	and Campaign Treasurer mittees: and Campaign Treasurer ve Committees: and Chairman (s. 106.29(	or Deputy Treasurer (s			
Except as noted above for an ECO, in any reporting received) the filing of the required report is wait	g period when there has t	ficer must be notified i			