(Section 106.07(7), F.S.)			ONLINE SUBMISSION Id: 241 [1199937] Submitted on:			
(PLEASE TYPE)			2/10/2020 21:55:05 (eastern)			
			OFFICE USE ONLY			
Tyrone Smith		Scl	nool Board Dist	rict 5		
Name			Office Sought			
878 Arlington Circle		Qu	Quincy, FL 32351			
Address		City		State	Zip Code	
X Candidate	Political Committe	e	Party Executi	ve Committee		
NOTE: This form does not appl waiver) that no reportable						
Check here if address has	changed since last rep	Contraction of the second s	ok here if PC has DISE orts.	ANDED and will no	longer file	
MONTHLY REPORT	PRIMARY ELEC	Indicat G	PECIAL ELECTION	Indicate report as applicable:	type and #	
NOTIFICATION OF	NO ACTIVITY IN C	AMPAIGN ACCO	UNT FOR THE REP		OF	
	1/1/2020	THROUGH	1/31/2020			
			-			
X						
Signature				Date		
X			-a a			
Signature				Date		
REQUIRED SIGNATURES FOR:	Political Committe Chairman and C Party Executive C	es: Campaign Treasurer	or Deputy Treasurer (			
Except as noted above for an ECC received) the filing of the requi	), in any reporting per red report is <mark>wa</mark> ived.	iod when there has t	been no activity in the fficer must be notified			