## WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 250 [1204814]

Submitted on:

4/13/2020 19:48:48 (eastern)

OFFICE USE ONLY

Shelanda Shaw  Name  1356 St.Hebron Road  Address		Office Sought  Quincy, FL 32352							
						City		State Zip Code	
						X Candidate	Political Committee		Party Executi
		NOTE: This form does not appl waiver) that no reportable	y to an electioneering communi contributions or expenditures w						
Check here if address has	changed since last report.	Check he reports.	re if PC has DISB	ANDED and will no	longer file				
TYPE OF REPORT	(Check Appropriate Bo	x and Comp	lete Applicabl	le Line beneath	Box)				
MONTHLY REPORT PRIMARY ELECTION		GENER	AL ELECTION	OTHER R	OTHER REPORT TYPE				
Indicate report #	Indicate report # Indicate report type and # as applicable:								
NOTIFICATION OF	TERMINATION REPORT		AL ELECTION	ORTING PERIO	D OF				
	2 /1 /22 2		3/31/2020						
x									
5		0.	Date						
X									
S		Date							
EQUIRED SIGNATURES FOR:	Candidates: Candidate and Campaign	Treasurer or D	eputy Treasurer (	(s. 108.07(5), F.S.)					
	Political Committees: Chairman and Campaign Party Executive Committee	s:		s. 106.07(5), F.S.)					
Except as noted above for an ECC received) the filing of the requi	Treasurer and Chairman  O, in any reporting period when red report is waived. However, reporting date that no	there has been the filing office	no activity in the must be notified						