WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION 1d: 157 [1221531]

Submitted on:

7/31/2020 11:24:17 (eastern)

OFFICE USE ONLY

Name 3746 Ft. Keis Ave. Address		Hendry Hospital Board Dist 3 Office Sought Ft. Denaud, FL 33935			
				City	State Zip Code
				X Candidate NOTE: This form does not appl	
		Check here if address has	contributions or expenditures w changed since last report.		SBANDED and will no longer file
TYPE OF REPORT	(Check Appropriate Box	x and Complete Applica	ble Line beneath Box)		
MONTHLY REPORT	X PRIMARY ELECTION	GENERAL ELECTION	OTHER REPORT TYPE		
Indicate report #	Indicate report #	Indicate report #	Indicate report type and # as applicable:		
NOTIFICATION OF	TERMINATION REPORT	SPECIAL ELECTION	EDODTING DEDICA OF		
NOTIFICATION OF	7/18/2020 THE	OUGH 7/24/2020			
X	THE				
Signature			Date		
X					
Signature			Date		
EQUIRED SIGNATURES FOR:	Political Committees:				
		there has been no activity in the filing officer must be notified	ne account (no funds expended or ed in writing on the prescribed		