WAIVER OF REPORT (Section 106.07(7), F.S.)			ONLINE SUBMISSION Id: 473 [1206048] Submitted on:			
(PLEASE TYPE)			5/6/2020 19:55:13 (eastern) OFFICE USE ONLY			
Shirley Anders	son	Su	pervisor of Ele	ctions		
Name			Office Sought			
11249 Riddle Drive		Sp	Spring Hill, FL 34609			
Address		City	-	State	Zip Code	
X Candidate	Political Committe	e	Party Executiv	ve Committee		
NOTE: This form does not appl waiver) that no reportable						
Check here if address has	changed since last rep	A DESCRIPTION OF THE REPORT OF	ck here if PC has DISB orts.	ANDED and will no	longer file	
X 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	
	4/1/2020	THROUGH	4/30/2020			
x						
Signature			-0 0-	Date		
x						
Signature			Date			
REQUIRED SIGNATURES FOR:	Political Committe Chairman and C Party Executive Co	es: Campaign Treasurer	or Deputy Treasurer (or Deputy Treasurer (s (2), F.S.)			
Except as noted above for an ECC received) the filing of the requi	red report is waived.		fficer must be notified i			

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