WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 448 [1255773]

Submitted on:
2/26/2022 17:10:08 (eastern)
OFFICE USE ONLY

William P. Cooney Deat 7 Name 245 Holly Rd. Address		Indian River County Hospital District - Office Sought Vero Beach, Fl 32963			
				City	State Zip Code
				X Candidate	Political Committee
					. An ECO must file a report (not a ing period (s. 106.0703(6), F.S.).
Check here if address has	changed since last report.	Check here if PC has reports.	DISBANDED and will no longer file		
TYPE OF REPORT	(Check Appropriate Box	x and Complete Appl	icable Line beneath Box)		
X MONTHLY REPORT	PRIMARY ELECTION	GENERAL ELECT	OTHER REPORT TYPE		
Indicate report #	Indicate report #	Indicate report #	Indicate report type and # as applicable:		
NOTIFICATION OF	TERMINATION REPORT				
	2/1/2022 THR	OUGH 2/28/20	022		
x					
Signature			Date		
X					
Signature		2 0	Date		
EQUIRED SIGNATURES FOR:		n Treasurer or Deputy Treas	surer (s. 108.07(5), F.S.)		
	Party Executive Committee		surer (s. 106.07(5), F.S.)		
	red report is waived. However,	there has been no activity i	in the account (no funds expended or otified in writing on the prescribed		