## WAIVER OF REPORT

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

(PLEASE TYPE)

## ONLINE SUBMISSION

**Id: 299** [1141683]

Submitted on:

4/11/2017 22:31:34 (eastern)

OFFICE USE ONLY

Name			Office Sought				
PO Box 69321		Vei	o Beach,	FL 3	2969		
Addre	ess	City			State	Zip Code	
Candidate	X Political Committee	e	Party Ex	ecutive C	Committee		
NOTE: This form does not appl waiver) that no reportable							
Check here if address has	changed since last rep	ort. Check	k here if PC has rts.	DISBANI	DED and will no	longer file	
TYPE OF REPORT	(Check Appropri	ate Box and Co	mplete Appli	cable L	ine beneath	Box)	
MONTHLY REPORT	PRIMARY ELEC	TION GEN	NERAL ELECTION	<u>N</u>	OTHER R	EPORT TYPE	
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