(Section 106.07(7), F.S.)			ONLINE SUBMISSION Id: 309 [1228043]			
			Submitted on:			
(PLEASE TYPE)			8/27/2020 19:24:06 (eastern) OFFICE USE ONLY			
Gail Ann Ward		Su	pervisor of Ele	ections		
Name 4627 Meadowview Road		<u>1</u> 2 01	Office Sought Marianna, FL 32446			
		Ма				
Address		City		State	Zip Code	
X Candidate	Political Committee	e	Party Executi	ive Committee		
NOTE: This form does not appl waiver) that no reportable						
Check here if address has	changed since last rep		ck here if PC has DISE orts.	3ANDED and will no	longer file	
Indicate report # M	Indicate report # P TERMINATION I	G_G1	e report #	Indicate report as applicable:	type and #	
NOTIFICATION OF					OF	
NOTIFICATION OF	8/14/2020		8/21/2020	OKTING PERIO	501	
	0/14/2020	THROUGH	0/21/2020			
X						
Signature			5.6 V.C	Date		
X						
Signature			-1 0-	Date		
EQUIRED SIGNATURES FOR:	Political Committee	es: Campaign Treasurer	or Deputy Treasurer or Deputy Treasurer (
Except as noted above for an ECC received) the filing of the requi	Treasurer and C , in any reporting peri red report is waived. H	hairman (s. 106.29 od when there has l	been no activity in the officer must be notified			