(Section 106.07(7), F.S.)				SUBMIS: [1196003]	SION	
			Submitted on:			
(PLEASE TYPE)			12/9/2019 21:02:27 (eastern) OFFICE USE ONLY			
Gail Ann Ward		Suj	pervisor of Ele	ections		
Name 4627 Meadowview Road		92 B	Office Sought Marianna, FL 32446			
		Ma				
Address		City		State	Zip Code	
X Candidate	Political Committee		Party Executi	ve Committee		
NOTE: This form does not apply waiver) that no reportable						
Check here if address has o	changed since last repo		ok here if PC has DISE orts.	ANDED and will no	longer file	
Indicate report # M11 M	Indicate report # P TERMINATION R	G	e report #	Indicate report as applicable:	type and #	
					OF	
Notification of	11/1/2019	THROUGH	11/30/2019			
		IIIKOUGII _				
X			-0. 0			
Signature				Date		
X			a a <u></u>	12454.00		
Signature				Date		
REQUIRED SIGNATURES FOR:	Candidates: Candidate and Ca Political Committee		or Deputy Treasurer ((s. 108.07(5), F.S.)		
	Party Executive Cor	nmittees:	or Deputy Treasurer (s. 106.07(5), F.S.)		
Except as noted above for an ECC received) the filing of the requi), in any reporting perio red report is waived. He		peen no activity in the fficer must be notified			