WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 309 [1193019]

Submitted on:

10/9/2019 07:43:33 (eastern)

OFFICE USE ONLY

Gail Ann Ward Name 4627 Meadowview Road Address		Supervisor of Elections Office Sought Marianna, FL 32446							
						City		State Zip Code	
						X Candidate	Political Committee		Party Executiv
		NOTE: This form does not appl waiver) that no reportable	y to an electioneering communi contributions or expenditures w						
Check here if address has	changed since last report.	Check here reports.	if PC has DISB	ANDED and will no	longer file				
TYPE OF REPORT	(Check Appropriate Bo	x and Comple	te Applicable	e Line beneath	Box)				
MONTHLY REPORT PRIMARY ELECTION		GENERAL ELECTION		OTHER REPORT TYPE					
Indicate report # Indicate report # P		Indicate repo	Indicate report # Indicate report type and # as applicable:						
NOTIFICATION OF	TERMINATION REPORT		ELECTION	ORTING PERIO	D OF				
	0.41.40010		/30/2019						
x			<u> </u>	=					
S		Date							
X									
s		Date							
EQUIRED SIGNATURES FOR:	Candidates: Candidate and Campaign	n Treasurer or De	puty Treasurer (s	s. 108.07(5), F.S.)					
	Political Committees: Chairman and Campaign Party Executive Committee Treasurer and Chairman	s:		. 106.07(5), F.S.)					
Except as noted above for an ECC received) the filing of the requi		there has been no the filing officer n	o activity in the a nust be notified i						