## WAIVER OF REPORT

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

(PLEASE TYPE)

## ONLINE SUBMISSION

**Id: 309** [1211002]

Submitted on:

6/16/2020 22:30:04 (eastern)

OFFICE USE ONLY

Gail Ann Ward  Name  4627 Meadowview Road  Address		Supervisor of Elections  Office Sought  Marianna, FL 32446								
						City		State	State Zip Code	
						X Candidate	Political Committee		Party Executiv	re Committee
		NOTE: This form does not appl waiver) that no reportable	y to an electioneering commun contributions or expenditures w							
Check here if address has	changed since last report.	Check	here if PC has DISB. ts.	ANDED and will no	longer file					
TYPE OF REPORT	(Check Appropriate Bo	x and Cor	nplete Applicable	e Line beneath	Box)					
MONTHLY REPORT X PRIMARY ELECTION		GEN	GENERAL ELECTION OTI		THER REPORT TYPE					
Indicate report #	Indicate report #	Indicate G	report #	Indicate report as applicable:	type and #					
NOTIFICATION OF	TERMINATION REPORT		CIAL ELECTION	ORTING PERIO	O OF					
	6/1/2020 THR	OUGH	6/12/2020							
x										
Signature			() <del></del>	Date						
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s		Date								
EQUIRED SIGNATURES FOR:	Candidates: Candidate and Campaign Political Committees:	n Treasurer o	or Deputy Treasurer (	s. 108.07(5), F.S.)						
	Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)  Party Executive Committees: Treasurer and Chairman (s. 106.29(2), F.S.)									
Except as noted above for an ECC received) the filing of the requi		there has be the filing off	een no activity in the a icer must be notified i							