

WAIVER OF REPORT

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

(PLEASE TYPE)

*14OCT10PM0308 SOE LEE CO FI

OFFICE USE ONLY

Nancy Marie Mc Govern
Name

Lee Memorial Health Sys. DIST # 2
Office Sought

785 S. ENTRADA DRIVE
Address

PORT MYERS FL 33919
City State Zip Code

Candidate

Political Committee

Electioneering Communications Organization

Party Executive Committee

Check here if address has changed since last report.

Check here if PC or ECO has DISBANDED and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box and Complete Applicable Line beneath Box)

MONTHLY REPORT

PRIMARY ELECTION

GENERAL ELECTION

OTHER REPORT TYPE

Indicate report #

M _____

Indicate report #

P _____

Indicate report #

G 4

Indicate report type and # as applicable:

TERMINATION REPORT

SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

09/27/2014 THROUGH 10/03/2014

X

[Signature]

Signature

10/3/2014

Date

X

[Signature]

Signature

10/3/2014

Date

REQUIRED SIGNATURES FOR:

Candidates:

Candidate and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Political Committees:

Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Electioneering Communications Organizations:

Treasurer (s. 106.0703(4)(c), F.S.)

Party Executive Committees:

Treasurer and Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.