| WAIVER OF REPORT (Section 106.07(7), F.S.) (PLEASE TYPE) | | | ONLINE SUBMISSION Id: 609 [1230883] Submitted on: 9/14/2020 12:57:01 (eastern) OFFICE USE ONLY | | | |
|--|---|--|--|---|-----------|--|
| Arthur Kirby | | | Piney Z CDD Supervisor Seat 4 | | | |
| Name | | | Office Sought | | | |
| 905 Piney Z Plantation Rd | | Та | Tallahassee, FL 32311 | | | |
| Address | | City | | State | Zip Code | |
| X Candidate | Political Committee | • | Party Executi | ive Committee | | |
| NOTE: This form does not apply waiver) that no reportable | contributions or expen | ditures were made | | eriod (s. 106.0703(6 |), F.S.). | |
| TYPE OF REPORT | (Check Appropri | | orts. Implete Applicab | le Line beneath | Box) | |
| MONTHLY REPORT | PRIMARY ELEC | Indicat G | PECIAL ELECTION | X <u>OTHER R</u> Indicate report as applicable: 20G2 | | |
| | NO ACTIVITY IN C/ 8/22/2020 | AMPAIGN ACCO | UNT FOR THE REF 9/4/2020 | PORTING PERIO | OF | |
| X Signature | | | -0 0 | Date | | |
| X | | | e c | 2.4 | | |
| REQUIRED SIGNATURES FOR: Except as noted above for an ECC received) the filing of the requir | Political Committee Chairman and C Party Executive Co Treasurer and C), in any reporting perior red report is waived. | es: ampaign Treasurer ommittees: hairman (s. 106.29) od when there has I | peen no activity in the fficer must be notified | s. 106.07(5), F.S.) account (no funds e | | |