WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 514 [1173127]

Submitted on:

9/20/2018 12:15:35 (eastern)

OFFICE USE ONLY

Name			Office Sought				
8489 Cabin Hil	ll Road	Та	llassee,	FL	32311		
Addre	ess	City			State	Zip Code	
(6.19.10)	William Control	,				8200 88 1000	
Candidate	X Political Committee		Party 8	Executi	ve Committee		
NOTE: This form does not appl waiver) that no reportable							
Check here if address has	changed since last repo	100000000000000000000000000000000000000	ck here if PC ha orts.	s DISB	3ANDED and will n	o longer file	
TYPE OF REPORT	(Check Appropria	te Box and Co	omplete App	licabl	le Line beneat	h Box)	
MONTHLY REPORT	PRIMARY ELECT	ION X GE	ENERAL ELECT	TION	OTHER F	REPORT TYPE	
Indicate report #	Indicate report #	Indica	te report#		Indicate repor	t type and #	
М	Р	_G G2			as applicable:		
NOTIFICATION OF	NO ACTIVITY IN CA		OUNT FOR TH		ORTING PERIO	D OF	
	9/1/2018	THROUGH	9/14/2	018			
X							
Signature			-0 10-		Date		
X							
Signature			-0.00		Date		
EQUIRED SIGNATURES FOR:	Candidates: Candidate and Ca	ampaign Treasure	r or Deputy Trea	ssurer ((s. 108.07(5), F.S.)	(
	Political Committees Chairman and Ca		or Deputy Trea	surer (s. 106.07(5), F.S.)		
	Darty Executive Con	nmittees.					
	Party Executive Con Treasurer and Ch	airman (s. 106.29	(2), F.S.)				