WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 239 [1162302]

Submitted on:

7/24/2018 08:41:33 (eastern)

OFFICE USE ONLY

Name 13 NE 3rd St Address		County Commission Dist. 4 Office Sought Chiefland, FL 32626							
						City	City State Zip		
						X Candidate	Political Committee		Party Executiv
		NOTE: This form does not appl waiver) that no reportable	ly to an electioneering communi contributions or expenditures w						
Check here if address has	changed since last report.	Check h	nere if PC has DISBA	ANDED and will no	longer file				
TYPE OF REPORT	(Check Appropriate Box	x and Com	plete Applicable	e Line beneath	Box)				
MONTHLY REPORT PRIMARY ELECTION		GENERAL ELECTION OTHER REPORT TYPE							
Indicate report #	Indicate report #	Indicate re	eport#	Indicate report as applicable:	type and #				
NOTIFICATION OF	TERMINATION REPORT		IT FOR THE REP	ORTING PERIO	OF				
	7/7/2018 THR	OUGH	7/20/2018						
X									
Signature			(-	Date					
X									
Signature		-02	Date						
QUIRED SIGNATURES FOR:	Candidates: Candidate and Campaign Political Committees:								
	Chairman and Campaign	Treasurer or							
	Chairman and Campaign Party Executive Committee Treasurer and Chairman	s:							