(Section 106.07(7), F.S.) (PLEASE TYPE)		4	ONLINE SUBMISSION Id: 276 [1281689] Submitted on: 9/20/2022 22:09:39 (eastern)			
			OFFICE USE ONLY			
James Allen		Pr	operty Appraise	er		
Name		22 (1)	Office Sought			
8790 NW 77th Pl		Ch	Chiefland, FL 32626			
Address		City		State	Zip Code	
X Candidate	Political Committee	•	Party Executi	ive Commi <mark>tte</mark> e		
NOTE: This form does not appl waiver) that no reportable						
Check here if address has	changed since last rep		ck here if PC has DISE orts.	3ANDED and will no	longer file	
MONTHLY REPORT	PRIMARY ELEC	Indicat G	PECIAL ELECTION	Indicate report as applicable: TRP	type and #	
NOTIFICATION OF	NO ACTIVITY IN C		UNT FOR THE REF		OF	
	8/19/2022	THROUGH	11/21/2022	2		
x						
Signature			-0.0	Date		
x	- grater -					
Signature			-0. 0	Date		
REQUIRED SIGNATURES FOR:	Candidates: Candidate and C Political Committee Chairman and C Party Executive Co	es: ampaign Treasurer	or Deputy Treasurer or Deputy Treasurer ((2), F.S.)			
Except as noted above for an ECC received) the filing of the requi	red report is waived. H		officer must be notified			