			ont the	CIIDMTC	TON	
(Section 106.07(7), F.S.) (PLEASE TYPE)			ONLINE SUBMISSION Id: 1943 [1228912]			
			Submitted on:			
			9/2/2020 08:21:43 (eastern) OFFICE USE ONLY			
Carol Ann Felt	s	COU	NTY COMMISSION	- DIST. 5		
Name		10 65	Office Sought			
6055 County Rd 675		Mya	Myakka City, FL 34251			
Address		City		State	Zip Code	
X Candidate	Political Committee		Party Executiv	ve Committee		
NOTE: This form does not apply waiver) that no reportable						
Check here if address has o	changed since last repor	t. Chec repo	k here if PC has DISB rts.	ANDED and will no	longer file	
Indicate report # M	Indicate report # P TERMINATION RE	6 <u>G1</u>	e report #  ECIAL ELECTION	Indicate report as applicable:	type and #	
NOTIFICATION OF	NO ACTIVITY IN CAI		JNT FOR THE REP	ORTING PERIOD	OF	
	8/14/2020	THROUGH	8/21/2020			
x						
Signature			S 0 <del></del>	Date		
x						
Signature			Q ( <del>-</del>	Date		
REQUIRED SIGNATURES FOR:	Political Committees Chairman and Car Party Executive Com	: mpaign Treasurer ( mittees:	or Deputy Treasurer ( or Deputy Treasurer (s			
Except as noted above for an ECC received) the filing of the require	red report is waived. Ho	when there has b	een no activity in the a ficer must be notified i			