## WAIVER OF REPORT

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

(PLEASE TYPE)

## ONLINE SUBMISSION Id: 1943 [1234108]

Submitted on:

10/9/2020 16:58:03 (eastern)

OFFICE USE ONLY

Carol Ann Felts Name 6055 County Rd 675 Address		COUNTY COMMISSION - DIST. 5  Office Sought  Myakka City, FL 34251			
				City	State Zip Code
				X Candidate  NOTE: This form does not appl	
		Check here if address has	contributions or expenditures we changed since last report.		ISBANDED and will no longer file
TYPE OF REPORT	(Check Appropriate Bo	x and Complete Applica	able Line beneath Box)		
MONTHLY REPORT	PRIMARY ELECTION	X GENERAL ELECTION	OTHER REPORT TYPE		
Indicate report #	Indicate report #	Indicate report #	Indicate report type and # as applicable:		
NOTIFICATION OF	TERMINATION REPORT				
	9/19/2020 THR	OUGH 10/2/202	0		
X					
Signature			Date		
X		60 80			
Signature			Date		
EQUIRED SIGNATURES FOR:	Political Committees:				
		there has been no activity in the filing officer must be notifi	he account (no funds expended or ed in writing on the prescribed		