## WAIVER OF REPORT

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

(PLEASE TYPE)

## ONLINE SUBMISSION

**Id: 419** [1176098]

Submitted on:

10/13/2018 00:50:40 (eastern)

OFFICE USE ONLY

Name 621 NE 55th ST Address		Office Sought Ocala, FL 34479							
						City		State Zip Code	
						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.	Chec	k here if PC has DISB/ rts.	ANDED and will no	longer file				
TYPE OF REPORT	(Check Appropriate Bo	x and Co	mplete Applicable	e Line beneath	Box)				
MONTHLY REPORT PRIMARY ELECTION		X GEI	X GENERAL ELECTION OTHER REPORT TYPE						
Indicate report #	Indicate report #		report#	Indicate report	type and #				
M	P	$_{\rm G}$	_	as applicable:					
NOTIFICATION OF	TERMINATION REPORT		ECIAL ELECTION	ORTING PERIO	O OF				
	9/29/2018 THR	OUGH	10/5/2018						
X									
Signature			V) 10 <del></del>	Date					
X									
Signature			Date						
EQUIRED SIGNATURES FOR:	Candidates: Candidate and Campaigr Political Committees: Chairman and Campaign								
			and the second s						
	Party Executive Committee Treasurer and Chairman		2), F.S.)						