WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 501 [1200800]

Submitted on:

3/4/2020 11:03:29 (eastern)

OFFICE USE ONLY

Wesley Wilcox Name 5131 SE 44th Cir Address		Office Sought Ocala, FL 34480 City State Zip Code									
						X Candidate	Political Committee		Party Executiv	e Committee	
						NOTE: This form does not appl waiver) that no reportable	y to an electioneering communi contributions or expenditures w				
						Check here if address has	changed since last report.	Check h	nere if PC has DISB/	ANDED and will no	longer file
TYPE OF REPORT	(Check Appropriate Box	and Com	plete <mark>Applicabl</mark> e	e Line beneath	Box)						
MONTHLY REPORT	MONTHLY REPORT PRIMARY ELECTION G			OTHER REPORT TYPE							
Indicate report # M2 M	Indicate report #	Indicate r	Indicate report # Indicate report type and as applicable:								
NOTIFICATION OF	TERMINATION REPORT		IT FOR THE REP	ORTING PERIOD) OF						
	2/1/2020 THR	OUGH	2/28/2020								
x											
Signature			\$ 	Date							
X											
5		Date									
QUIRED SIGNATURES FOR:	Candidates: Candidate and Campaign Political Committees: Chairman and Campaign										
	Party Executive Committees: Treasurer and Chairman (s. 106.29(2), F.S.)										
cept as noted above for an ECC		there has bee	n no activity in the a								