WAIVER OF REPORT (Section 106.07(7), F.S.) (PLEASE TYPE)			ONLINE SUBMISSION Id: 409 [1229324] Submitted on: 9/4/2020 16:04:31 (eastern) OFFICE USE ONLY			
COMMITTEE TO I	MPROVE MARION	COUNTYOMM	ITTEES			
Name			Office Sought			
5184 SE 20TH ST		OCAI	OCALA, FL 34480			
Address		City		State	Zip Code	
Candidate	Political Committee		Party Executiv	ve Committee		
NOTE: This form does not apply t waiver) that no reportable co	ntributions or expenditures					
Check here if address has changed since last report.			Check here if PC has DISBANDED and will no longer file reports.			
M		Indicate r G RT SPEC	CIAL ELECTION	Indicate report as applicable:		
		ROUGH	8/28/2020			
X Signature			© 	Date		
x						
Signature			Date			
REQUIRED SIGNATURES FOR.		gn Treasurer or ees: an (s. 106.29(2), en there has bee er, the filing offic	Deputy Treasurer (s . F.S.) en no activity in the a ser must be notified i	s. 106.07(5), F.S.) account (no funds e		