WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 409 [1255585]

Submitted on:

2/15/2022 11:30:44 (eastern)

OFFICE USE ONLY

COMMITTEE TO	IMPROVE MARION C	OUNTY OMM	IITTEES			
Name			Office Sought			
5184 SE 20TH ST		OCA	OCALA, FL 34480			
Addre	ess	City		State	Zip Code	
Carrotonic	X Political Committee		Party Executiv			
NOTE: This form does not appl waiver) that no reportable	y to an electioneering commun contributions or expenditures w					
Check here if address has	changed since last report.	Check report	here if PC has DISB.	ANDED and will no	longer file	
TYPE OF REPORT	(Check Appropriate Bo	x and Con	plete Applicable	e Line beneath	Box)	
MONTHLY REPORT	PRIMARY ELECTION	GEN	ERAL ELECTION	OTHER R	EPORT TYPE	
Indicate report #	Indicate report #	Indicate	report#	Indicate report as applicable:	type and #	
NOTIFICATION OF	TERMINATION REPORT		CIAL ELECTION	ORTING PERIO	OF	
	2/1/2022 THR	OUGH	2/28/2022			
X						
Signature			· ·	Date		
X						
Signature				Date		
REQUIRED SIGNATURES FOR:	Candidates: Candidate and Campaigr Political Committees:	n Treasurer o	r Deputy Treasurer (:	s. 108.07(5), F.S.)		
	Chairman and Campaign Party Executive Committee Treasurer and Chairman	es:		. 106.07(5), F.S.)		
Except as noted above for an ECC received) the filing of the requi	D, in any reporting period when red report is waived. However, reporting date that no	, the filing offi	cer must be notified i			