WAIVER OF REPORT (Section 106.07(7), F.S.) (PLEASE TYPE)			ONLINE SUBMISSION Id: 409 [1245957] Submitted on: 5/12/2021 10:27:49 (eastern) OFFICE USE ONLY			
COMMITTEE TO	IMPROVE MARION O	COUNTYOMMI	TTEES			
Name			Office Sought			
5184 SE 20TH ST		OCAL	OCALA, FL 34480			
Address		City		State	Zip Code	
Candidate	Political Committee		Party Executiv	ve Committee		
NOTE: This form does not appl waiver) that no reportable	contributions or expenditures	were made duri	ng the reporting pe		, F.S.).	
MONTHLY REPORT	PRIMARY ELECTION Indicate report # P TERMINATION REPOR	Indicate re G	Port #	Indicate report as applicable:	type and #	
	NO ACTIVITY IN CAMPA	IGN ACCOUN	T FOR THE REP 4/30/2021	ORTING PERIOD) OF	
5		Q	Date			
x						
Signature			8	Date		
REQUIRED SIGNATURES FOR: Except as noted above for an ECC	Candidates: Candidate and Campaig Political Committees: Chairman and Campaig Party Executive Committe Treasurer and Chairma	n Treasurer or [es:	Deputy Treasurer (s			