WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 409 [1246655]

Submitted on: 6/18/2021 12:27:01 (eastern) OFFICE USE ONLY

Name			Office Sought				
5184 SE 20TH S	ST	OCZ	LA, FI	34480			
Addre	ess	City			State	Zip Code	
Candidate	X Political Committee		Par	ty Executive (Committee		
NOTE: This form does not apply waiver) that no reportable							
Check here if address has	changed since last report.	Check		has DISBAN	DED and will no	longer file	
TYPE OF REPORT	(Check Appropriate	Box and Cor	nplete A	pplicable l	_ine beneath	Box)	
X MONTHLY REPORT	PRIMARY ELECTIO	N GEN	ERAL ELE	CTION	OTHER R	EPORT TYPE	
Indicate report #	Indicate report #	Indicate	report#		Indicate report as applicable:	type and #	
M	P	G			as applicable.		
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NOTIFICATION OF	TERMINATION REP		CIAL ELE		RTING PERIO) OF	
NOTIFICATION OF	NO ACTIVITY IN CAM		NT FOR		RTING PERIO) OF	
	NO ACTIVITY IN CAM	PAIGN ACCOL	NT FOR	THE REPOR	RTING PERIO) OF	
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X X	NO ACTIVITY IN CAM 5/1/2021 Signature	PAIGN ACCOU	5/31	THE REPOR	Date Date	OF	
X X	NO ACTIVITY IN CAM 5/1/2021 Signature Signature Candidates:	PAIGN ACCOU	5/31	THE REPOR	Date Date 06.07(5), F.S.)	OOF	