WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 409 [1249390]

Submitted on:

9/13/2021 13:11:18 (eastern)

OFFICE USE ONLY

COMMITTEE TO	IMPROVE MARION CO	OUNTY OMM	IITTEES			
Name			Office Sought			
5184 SE 20TH ST		OCALA, FL 34480				
Addre	ess	City		State	Zip Code	
Candidate	X Political Committee		Party Executiv	e Committee		
NOTE: This form does not apply waiver) that no reportable	y to an electioneering communicontributions or expenditures w					
Check here if address has	changed since last report.	Check report	here if PC has DISB. s.	ANDED and will no	longer file	
TYPE OF REPORT	(Check Appropriate Bo	x and Com	plete Applicable	e Line beneath	Box)	
MONTHLY REPORT	PRIMARY ELECTION	GEN	ERAL ELECTION	OTHER R	EPORT TYPE	
Indicate report #	Indicate report #	Indicate i	report#	Indicate report as applicable:	type and #	
NOTIFICATION OF	TERMINATION REPORT		CIAL ELECTION	ORTING PERIO	OF	
	8/1/2021 THR	ough	8/31/2021			
X						
Signature			Date			
X			68			
Signature				Date		
EQUIRED SIGNATURES FOR:	Candidates: Candidate and Campaign Political Committees:					
	Chairman and Campaign Party Executive Committee Treasurer and Chairman	s:		. 106.07(5), F.S.)		
Except as noted above for an ECC received) the filing of the requi), in any reporting period when	there has be	en no activity in the a cer must be notified i			