WAIVER OF REPORT (Section 106.07(7), F.S.) (PLEASE TYPE)			ONLINE SUBMISSION Id: 409 [1165409] Submitted on: 8/5/2018 13:42:47 (eastern) OFFICE USE ONLY			
COMMITTEE TO	IMPROVE MARION	COUNTYOMMI	FTEES			
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 apply waiver) that no reportable Check here if address has	contributions or expenditures	were made durin	g the reporting pe), F.S.).	
MONTHLY REPORT	(Check Appropriate B PRIMARY ELECTION Indicate report # P P TERMINATION REPOR	GENER	RAL ELECTION		EPORT TYPE	
	NO ACTIVITY IN CAMPA		FOR THE REP 8/3/2018	ORTING PERIO	D OF	
S		©	Date			
X						
S	0	8 -	Date			
REQUIRED SIGNATURES FOR: Except as noted above for an ECC received) the filing of the requi		gn Treasurer or D ees: in (s. 106.29(2), F en there has been er, the filing officer	eputy Treasurer (s .S.) no activity in the a r must be notified i	s. 106.07(5), F.S.) account (no funds e		