| | | | ONIT T | NTE (| | GTON | |
|---|--|--------------------|---|-------------|-----------------------------------|---------------|--|
| (Section 106.07(7), F.S.) | | | ONLINE SUBMISSION Id: 396 [1145126] | | | | |
| | | | Submitted on: | | | | |
| (PLEASE TYPE) | | | 10/8/2017 09:55:20 (eastern) OFFICE USE ONLY | | | | |
| Bill Foley | | Cit | -v of Kev | West M | lavor | | |
| Name | | | City of Key West Mayor Office Sought | | | | |
| 1010 Grinnell St | | | Key West, FL 33040 | | | | |
| Address | | | | | State | Zip Code | |
| X Candidate | Political Committe | e | Part | v Executive | e Committee | | |
| NOTE: This form does not apply waiver) that no reportable | | | anization (EC | CO). An E | CO must file a rep | | |
| Check here if address has o | changed since last rep | | ok here if PC orts. | has DISBA | ANDED and will no | o longer file | |
| X MONTHLY REPORT Indicate report # M | PRIMARY ELEC | Indicat G | e report # | | Indicate report as applicable: | EPORT TYPE | |
| NOTIFICATION OF | NO ACTIVITY IN C | AMPAIGN ACCO | UNT FOR T | HE REPO | ORTING PERIO | DOF | |
| | 9/1/2017 | THROUGH | 9/30/ | 2017 | | | |
| | | | | | | | |
| X | | | -0 0 | | Dete | | |
| Signature | | | | | Date | | |
| X | | | -a a | | 1210200 | | |
| Signature | | | | | Date | | |
| REQUIRED SIGNATURES FOR: | Candidates: Candidate and | Campaign Treasurer | or Deputy Tr | reasurer (s | . 106.07(5), F.S.) | | |
| Political Committees: Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.) | | | | | | | |
| | Party Executive Co | ommittees: | | casarer (s. | 100.07(0),11.0.) | | |
| Except as noted above for an ECC received) the filing of the requi |), in any reporting per red report is waived. | | een no activ fficer must be | | | | |