WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 417 [1156409]

Submitted on:

6/8/2018 10:39:45 (eastern)

OFFICE USE ONLY

Nam		Count	v Commissione	r Dist 2		
DO Por 066	Bill Hunter Name		County Commissioner, Dist. 2 Office Sought			
PO Box 966 Address		Key West, FL 33041				
						City
		X Candidate	Political Committee	Party Executive Committee		
NOTE: This form does not apply waiver) that no reportable (y to an electioneering communic contributions or expenditures w					
Check here if address has o	changed since last report.	Check h	ere if PC has DISBA	NDED and will no	longer file	
TYPE OF REPORT	(Check Appropriate Box	and Comp	olete Applicable	Line beneath	Box)	
MONTHLY REPORT	PRIMARY ELECTION	GENE	RAL ELECTION	OTHER R	PORT TYPE	
Indicate report #	Indicate report #	Indicate re	port#	Indicate report	type and #	
м	P	G		as applicable:		
NOTIFICATION OF	TERMINATION REPORT		T FOR THE REP	ORTING PERIOD) OF	
	7/7/2018 THR	OUGH	7/20/2018			
X						
Signature				Date		
X						
^	Signature		Date			
	10.77					
	Candidates: Candidate and Campaign	Treasurer or	Deputy Treasurer (s	. 106.07(5), F.S.)		
s		Treasurer or 0				