WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION Id: 446 [1176170]

Submitted on:

10/14/2018 16:20:40 (eastern)

OFFICE USE ONLY

Phillip L Goodman			Mosquito Control Board, Dist 2			
Name 23088 Bluegill Ln Address		Office Sought Cudjoe Key, FL 33042				
						City
		X Candidate	Political Committee		Party Executiv	e Committee
NOTE: This form does not apply waiver) that no reportable	y to an electioneering communi contributions or expenditures w					
Check here if address has	changed since last report.	Chec	k here if PC has DISB/ orts.	ANDED and will no	longer file	
TYPE OF REPORT	(Check Appropriate Bo	x and Co	mplete Applicable	Line beneath	Box)	
MONTHLY REPORT PRIMARY ELECTION			X GENERAL ELECTION OTHER REPORT TYPE			
Indicate report #	Indicate report #	Indicate G5	report#	Indicate report as applicable:	type and #	
NOTIFICATION OF	TERMINATION REPORT		INT FOR THE REP	ORTING PERIOR	OF	
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x	THE	00011				
Signature			0 0	Date		
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Signature			Date			
QUIRED SIGNATURES FOR:	Candidates: Candidate and Campaigr Political Committees: Chairman and Campaign					
	Party Executive Committee Treasurer and Chairman	s:		(-), (-),		
cept as noted above for an ECC received) the filing of the requi), in any reporting period when	there has b the filing of	een no activity in the a ficer must be notified in			