WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 4 [1142884]

Submitted on:

7/3/2017 09:13:31 (eastern) **OFFICE USE ONLY**

	Name		Office Sought Tallahassee, FL 32302			
P.O. Box 1701	Ta]					
			•		7: 0 1	
Addr	ess	City		State	Zip Code	
Candidate	X Political Committee		Party Executive	Committee		
NOTE: This form does not appl waiver) that no reportable						
Check here if address has	changed since last report.	. Check	k here if PC has DISBAI rts.	NDED and will no	longer file	
TYPE OF REPORT	(Check Appropriate	Box and Co	mplete Applicable	Line beneath	Box)	
MONTHLY REPORT	PRIMARY ELECTION	ON GEN	NERAL ELECTION	OTHER RE	PORT TYPE	
Indicate report # M06	Indicate report #	Indicate G	report #	Indicate report as applicable:	type and #	
NOTIFICATION OF	TERMINATION REI		ECIAL ELECTION	RTING PERIOD	OF	
	6/1/2017	THROUGH	6/30/2017			
x			8 8	Date		
	Signature					
-	Signature					
X	Signature Signature		8 8 	Date		
X	Signature Candidates:		or Deputy Treasurer (s.			
	Signature					