WAIVER OF REPORT		(ONLINE Id: 588	SUBMIS:	SION	
(Section 106.07(7), F.S.)			Submitted on:			
(PLEASE TYPE)			10/30/2018 19:44:46 (eastern) OFFICE USE ONLY			
Matthew Gates		Cr	estview City Cc	ouncil Member,	Grp. 1	
Name		10 - 06	Office Sought			
656 Brunson Street		Cr	Crestview, FL 32536			
Address		City		State	Zip Code	
X Candidate	Political Committee	2	Party Executi	ve Committee		
NOTE: This form does not apply waiver) that no reportable of						
Check here if address has ch	nanged since last rep		ck here if PC has DISB orts.	ANDED and will no	longer file	
X MONTHLY REPORT	PRIMARY ELECT ndicate report # P TERMINATION F	Indica G	PECIAL ELECTION	Indicate report as applicable:	type and #	
NOTIFICATION OF N	IO ACTIVITY IN C	AMPAIGN ACCO	UNT FOR THE REP		OF	
	10/1/2018	THROUGH	10/31/2018	3		
×						
X			-0 0	Data		
Signature				Date		
X			-0. 0	1_2×52.00		
Si REQUIRED SIGNATURES FOR:	Political Committee Chairman and C Party Executive Co	es: ampaign Treasurer	r or Deputy Treasurer (or Deputy Treasurer (
Except as noted above for an ECO, received) the filing of the require	in any reporting period of report is waived.	od when there has	been no activity in the officer must be notified			