(Section 106.07(7), F.S.) (PLEASE TYPE)				SUBMIS	SION	
			Submitted on:			
			5/1/2020 12:16:11 (eastern) OFFICE USE ONLY			
Bill Cowles			Supervisor of Elections			
Name			Office Sought			
1734 Thoroughbred Dr		G	Gotha, FL 34734			
Address		City		State	Zip Code	
X Candidate	Political Committe	e	Party Execut	ive Committee		
NOTE: This form does not apply waiver) that no reportable						
Check here if address has o	changed since last rep		eck here if PC has DISE ports.	3ANDED and will no	longer file	
Indicate report # M4 M	Indicate report # P TERMINATION	G	PECIAL ELECTION	Indicate report as applicable:	type and #	
NOTIFICATION OF	NO ACTIVITY IN C	AMPAIGN ACC	DUNT FOR THE REP		OF	
	4/1/2020	THROUGH	4/30/2020			
		-				
X						
Signature				Date		
X			-0 0	1010-02-00-000		
Signature				Date		
REQUIRED SIGNATURES FOR:	Political Committe Chairman and C Party Executive Co	es: Campaign Treasure	er or Deputy Treasurer er or Deputy Treasurer (9(2), E.S.)			
Except as noted above for an ECC received) the filing of the requi), in any reporting per red report is waived.	iod when there has	been no activity in the officer must be notified			