WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 469 [1263102]

Submitted on:

6/7/2022 23:00:22 (eastern)

OFFICE USE ONLY

Stephanie Chmielewski Name 601 6th Street Address		St Cloud City Council Member Seat 5 Office Sought Saint Cloud, FL 34769							
						City		State Zip Code	
						X Candidate	Political Committee		Party Executiv
		NOTE: This form does not appl waiver) that no reportable	y to an electioneering communi contributions or expenditures w						
Check here if address has	changed since last report.	Chec	ok here if PC has DISB orts.	ANDED and will no	longer file				
TYPE OF REPORT	(Check Appropriate Bo	x and Co	mplete Applicable	e Line beneath	Box)				
MONTHLY REPORT PRIMARY ELECTION			GENERAL ELECTION OTHER REPORT TYPE						
Indicate report # Indicate report # P		Indicate	e report#	ort# Indicate report type and # as applicable:					
NOTIFICATION OF	TERMINATION REPORT		ECIAL ELECTION	ORTING PERIO) OF				
		OUGH	5/31/2022						
x									
Signature			**	Date					
X									
5		-02 (E	Date						
EQUIRED SIGNATURES FOR:	Candidates: Candidate and Campaigr Political Committees: Chairman and Campaign								
	Party Executive Committees: Treasurer and Chairman (s. 106.29(2), F.S.)								
except as noted above for an ECC received) the filing of the requi	D, in any reporting period when ired report is waived. However,	the filing o	fficer must be notified i	THE RESERVE TO SERVE THE PROPERTY OF THE PARTY OF THE PAR					