WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION Id: 347 [1124600]

Submitted on:

9/2/2016 10:36:57 (eastern) OFFICE USE ONLY

Name 101 Alder Ave. Address		Office Sought Altamonte Springs, FL 32714							
						City		State	Zip Code
						X Candidate	Political Committee		Party Executiv
		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.	Check	there if PC has DISB. ts.	ANDED and will no	longer file				
TYPE OF REPORT	(Check Appropriate Box	1 <u>-</u> y	mplete Applicabl		Box)				
Indicate report #	Indicate report #	The second secon	report#	Indicate report	type and #				
M	P	GG2		as applicable:					
NOTIFICATION OF	TERMINATION REPORT		NT FOR THE REP	ORTING PERIO	D OF				
	9/3/2016 THR	OUGH	9/16/2016						
X									
Signature), (2 -	Date					
X									
Signature			W W	Date					
EQUIRED SIGNATURES FOR:	Candidates: Candidate and Campaign Political Committees:								
	Chairman and Campaign Party Executive Committee Treasurer and Chairman	s:		. 100.07(0), F.S.)					
Except as noted above for an ECC received) the filing of the requi		there has be the filing off	een no activity in the a ficer must be notified i						