WAIVER OF REPORT

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

(PLEASE TYPE)

ONLINE SUBMISSION

Id: 452 [1226952]

Submitted on: 8/18/2020 12:00:24 //

8/18/2020 12:00:24 (eastern) **OFFICE USE ONLY**

Charles Cleaver Hayling, III Name 1815 N 17th St Address		City of Fort Pierce Commission, District Office Sought Fort Pierce, FL 34950							
						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.	Check i	here if PC has DISB/ s.	ANDED and will no	longer file				
TYPE OF REPORT	(Check Appropriate Box	x and Com	plete Applicable	Line beneath	Box)				
MONTHLY REPORT	PRIMARY ELECTION	GENE	ERAL ELECTION	OTHER RE	PORT TYPE				
Indicate report #	Indicate report # P	Indicate r	eport#	Indicate report as applicable:	type and #				
NOTIFICATION OF	TERMINATION REPORT		OT FOR THE REP	ORTING PERIOD	OF				
	8/1/2020 THR	OUGH	8/13/2020						
x									
Signature			0.	Date					
X									
Signature			Date						
QUIRED SIGNATURES FOR:	Candidates: Candidate and Campaign Political Committees:	Treasurer or							
	Chairman and Campaign	Treasurer or	Deputy Headerer (5						
	Company of the second s	s:							