WAIVER OF REPORT (Section 106.07(7), F.S.) (PLEASE TYPE)			ONLINE SUBMISSION Id: 220 [1153530] Submitted on: 5/15/2018 14:53:43 (eastern) OFFICE USE ONLY			
Tim Alcorn		Sch	School Board, Dist. 3			
Name			Office Sought			
14549 County Road 250		Li	Live Oak, FL 32060			
Address		City		State	Zip Code	
X Candidate	Political Committe	e	Party Executiv	/e Committee		
NOTE: This form does not apply waiver) that no reportable						
Check here if address has changed since last report. Check here if PC has DISBANDED and will no longer file reports.						
MONTHLY REPORT	PRIMARY ELEC	Indicat G	ECIAL ELECTION	OTHER REI	PORT TYPE	
NOTIFICATION OF				ORTING PERIOD	OF	
	4/1/2018	THROUGH	4/30/2018			
X Signature			-3 Q	Date		
X			a s			
S REQUIRED SIGNATURES FOR:	Political Committe Chairman and C Party Executive Co	es: Campaign Treasurer	or Deputy Treasurer (: or Deputy Treasurer (s 2), F.S.)			
Except as noted above for an ECC received) the filing of the requi	red report is waived.		fficer must be notified i			