(Section 106.07(7), F.S.) (PLEASE TYPE)			ONLINE SUBMISSION Id: 601 [1203728] Submitted on: 4/8/2020 05:54:12 (eastern) OFFICE USE ONLY			
Lisa Lewis						
Name			Supervisor of Elections Office Sought			
			25			
860 Carter Rd.		De	DeLand, FL 32724			
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 re	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ck here if PC has DISE orts.	BANDED and will no	longer file	
Indicate report # M3 M	Indicate report # P TERMINATION	G	e report #	Indicate report as applicable:	type and #	
NOTIFICATION OF	NO ACTIVITY IN C	AMPAIGN ACCO	UNT FOR THE REP		OF	
	3/1/2020	THROUGH	3/31/2020			
×						
X			-s c	Date		
Signature				Date		
X			-0. 0	122452.00		
S REQUIRED SIGNATURES FOR:	Political Committe Chairman and C Party Executive C	ees: Campaign Treasurer	or Deputy Treasurer or Deputy Treasurer ( 2), F.S.)			
Except as noted above for an ECC received) the filing of the requi	red report is waived.		fficer must be notified			