## WAIVER OF REPORT

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

(PLEASE TYPE)

## ONLINE SUBMISSION

**Id: 755** [1249191]

Submitted on:

9/10/2021 08:23:05 (eastern)

OFFICE USE ONLY

Name  3550 Parkway South  Address		County Council Member, District 1  Office Sought  DeLand, FL 32720							
						City State 2			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	here if PC has DISB/ s.	ANDED and will no	longer file				
TYPE OF REPORT	(Check Appropriate Bo	x and Com	plete Applicable	E Line beneath	Box)				
MONTHLY REPORT PRIMARY ELECTION		GENE	ERAL ELECTION	OTHER REPORT TYPE					
Indicate report # Indicate report # P		Indicate report # Indicate report type and # as applicable:			type and #				
NOTIFICATION OF	TERMINATION REPORT		OT FOR THE REP	ORTING PERIO	O OF				
	8/1/2021 THR	OUGH	8/31/2021						
x		-							
		Date							
X		60							
3		Date							
EQUIRED SIGNATURES FOR:	Candidates: Candidate and Campaign	Treasurer or	Deputy Treasurer (s	s. 106.07(5), F.S.)					
	Political Committees: Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)  Party Executive Committees: Treasurer and Chairman (s. 106.29(2), F.S.)								
Except as noted above for an ECC received) the filing of the requ		there has bee	en no activity in the a per must be notified in						