## **WAIVER OF REPORT**

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

	(PLEASE	TYPE)	
ROBERT HORAN  Candidate's Name (Last, Suffix, First, Middle) OR Political Committee, CCE or Party Name		BOB HORAN  Identification Number (Assigned by Dogs of Elections)	)ivision
6099 Overseas Hwy 59-E		SHERIFF	
Address (Number and Street)		Office Sought (Include District, Circ Group Number)	uit or
Marathon City	FI 33050 State Zip Code		
Candidate	Committee of Continuous Existence	Check box if address has changed sin report.	ce last
Political Committee	Party Executive Committee	Check here if PC or CCE has DISBAN and will no longer file reports.	DED
TYPE OF REPORT (Check Appropriate Box)			
QUARTERLY REPORTS PRIMARY ELECTION		GENERAL ELECTION	
☐ January	32nd day prior	☐ 46th day prior	
☐ April	☐ 18th day prior	☐ 32nd day prior	DODT
☐ July	☐ 4th day prior	☐ TERMINATION RE ☐ 18th day prior	PORT
☐ October		☐ 4th day prior	ON
NOTIFICATION OF NO	) ACTIVITY IN CAMPAIGN A	ACCOUNT FOR THE REPORTING PERIOR	) OF
7/1/2004 through		gh	
x			
Signature		Date	
SIGNATURES REQUIRED FOR:  Candidates Candidate, Campaign Treasurer or Deputy Treasurer (S. 106.07(5), F.S.)  Political Committees Chairman, Campaign Treasurer or Deputy Treasurer (S. 106.07(5), F.S.)  Committees of Continuous Existence Treasurer (S. 106.04(4)(c), F.S.)  Party Executive Committees Treasurer or Chairman (S. 106.29(2), F.S.)			
		ne account (no funds expended or received) the st be notified in writing on the prescribed report	

that no report is being filed.