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 Division of Elections)	
6099 Overseas Hwy 59-E		SHERIFF	
Address (Number and Street)		Office Sought (Include District, Circuit or Group Number)	
Marathon City	FI 33050 State Zip Code		
Candidate	Committee of Continuous Existence	Check box if address has changed since last report.	
Political Committee	Party Executive Committee	Check here if PC or CCE has DISBANDED and will no longer file reports.	
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	
□ July	4th day prior	☐ 18th day prior	☐ TERMINATION REPORT
☐ October		☐ 4th day prior	☐ SPECIAL ELECTION
NOTIFICATION OF NO	ACTIVITY IN CAMPAIGN A	ACCOUNT FOR THE F	REPORTING PERIOD OF
8/7/2004 throug		gh	
X			
Signature			Date
SIGNATURES REQUIRED FO	Candidate, Campaign Political Committees	Treasurer or Deputy Trea nous Existence ()(c), F.S.) ittees	asurer (S. 106.07(5), F.S.) asurer (S. 106.07(5), F.S.)
			pended or received) the filing of on the prescribed reporting date

that no report is being filed.