

WAIVER OF REPORT

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

(PLEASE TYPE)

<u>Parrish, Charlotte</u>	<u>parrish08</u>	
Candidate's Name (Last, Suffix, First, Middle) OR Political Committee, CCE or Party Name	Identification Number (Assigned by Division of Elections)	
<u>1416 N. Gray Ave.</u>	<u>CEDAR GROVE COMMISSIONER SEAT 4</u>	
Address (Number and Street)	Office Sought (Include District, Circuit or Group Number)	
<u>Cedar Grove</u> <u>FL</u> <u>32401</u>		
City State Zip Code		
<input checked="" type="checkbox"/> Candidate	<input type="checkbox"/> Committee of Continuous Existence	<input type="checkbox"/> Check box if address has changed since last report.
<input type="checkbox"/> Political Committee	<input type="checkbox"/> Party Executive Committee	<input type="checkbox"/> Check here if PC or CCE has DISBANDED and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box)

QUARTERLY REPORTS

- January
 April
 July
 October

PRIMARY ELECTION

- 32nd day prior
 18th day prior
 4th day prior

GENERAL ELECTION

- 46th day prior
 32nd day prior
 18th day prior
 4th day prior

TERMINATION REPORT

SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

3/15/2008

through

3/28/2008

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.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

**FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Parrish, Charlotte **(2)** parrish08
Candidate, Committee or Party Name I.D. Number

(3) 1416 N. Gray Ave. Cedar Grove FL 32401
Address (number and street) City State Zip Code

Check box if address has changed since last report

(4) Check appropriate box(es):

Candidate (office sought): CEDAR GROVE COMMISSIONER SEAT 4

Political Committee

Check if PC has DISBANDED

Committee of Continuous Existence

Check if CCE has DISBANDED

Party Executive Committee

(5) REPORT IDENTIFIERS

Cover Period: From 3/15/2008 To 3/28/2008 Report Type: M2

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 167.76

Transfers to Office Account \$ 0.00

Total Monetary \$ 167.76

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions to Date

\$ 0.00

(10) TOTAL Monetary Expenditures to Date

\$ 167.76

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct and complete

Name of Treasurer Deputy Treasurer

X

Signature

I certify that I have examined this report and it is true, correct and complete

Name of Candidate Chairman (PC/PTY only)

X

Signature

**FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Parrish, Charlotte **(2)** parrish08
Candidate, Committee or Party Name I.D. Number

(3) 1416 N. Gray Ave. Cedar Grove FL 32401
Address (number and street) City State Zip Code

Check box if address has changed since last report

(4) Check appropriate box(es):

Candidate (office sought): CEDAR GROVE COMMISSIONER SEAT 4

Political Committee

Check if PC has DISBANDED

Committee of Continuous Existence

Check if CCE has DISBANDED

Party Executive Committee

(5) REPORT IDENTIFIERS

Cover Period: From 3/15/2008 To 3/28/2008 Report Type: M2

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 167.01

Transfers to Office Account \$ 0.00

Total Monetary \$ 167.01

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions to Date

\$ 0.00

(10) TOTAL Monetary Expenditures to Date

\$ 167.01

(11) CERTIFICATION

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I certify that I have examined this report and it is true, correct and complete

Name of Treasurer Deputy Treasurer

X

Signature

I certify that I have examined this report and it is true, correct and complete

Name of Candidate Chairman (PC/PTY only)

X

Signature

