



\* VIRGINIA \*  
DEPARTMENT  
of ELECTIONS

# Campaign Committee Termination Statement and Final Report

Form  
CFDA-948.4

<b>Amendments</b>		For official use only
<input type="checkbox"/> This is an amendment to a previously filed report.	Amendment #	
<b>Committee Information</b>		
Committee Name <i>CLINT OKENDING FOR BOARD OF SUPERVISORS</i>	Committee ID #	
Mailing Address (include city, state, and zip) <i>14125 Peace and Quiet Circle REVA, VA 22735</i>	Date of Election <i>11/05/2019</i>	
	Office Sought <i>BOS</i>	
	Locality/District <i>SALEM</i>	
<b>Preparer Information</b>		
Email Address <i>foxxy4@gmail.com</i>	Daytime Telephone # <i>703-929-4343</i>	
<b>Termination Statement</b>		
<p><input checked="" type="checkbox"/> I declare, to the best of my knowledge and subject to felony penalties pursuant to the Code of Virginia § 24.2-1016, that this final report for the period <i>01/01/2019</i> through <i>05/30/2019</i>, including all accompanying schedules, fully discloses all financial activities of this period by this committee in addition to all previously unreported receipts, that this committee has disbursed all surplus funds in accordance with the Code of Virginia § 24.2-948.4 and has no outstanding debts, that all reporting for the committee is complete and final. I further declare that the committee is at this time disbanded.</p>		
<p><i>James Clinton Okending #</i></p> <hr/> Signature of Treasurer or Candidate		<p><i>06 / 03 / 2019</i></p> <hr/> Date

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JUN 03 2019  
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**SCHEDULE G: STATEMENT OF FUNDS**

MUST BE TYPED OR PRINTED LEGIBLY IN INK

FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.

REPORT PERIOD FROM 04/01/2019 THROUGH 05/30/2019.

CLINT OXENDINE FOR BOARD OF SUPERVISORS

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE, OR POLITICAL COMMITTEE

\*Please Enter Zero on Lines with No Activity

**CONTRIBUTIONS RECEIVED THIS PERIOD**

	Number of Contributions	Amount
1. Schedule A [Over \$100]	# <u>0</u>	\$ <u>0</u>
2. Schedule B [Over \$100]	# <u>0</u>	\$ <u>0</u>
3. Un-itemized cash contributions [\$100 or less]	# <u>0</u>	\$ <u>0</u>
4. Un-itemized In-Kind Contributions [\$100 or less]	# <u>0</u>	\$ <u>0</u>
5. <b>TOTAL</b> [Add Lines 1, 2, 3 & 4]	# <u>0</u>	\$ <u>0</u>

**BANK INTEREST, REFUNDED EXPENDITURES AND REBATES**

6. Schedule C [also enter on Line 17b on Schedule H] \$ 0

**EXPENDITURES MADE THIS PERIOD**

7. Schedule B [From line 2 Above]	\$ <u>0</u>
8. Un-itemized In-Kind contributions [From line 4 Above]	\$ <u>0</u>
9. Schedule D [Expenditures]	\$ <u>0</u>
10. <b>TOTAL</b> [add lines 7, 8 and 9]	\$ <u>0</u>

**RECONCILIATION OF LOAN ACCOUNT**

11. Beginning loan balance [from Line 15 of last report]	\$ <u>0</u>
12. Loans received this period [from Schedule E - Part I]	\$ <u>0</u>
13. <b>SUBTOTAL</b> [Add Lines 11 and 12]	\$ <u>0</u>
14. <b>Subtract:</b> Loans repaid this period [from Schedule E - Part II]	(\$ <u>0</u> )
15. Ending loan balance [subtract Line 14 from Line 13]	\$ <u>0</u>

**SCHEDULE H: SUMMARY OF RECEIPTS AND DISBURSEMENTS**

MUST BE TYPED OR PRINTED LEGIBLY IN INK

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REPORT PERIOD FROM 04/01/2019 THROUGH 05/30/2019.

CLINT OXENDINE FOR BOARD OF SUPERVISORS

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE, OR POLITICAL COMMITTEE

\*Please Enter Zero On Lines with No Activity

16. **Beginning Balance** [Line 19 of last report] \$ 100.00

**17. Receipts for Current Reporting Period:**

a. Contributions received this period [Line 5 of Schedule G] \$ 0

b. Bank interest, refunded expenditures and rebates [Line 6 of Schedule G] \$ 0

c. Loans received this period [Line 12 of Schedule G] \$ 0

d. **Subtotal:** Contributions and Receipts received this period [Add Lines 17a, 17b and 17c above] \$ 100.00

e. **Total Expendable Funds** [Add Lines 16 and 17d] \$ 100.00

**18. Disbursements for Current Reporting Period:**

a. Expenditures made this reporting period [Line 10 of Schedule G] \$ 0

b. Loans repaid this reporting period [Line 14 of Schedule G] \$ 0

c. Other surplus funds paid out [from Schedule I] \$ 100.00

d. **Total Payments Made** [Add lines 18a, 18b, and 18c] \$ 100.00

19. **Ending Balance** [Subtract Line 18d from Line 17e] \$ 0  
(MUST MATCH LINE 29)

20. **Total Unpaid Debts** [from Schedule F of this report] \$ 0

**Committee's Receipts and Disbursements – Election Cycle Totals**

21. Balance at Start of Election Cycle \$ 0

22. Previous Receipts [Line 24 from last report] \$ 500.00  
(ENTER ZERO IF FIRST REPORT OF ELECTION CYCLE)

23. Receipts from Current Reporting Period [Line 17d above] \$ 0

24. Total Receipts this Election Cycle [Add lines 22 and 23] \$ 500.00

25. Total Funds Available [Add lines 21 and 24] \$ 500.00

26. Previous Disbursements [Line 28 from last report] \$ 400.00  
(ENTER ZERO IF FIRST REPORT OF ELECTION CYCLE)

27. Disbursements from Current Reporting Period [Line 18d above] \$ 100.00

28. Total Disbursements this Election Cycle [Add lines 26 and 27] \$ 500.00

29. **Ending Balance** [Subtract Line 28 from Line 25 - Difference must match Line 19] \$ 0

**SCHEDULE I: FINAL SURPLUS FUNDS PAID OUT**

MUST BE TYPED OR PRINTED LEGIBLY IN INK

**USE THIS SCHEDULE ONLY WHEN FILING A FINAL**

REPORTING PERIOD: 4/10/2019 THROUGH: 05/30/2019

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CLINT OXENDINE FOR BOARD OF SUPERVISORS

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

COLUMN 1 PERSON OR COMPANY PAID	COLUMN 2 MAILING ADDRESS OF PAYEE INCLUDE ZIP	COLUMN 3 TYPE OF DISPOSITION	COLUMN 4 NAME OF PERSON AUTHORIZING EXPENDITURE	COLUMN 5 DATE OF EXPENDITURE	COLUMN 6 AMOUNT PAID
JAMES CLINTON OXENDINE	1425 Reed and Quiet Circle Reva, VA 22935	Return of campaign contributions	Clint Oxendine	5/30/19	\$100

FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.

TOTAL THIS PERIOD  
[ENTER ON LAST PAGE OF SCHEDULE I AND  
ON LINE 18D OF SCHEDULE H.]

\$100