Commonwealth of Virginia

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ELECTORAL BOARD FAIRF

State Board of Elections

5 Pages

Final Report
Campaign Finance
for a
CANDIDATE CAMPAIGN COMMITTEE

§24.2-920 of the Code of Virginia

This document must be clear, legible and typed or printed in blue or black ink.

☑ Original Report	☐ Amended Report – Report # ____
CHARLES WILLIAM LEVY	
Name of Candidate Campaign Committee	**Candidate ID #**
P.O. BOX 11544	NONE
Candidate's Residence Address (include number and street)	**Daytime Phone Number (for person filling out this report)**
ALEXANDRIA VA 22312-0544	NONE
City, State and Zip	**E-mail Address**

Termination Statement of Candidate/Treasurer

I declare, subject to the penalties set forth in §24.2-929 of the Code of Virginia that, to the best of my knowledge, this **FINAL REPORT** for the period beginning 10/27/05 and ending 11/17/05, including all accompanying schedules, fully discloses all financial activities for this period and that this committee. I further declare that this committee is being disbanded and that this **FINAL REPORT** fully discloses all previously unreported receipts and has disbursed all funds in accordance with **§24.2-921(A)** of the Code of Virginia and that this candidate committee has no outstanding debts.

NOV 17, 2005
Date

Charles W. Levy
Signature of Treasurer or Candidate

SCHEDULE D: EXPENDITURES

MUST BE TYPED OR PRINTED LEGIBLY IN INK

***DO NOT INCLUDE REPAYMENT OF LOAN PRINCIPAL OR DISPOSITION OF FINAL SURPLUS FUNDS ON THIS SCHEDULE

REPORTING PERIOD: 10/27/05 THROUGH: 11/17/05

PAGE: 2 OF 5

CHARLES WILLIAM LEVY

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

COLUMN 1 PERSON OR COMPANY PAID MAILING ADDRESS OF PAYEE INCLUDE ZIP	COLUMN 2 ITEM OR SERVICE	COLUMN 3 NAME OF PERSON AUTHORIZING EXPENDITURE	COLUMN 4 DATE OF EXPENDITURE	COLUMN 5 AMOUNT PAID
CHARLIE LEVY ENTERPRISE P.O. BOX 11544 ALEX VA 22312-0544	CERTIFIED MAIL FOR CFDA REPORTS (7): 1/7/05, 4/4/05, 6/2/05, 7/1/05, 9/1/05, 10/3/05, 11/17/05	CHARLES LEVY	NOV 17, 2005	$30.94

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

TOTAL THIS PERIOD [ENTER ON LAST PAGE OF SCHEDULE D AND ON LINE 9 OF SCHEDULE G.] $30.94

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 10/27/05 THROUGH 11/17/05.

PAGE 3

CHARLES WILLIAM LEVY
FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE, OR POLITICAL COMMITTEE

CONTRIBUTIONS RECEIVED THIS PERIOD

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

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]	$ 0	
8.	Un-itemized In-Kind contributions [From line 4 Above]	$ 0	
9.	Schedule D [Expenditures]	$ 30.94	
10.	**TOTAL** [add lines 7, 8 and 9]		$ 30.94

RECONCILIATION OF LOAN ACCOUNT

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

SCHEDULE H: SUMMARY OF RECEIPTS AND DISBURSEMENTS

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 10/27/05 **THROUGH** 11/17/05.

PAGE 4

CHARLES WILLIAM LEVY

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

16. **Beginning Balance** [Line 19 of last report] $ 75.00

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] $ 0

    e. **Total Expendable Funds** [Add Lines 16 and 17d] $ 75.00

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

    a. Expenditures made this reporting period [Line 10 of Schedule G] $ 30.94

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

    c. Other surplus funds paid out [from Schedule I] $ 44.06

    d. **Total Payments Made** [Add lines 18a,18b, and 18c] $ 75.00

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] $ 75.00
    (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] $ 75.00

25. Total Funds Available [Add lines 21 and 24] $ 75.00

26. Previous Disbursements [Line 28 from last report] $ 0
    (ENTER ZERO IF FIRST REPORT OF ELECTION CYCLE)

27. Disbursements from Current Reporting Period [Line 18d above] $ 75.00

28. Total Disbursements this Election Cycle[Add lines 26 and 27] $ 75.00

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: 10/27/05 THROUGH: 11/17/05

CHARLES WILLIAM LEVY

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
CHARLES WILLIAM LEVY	P.O. Box 11544 ALEXANDRIA VA 22312-0544	SURPLUS FUNDS	LEVY	11/17/05	$44.06

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.] $44.06