



### Final Report

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

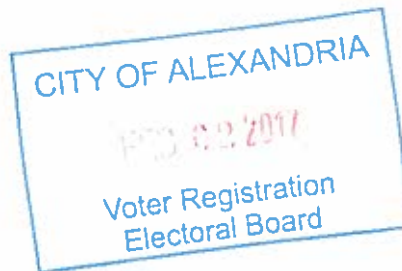
<input type="checkbox"/> Original Report		<input checked="" type="checkbox"/> Amended Report – Report # _____	
Pat Hennig for School Board			
Name of Candidate Campaign Committee		Committee ID # (if one)	
451 N Armistead St #4		703-850-1537 / 703-931-6979	
Candidate's Residence Address (include number and street)		Daytime Phone Number (for person filling out this report)	
Alexandria, VA 22312		patriciahennig2819@comcast.net	
City, State and Zip		E-mail Address	

### Termination Statement of Candidate/Treasurer

I declare, subject to the provisions of § 24.2-1016 of the *Code of Virginia* which is punishable up to a Class 5 Felony that, to the best of my knowledge, this **FINAL REPORT** for the period beginning \_\_\_\_\_ and ending 12/16, 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 § 24.2-948.4 of the *Code of Virginia* and that this candidate committee has no outstanding debts.

9 February 2, 2017  
Date

[Signature]  
Signature of Treasurer or Candidate





2016 Reporting Year

<input checked="" type="checkbox"/> Check here if this is an Amended Report Number:	Committee ID Number:
<u>Pat Hennig for School Board</u>	<u>11/03/2015</u>
NAME OF CANDIDATE COMMITTEE	DATE OF ELECTION
<u>451 N Armistead St., #4</u>	<u>School Board - C</u>
MAILING ADDRESS (INCLUDE NUMBER AND STREET):	OFFICE SOUGHT DISTRICT
<u>Alexandria, VA 22312</u>	<u>703 -931-6979 (BJS)</u>
CITY, STATE AND ZIP CODE	EMAIL / DAYTIME TELEPHONE NUMBER (for person preparing this report)
<u>patriciahennig2819@comcast.net</u>	

NO ACTIVITY STATEMENT

I declare, subject to the penalties of Virginia's campaign finance law, that except for the addition of interest or dividend payments and/or subtraction of any bank service charges, no monies or other things of value have been received and no monies have been expended for this reporting cycle; any interest or dividend payments and/or subtraction of bank service charges will be reported on the appropriate schedule of the next report for any period in which other activity occurs. The balance, as indicated on Line 19 of Schedule H, for the last reporting period with activity was:

\$ \_\_\_\_\_

REPORT DATE [CHECK ONE SQUARE BELOW]

MAY ELECTION Candidates who will have activity pertaining to the 2016 May general election have reports due on the following dates:	NOVEMBER ELECTION Candidates who have activity pertaining to the 2016 June primaries and/or November general elections have reports due on the following dates:	NON-ELECTION YEAR CANDIDATE'S whose office is <u>not</u> up for election in 2016 have reports due on the following dates:
<input type="checkbox"/> APRIL 15, 2016 <input type="checkbox"/> APRIL 25, 2016 <input type="checkbox"/> JUNE 15, 2016 <input type="checkbox"/> JULY 15, 2016 <input type="checkbox"/> JANUARY 17, 2017	<input type="checkbox"/> APRIL 15, 2016 <input type="checkbox"/> JUNE 6, 2016 <input type="checkbox"/> JULY 15, 2016 <input type="checkbox"/> SEPTEMBER 15, 2016 <input type="checkbox"/> OCTOBER 17, 2016 <input type="checkbox"/> OCTOBER 31, 2016 <input type="checkbox"/> DECEMBER 8, 2016 <input type="checkbox"/> JANUARY 17, 2017	<input type="checkbox"/> JULY 15, 2016 <input checked="" type="checkbox"/> JANUARY 17, 2017
		SPECIAL ELECTION
		<input type="checkbox"/> PRE-ELECTION <input type="checkbox"/> POST-ELECTION

STATEMENT OF TREASURER OR CUSTODIAN OF THE BOOKS

I declare, subject to the provisions of § 24.2-1016 which is punishable up to a Class 5 Felony, that this report for the period 07/01/16 through 12/31/16, including all its accompanying schedules, is to the best of my knowledge and belief true, correct and complete.

[Signature]  
SIGNATURE OF TREASURER OR CUSTODIAN OF THE BOOKS

2/2/2017  
DATE

# SCHEDULE A: DIRECT CONTRIBUTIONS OVER \$100

MUST BE TYPED OR PRINTED LEGIBLY IN INK

P. Hennig for School Board  
FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

REPORTING PERIOD: 7/01/2016 THROUGH: 12/31/16

PAGE: \_\_\_\_\_ OF: \_\_\_\_\_

COLUMN 1		COLUMN 2			COLUMN 3	COLUMN 4	COLUMN 5
FULL NAME OF CONTRIBUTOR MAILING ADDRESS OF CONTRIBUTOR & ZIP [LIST IN ALPHABETICAL ORDER]	BUSINESS/CORPORATE DONOR 1. NOT REQUIRED 2. TYPE OF BUSINESS 3. PRINCIPAL PLACE OF BUSINESS	INDIVIDUAL DONOR 1. EMPLOYER OR BUSINESS 2. OCCUPATION 3. PRINCIPAL PLACE OF BUSINESS			DATE RECEIVED	CONTRIBUTION THIS PERIOD	AGGREGATE TO DATE
		Patricia Hennig 20312 401 N. Armistead #4	1. V-P Council on Compulsions 2. CEO 3. Washington, D.C.	1.			Oct 5, 2016
	1.						
	2.						
	3.						
	1.						
	2.						
	3.						
	1.						
	2.						
	3.						
	1.						
	2.						
	3.						

FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN. [ENTER ON LAST PAGE OF SCHEDULE A AND ON LINE 1 OF SCHEDULE G.] TOTAL THIS PERIOD 212.83

# SCHEDULE B: IN-KIND CONTRIBUTIONS OVER \$100

MUST BE TYPED OR PRINTED LEGIBLY IN INK

REPORTING PERIOD: \_\_\_\_\_ THROUGH: \_\_\_\_\_

PAGE: \_\_\_\_\_ OF \_\_\_\_\_

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

<p><u>COLUMN 1</u></p> <p>FULL NAME OF CONTRIBUTOR MAILING ADDRESS OF CONTRIBUTOR &amp; ZIP [LIST IN ALPHABETICAL ORDER]</p>	<p><u>COLUMN 2</u></p> <p>DONOR INFORMATION 1. EMPLOYER OR BUSINESS (NOT REQUIRED IF CORPORATE/COMPANY DONOR) 2. OCCUPATION (CORPORATE CONTRIBUTION - ENTER TYPE OF BUSINESS) 3. PRINCIPAL PLACE OF BUSINESS 4. SERVICE/GOODS RECEIVED 5. BASIS USED TO DETERMINE VALUE</p>	<p><u>COLUMN 3</u></p> <p>DATE RECEIVED</p>	<p><u>COLUMN 4</u></p> <p>CONTRIBUTION THIS PERIOD</p>	<p><u>COLUMN 5</u></p> <p>AGGREGATE TO DATE</p>
1.				
2.				
3.				
4.				
5.				
1.				
2.				
3.				
4.				
5.				
1.				
2.				
3.				
4.				
5.				

FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN. [ENTER ON LAST PAGE OF SCHEDULE B AND ON LINES 2 AND 7 OF SCHEDULE G.]

TOTAL THIS PERIOD

00.

*2/2/2017*

**SCHEDULE C:**

**BANK INTEREST, REFUNDED EXPENDITURES AND REBATES**

REPORTING PERIOD: \_\_\_\_\_ THROUGH: \_\_\_\_\_

MUST BE TYPED OR PRINTED LEGIBLY IN INK

PAGE: \_\_\_\_\_ OF: \_\_\_\_\_

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

<p><b>COLUMN 1</b> FULL NAME AND ADDRESS OF PAYER [LIST IN ALPHABETICAL ORDER]</p>	<p><b>COLUMN 2</b> REASON/TYPE OF PAYMENT</p>	<p><b>COLUMN 3</b> DATE RECEIVED</p>	<p><b>COLUMN 4</b> PAYMENT AMOUNT</p>
<p>FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.</p>			<p><b>TOTAL THIS PERIOD</b> [ENTER ON LAST PAGE OF SCHEDULE C AND ON LINE 6 OF SCHEDULE G.]</p> <p style="text-align: right;">00 2/2/2017</p>

**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

P. Hennig for School Board  
 FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

REPORTING PERIOD: 07/01/16 THROUGH: 12/31/16  
 PAGE: 1 OF 1

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
Sun Trust Bank N. Bayviewgard st. Alex VA 22311	Close-out fee for account	P. Hennig	10/31/16	2.95
FILER IS SUBJECT TO PENALTIES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN. [ENTER ON LAST PAGE OF SCHEDULE D AND ON LINE 9 OF SCHEDULE G.]				2.95

**SCHEDULE E: LOANS**

MUST BE TYPED OR PRINTED LEGIBLY IN INK

REPORTING PERIOD: 07/31/16 THROUGH: 12/31/16  
PAGE \_\_\_\_\_ OF \_\_\_\_\_

Pat Hennig For School Board

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

**PART I: ITEMIZATION OF LOANS RECEIVED**

COLUMN 1 FULL NAME OF LENDER ADDRESS OF LENDER (INCLUDE ZIP CODE) [LIST IN ALPHABETICAL ORDER]	COLUMN 2 FULL NAME OF CO-BORROWER, GUARANTOR OR ENDORSER ADDRESS (INCLUDE ZIP CODE)	COLUMN 3 DATE RECEIVED	COLUMN 4 AMOUNT OF LOAN THIS PERIOD	COLUMN 5 REMAINING LOAN BALANCE
Pat Hennig, 451 N. Annistead, Alex, 22312		4/12/16		240.00
<b>TOTAL THIS PERIOD</b> [ENTER ON LAST PAGE OF SCHEDULE E, PART I AND ON LINE 12 OF SCHEDULE G]				

**PART II: ITEMIZATION OF LOANS REPAYED**

COLUMN 1 FULL NAME OF LENDER ADDRESS OF LENDER (INCLUDE ZIP CODE) [LIST IN ALPHABETICAL ORDER]	COLUMN 2 FULL NAME OF CO-BORROWER, GUARANTOR OR ENDORSER ADDRESS (INCLUDE ZIP CODE)	COLUMN 3 DATE REPAID	COLUMN 4 AMOUNT REPAYED THIS PERIOD	COLUMN 5 REMAINING LOAN BALANCE
Pat Hennig, 451 N. Annistead, Alex, 22312		10/3/2016	27.17	212.83
Pat Hennig, 451 N. Annistead, Alex, 22312		10/5/2016	212.83	0
<b>TOTAL THIS PERIOD</b> [ENTER ON LAST PAGE OF SCHEDULE E, PART I AND ON LINE 14 OF SCHEDULE G]				

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

**SCHEDULE F:**

**DEBTS REMAINING UNPAID AS OF THIS REPORT**

MUST BE TYPED OR PRINTED LEGIBLY IN INK

Include all contracts, credit purchases and loans payable.

*Pat Hennig for School Board*

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

REPORTING PERIOD: 07/31/2016 THROUGH: 12/31/2016

PAGE: \_\_\_\_\_ OF \_\_\_\_\_

COLUMN 1 FULL NAME OF CREDITOR MAILING ADDRESS OF CREDITOR INCLUDE ZIP	COLUMN 2 PURPOSE OF OBLIGATION	COLUMN 3 DATE DEBT INCURRED	COLUMN 4 AMOUNT REMAINING UNPAID
FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.			TOTAL THIS PERIOD [ENTER ON LAST PAGE OF SCHEDULE F AND ON LINE 20 OF SCHEDULE H.]

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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 \_\_\_\_\_ THROUGH \_\_\_\_\_ .

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>one</u>	\$ <u>212.83</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. TOTAL [Add Lines 1, 2, 3 & 4]	# <u>one</u>		\$ <u>212.83</u>

## BANK INTEREST, REFUNDED EXPENDITURES AND REBATES

6. Schedule C [also enter on Line 17b on Schedule H]	\$ <u>0</u>
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## 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>2.95</u>	
10. TOTAL [add lines 7, 8 and 9]		\$ <u>2.95</u>

## RECONCILIATION OF LOAN ACCOUNT

11. Beginning loan balance [from Line 15 of last report]	\$ <u>240.00</u>	
12. Loans received this period [from Schedule E - Part I]	\$ <u>0</u>	
13. SUBTOTAL [Add Lines 11 and 12]		\$ <u>240.00</u>
14. Subtract: Loans repaid this period [from Schedule E - Part II]	(\$ <u>240.00</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

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

REPORT PERIOD FROM 07/31/16 THROUGH 12/31/16.

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] \$ 30.12
- 17. **Receipts for Current Reporting Period:**
  - a. Contributions received this period [Line 5 of Schedule G] \$ 212.83
  - 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] \$ 212.83
  - e. **Total Expendable Funds** [Add Lines 16 and 17d] \$ 242.95
- 18. **Disbursements for Current Reporting Period:**
  - a. Expenditures made this reporting period [Line 10 of Schedule G] \$ 2.95
  - b. Loans repaid this reporting period [Line 14 of Schedule G] \$ 240.00
  - c. Other surplus funds paid out [from Schedule I] \$ 0
  - d. **Total Payments Made** [Add lines 18a,18b, and 18c] \$ 242.95
- 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** \$ 440.12
- 22. **Previous Receipts** [Line 24 from last report] \$ 0  
(ENTER ZERO IF FIRST REPORT OF ELECTION CYCLE)
- 23. **Receipts from Current Reporting Period** [Line 17d above] \$ 212.83
- 24. **Total Receipts this Election Cycle** [Add lines 22 and 23] \$ 212.83
- 25. **Total Funds Available** [Add lines 21 and 24] \$ 652.95
- 26. **Previous Disbursements** [Line 28 from last report] \$ 410.00  
(ENTER ZERO IF FIRST REPORT OF ELECTION CYCLE)
- 27. **Disbursements from Current Reporting Period** [Line 18d above] \$ 242.95
- 28. **Total Disbursements this Election Cycle**[Add lines 26 and 27] \$ 652.95
- 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: \_\_\_\_\_ THROUGH: \_\_\_\_\_  
 PAGE \_\_\_\_\_ OF \_\_\_\_\_

\_\_\_\_\_  
 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

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.]

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