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### Final Report

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

<input checked="" type="checkbox"/> Original Report		<input type="checkbox"/> Amended Report – Report # _____	
ERNEST W. PALIN, JR.			
Name of Candidate Campaign Committee		Committee ID # (if one)	
3996 LARA RD.		804-462-5702	
Candidate's Residence Address (include number and street)		Daytime Phone Number (for person filling out this report)	
LANCASTER, VA 22503		epalin1@yahoo.com	
City, State and Zip		E-mail Address	

Termination Statement of Candidate/Treasurer	
<p>I declare, subject to the provisions of § 24.2-1016 of the <i>Code of Virginia</i>, which is punishable up to a Class 5 Felony, that, to the best of my knowledge, this <b>FINAL REPORT</b> for the period beginning <u>Oct 25, 2019</u> and ending <u>Nov. 28, 2019</u>, including all accompanying schedules, fully discloses all financial activities for this period and this committee. I further declare that this committee is being disbanded and that this <b>FINAL REPORT</b> fully discloses all previously unreported receipts and has disbursed all funds in accordance with § 24.2-948.4 of the <i>Code of Virginia</i> and that this candidate committee has no outstanding debts.</p>	
<u>11/15/2019</u> Date	 Signature of Treasurer or Candidate



2019 Reporting Year

<input type="checkbox"/> Check here if this is an Amended Report Number:		Committee ID Number:
ERNEST W. PALIN JR.		NOVEMBER 5, 2019
NAME OF CANDIDATE COMMITTEE P.O. BOX 336; 3996 LARA Rd.		DATE OF ELECTION BOARD OF SUPERVISORS 2
MAILING ADDRESS (INCLUDE NUMBER AND STREET): LANCASTER, VA 22503		OFFICE SOUGHT epalin1@yahoo.com 804-462-5702
CITY, STATE AND ZIP CODE		DISTRICT
		EMAIL / DAYTIME TELEPHONE NUMBER (for person preparing this report)
<b>NO ACTIVITY STATEMENT</b>		
<input checked="" type="checkbox"/> 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:		
\$ <u>0.00</u>		
<b>REPORT DATE [CHECK ONE SQUARE BELOW]</b>		
<b>MAY ELECTION</b> Candidates who will have activity pertaining to the 2019 May general election have reports due on the following dates:  <input type="checkbox"/> APRIL 15, 2019 <input type="checkbox"/> APRIL 29, 2019 <input type="checkbox"/> JUNE 17, 2019 <input type="checkbox"/> JULY 15, 2019 <input type="checkbox"/> JANUARY 15, 2020	<b>NOVEMBER ELECTION</b> Candidates who have activity pertaining to the 2019 June primaries and/or November general elections have reports due on the following dates:  <input type="checkbox"/> APRIL 15, 2019 <input type="checkbox"/> JUNE 3, 2019 <input type="checkbox"/> JULY 15, 2019 <input type="checkbox"/> SEPTEMBER 16, 2019 <input type="checkbox"/> OCTOBER 15, 2019 <input type="checkbox"/> OCTOBER 28, 2019 <input checked="" type="checkbox"/> DECEMBER 5, 2019 <input type="checkbox"/> JANUARY 15, 2020	<b>NON-ELECTION YEAR</b> CANDIDATE'S whose office is <u>not</u> up for election in 2019 have reports due on the following dates:  <input type="checkbox"/> JULY 15, 2019 <input type="checkbox"/> JANUARY 15, 2020  <b>SPECIAL ELECTION</b> <input type="checkbox"/> PRE-ELECTION <input type="checkbox"/> POST-ELECTION
<b>STATEMENT OF TREASURER OR CUSTODIAN OF THE BOOKS</b>		
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 <u>Oct. 25, 2019</u> through <u>Nov. 20, 2019</u> , including all its accompanying schedules, is to the best of my knowledge and belief true, correct and complete.		
<u>Ernest W. Palin Jr.</u> SIGNATURE OF TREASURER OR CUSTODIAN OF THE BOOKS		<u>11/10/2019</u> DATE

**SCHEDULE A: DIRECT CONTRIBUTIONS OVER \$100**

MUST BE TYPED OR PRINTED LEGIBLY IN INK

REPORTING PERIOD: Oct. 25, 19 THROUGH: Nov. 28, 19  
PAGE: 1 OF:     

ERNEST W. PALIN, JR.  
FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

<b>COLUMN 1</b> FULL NAME OF CONTRIBUTOR MAILING ADDRESS OF CONTRIBUTOR & ZIP [LIST IN ALPHABETICAL ORDER]	<b>COLUMN 2</b> BUSINESS/CORPORATE DONOR 1. NOT REQUIRED 2. TYPE OF BUSINESS 3. PRINCIPAL PLACE OF BUSINESS <span style="margin-left: 20px;">                         INDIVIDUAL DONOR                          1. EMPLOYER OR BUSINESS                          2. OCCUPATION                          3. PRINCIPAL PLACE OF BUSINESS                     </span>		<b>COLUMN 3</b> DATE RECEIVED	<b>COLUMN 4</b> CONTRIBUTION THIS PERIOD	<b>COLUMN 5</b> AGGREGATE TO DATE
N/A	1. 2. 3.				
	1. 2. 3.				
	1. 2. 3.				
	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.			<b>TOTAL THIS PERIOD</b> [ENTER ON LAST PAGE OF SCHEDULE A AND ON LINE 1 OF SCHEDULE G.]	<u>0.00</u>	

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

REPORTING PERIOD: Oct. 25, 19 THROUGH: Nov. 28, 19  
 PAGE: 1 OF 1

MUST BE TYPED OR PRINTED LEGIBLY IN INK ERNEST W. PALIN JR.

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><u>DONOR INFORMATION</u></p> <p>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>
<p>N/A</p>	<p>1. 2. 3. 4. 5.</p>			
	<p>1. 2. 3. 4. 5.</p>			
	<p>1. 2. 3. 4. 5.</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 B AND ON LINES 2 AND 7 OF SCHEDULE G.]</p>	<p><u>0.00</u></p>	

**SCHEDULE C:**

**BANK INTEREST, REFUNDED EXPENDITURES AND REBATES**

MUST BE TYPED OR PRINTED LEGIBLY IN INK

REPORTING PERIOD: Oct. 25, 19 THROUGH: Nov. 28, 19  
PAGE: 1 OF: 1

ERNEST W. PALIN, JR.  
FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

COLUMN 1 FULL NAME AND ADDRESS OF PAYER [LIST IN ALPHABETICAL ORDER]	COLUMN 2 REASON/TYPE OF PAYMENT	COLUMN 3 DATE RECEIVED	COLUMN 4 PAYMENT AMOUNT
N/A			
FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.			TOTAL THIS PERIOD [ENTER ON LAST PAGE OF SCHEDULE C AND ON LINE 6 OF SCHEDULE G.] <u>0.00</u>

**SCHEDULE D: EXPENDITURES**

MUST BE TYPED OR PRINTED LEGIBLY IN INK

REPORTING PERIOD: Oct. 25, 19 THROUGH: Nov. 28, 19

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

PAGE: 1 OF 1

ERNEST W. PALIN JR.  
 FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

<b>COLUMN 1</b> PERSON OR COMPANY PAID MAILING ADDRESS OF PAYEE INCLUDE ZIP	<b>COLUMN 2</b> ITEM OR SERVICE	<b>COLUMN 3</b> NAME OF PERSON AUTHORIZING EXPENDITURE	<b>COLUMN 4</b> DATE OF EXPENDITURE	<b>COLUMN 5</b> AMOUNT PAID
N/A				
FILER IS SUBJECT TO PENALTIES 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.] 0.00

**SCHEDULE E: LOANS**

MUST BE TYPED OR PRINTED LEGIBLY IN INK

REPORTING PERIOD: Oct. 25, 19 THROUGH: Nov. 28, 2019  
PAGE 1 OF 1

ERNEST W. PALIN JR.

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

**PART I: ITEMIZATION OF LOANS RECEIVED**

<u>COLUMN 1</u> FULL NAME OF LENDER ADDRESS OF LENDER (INCLUDE ZIP CODE) [LIST IN ALPHABETICAL ORDER]	<u>COLUMN 2</u> FULL NAME OF CO-BORROWER, GUARANTOR OR ENDORSER ADDRESS (INCLUDE ZIP CODE)	<u>COLUMN 3</u> DATE RECEIVED	<u>COLUMN 4</u> AMOUNT OF LOAN THIS PERIOD	<u>COLUMN 5</u> REMAINING LOAN BALANCE
N/A				
<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**

<u>COLUMN 1</u> FULL NAME OF LENDER ADDRESS OF LENDER (INCLUDE ZIP CODE) [LIST IN ALPHABETICAL ORDER]	<u>COLUMN 2</u> FULL NAME OF CO-BORROWER, GUARANTOR OR ENDORSER ADDRESS (INCLUDE ZIP CODE)	<u>COLUMN 3</u> DATE REPAID	<u>COLUMN 4</u> AMOUNT REPAYED THIS PERIOD	<u>COLUMN 5</u> REMAINING LOAN BALANCE
FILER IS SUBJECT TO PENALTIES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.	<b>TOTAL THIS PERIOD</b> [ENTER ON LAST PAGE OF SCHEDULE E, PART I AND ON LINE 14 OF SCHEDULE G]		0.00	

**SCHEDULE F:**

REPORTING PERIOD: Oct. 25, 19 THROUGH: Nov. 28, 2019

**DEBTS REMAINING UNPAID AS OF THIS REPORT**

PAGE: 1 OF 1

MUST BE TYPED OR PRINTED LEGIBLY IN INK

Include all contracts, credit purchases and loans payable.

ERNEST W. PALIN, JR.  
FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

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
N/A			
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.]	0.00



# 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 OCT. 25, 2019 THROUGH NOV. 28, 2019

ERNEST W. PALIN, JR.

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>0.00</u>	
2. Schedule B [Over \$100]	# <u>0</u>	\$ <u>0.00</u>	
3. Un-itemized cash contributions [\$100 or less]	# <u>0</u>	\$ <u>0.00</u>	
4. Un-itemized In-Kind Contributions [\$100 or less]	# <u>0</u>	\$ <u>0.00</u>	
5. TOTAL [Add Lines 1, 2, 3 & 4]	# <u>0</u>		\$ <u>0.00</u>

## BANK INTEREST, REFUNDED EXPENDITURES AND REBATES

6. Schedule C [also enter on Line 17b on Schedule H] \$ 0.00

## EXPENDITURES MADE THIS PERIOD

7. Schedule B [From line 2 Above]	\$ <u>0.00</u>	
8. Un-itemized In-Kind contributions [From line 4 Above]	\$ <u>0.00</u>	
9. Schedule D [Expenditures]	\$ <u>0.00</u>	
10. TOTAL [add lines 7, 8 and 9]		\$ <u>0.00</u>

## RECONCILIATION OF LOAN ACCOUNT

11. Beginning loan balance [from Line 15 of last report]	\$ <u>0.00</u>	
12. Loans received this period [from Schedule E - Part I]	\$ <u>0.00</u>	
13. SUBTOTAL [Add Lines 11 and 12]		\$ <u>0.00</u>
14. Subtract: Loans repaid this period [from Schedule E - Part II]	(\$ <u>0.00</u> )	
15. Ending loan balance [subtract Line 14 from Line 13]		\$ <u>0.00</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 Oct. 25, 2019 THROUGH Nov. 28, 2019.

ERNEST W. PALIN, JR.

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]

\$ 0.00

17. Receipts for Current Reporting Period:

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

\$ 0.00

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

\$ 0.00

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

\$ 0.00

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

\$ 0.00

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

\$ 0.00

18. Disbursements for Current Reporting Period:

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

\$ 0.00

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

\$ 0.00

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

\$ 0.00

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

\$ 0.00

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

\$ 0.00

20. Total Unpaid Debts [from Schedule F of this report]

\$ 0.00

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

21. Balance at Start of Election Cycle

\$ 0.00

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

\$ 0.00

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

\$ 0.00

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

\$ 0.00

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

\$ 0.00

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

\$ 0.00

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

\$ 0.00

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

\$ 0.00

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

\$ 0.00

**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: Oct. 25, 19 THROUGH: Nov. 28, 19  
PAGE 1 OF 1

ERNEST W. PALIN, JR.

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
N/A					
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.] N/A



\* VIRGINIA \*  
DEPARTMENT of ELECTIONS

LARGE PRE-ELECTION MONETARY or IN-KIND CONTRIBUTIONS REPORT

This form is to report contributions as required by Va. Code § 24.2-947.9.

ERNEST W. PALIN, JR.

Full name of candidate, candidate committee, or political committee

COLUMN 1 FULL NAME OF CONTRIBUTOR & MAILING ADDRESS OF CONTRIBUTOR (LIST IN ALPHABETICAL ORDER)	COLUMN 2 CONTRIBUTORS OTHER THAN INDIVIDUAL 1. PRINCIPAL TYPE OF BUSINESS 2. PLACE OF BUSINESS INDIVIDUAL CONTRIBUTOR 1. OCCUPATION 2. NAME OF EMPLOYER OR 3. CITY & STATE WHERE EMPLOYED OR WHERE BUSINESS LOCATED		COLUMN 3 DATE RECEIVED	COLUMN 4 AMOUNT OF CONTRIBUTION	COLUMN 5 AGGREGATE CONTRIBUTIONS TO DATE
N/A					
				\$ N/A	