



* VIRGINIA *
DEPARTMENT of ELECTIONS

Campaign Finance Report
FOR A
Candidate Committee

2017 Reporting Year

<input type="checkbox"/> Check here if this is an Amended Report Number:		Committee ID Number:		N/A
Bott For Supervisor		7 Nov 2017		
NAME OF CANDIDATE COMMITTEE		DATE OF ELECTION		
SUPERVISOR		ONE		
MAILING ADDRESS (INCLUDE NUMBER AND STREET): 147 Crescent Cove Ln Lancaster, VA 22503		OFFICE SOUGHT		DISTRICT
		GRBIV@YAHOO.COM		462-5270
CITY, STATE AND ZIP CODE		EMAIL / DAYTIME TELEPHONE NUMBER (for person preparing this report)		
NO ACTIVITY STATEMENT				
<input 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:				
\$ _____				
REPORT DATE [CHECK ONE SQUARE BELOW]				
MAY ELECTION Candidates who will have activity pertaining to the 2017 May General Election have reports due on the following dates:	NOVEMBER ELECTION Candidates who have activity pertaining to the 2017 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 2017 have reports due on the following dates:		
<input type="checkbox"/> APRIL 17, 2017 <input type="checkbox"/> APRIL 24, 2017 <input type="checkbox"/> JUNE 15, 2017 <input type="checkbox"/> JULY 17, 2017 <input type="checkbox"/> JANUARY 16, 2018	<input type="checkbox"/> APRIL 17, 2017 <input type="checkbox"/> JUNE 5, 2017 <input type="checkbox"/> JULY 17, 2017 <input type="checkbox"/> SEPTEMBER 15, 2017 <input type="checkbox"/> OCTOBER 16, 2017 <input type="checkbox"/> OCTOBER 30, 2017 <input checked="" type="checkbox"/> DECEMBER 7, 2017 <input type="checkbox"/> JANUARY 16, 2018	<input type="checkbox"/> JULY 17, 2017 <input type="checkbox"/> JANUARY 16, 2018		
		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 <u>27 Oct</u> through <u>30 Nov</u> , including all its accompanying schedules, is to the best of my knowledge and belief true, correct and complete.				
GRBott II		12-5-2017		
SIGNATURE OF TREASURER OR CUSTODIAN OF THE BOOKS		DATE		

SCHEDULE A: DIRECT CONTRIBUTIONS OVER \$100

REPORTING PERIOD: 27 OCT THROUGH: 30 NOV

MUST BE TYPED OR PRINTED LEGIBLY IN INK

PAGE: RECEIVED

Bott For Supervisor

DEC 05 2017

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

COLUMN 1 FULL NAME OF CONTRIBUTOR MAILING ADDRESS OF CONTRIBUTOR & ZIP [LIST IN ALPHABETICAL ORDER]	COLUMN 2 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	COLUMN 3 DATE RECEIVED	COLUMN 4 CONTRIBUTION THIS PERIOD	COLUMN 5 AGGREGATE TO DATE
<i>(A large diagonal line is drawn across the entire table body.)</i>					
	1.				
	2.				
	3.				
	1.				
	2.				
	3.				
	1.				
	2.				
	3.				
	1.	NONE			
	2.				
	3.				
	1.				
	2.				
	3.				
	1.				
	2.				
	3.				
FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.				TOTAL THIS PERIOD [ENTER ON LAST PAGE OF SCHEDULE A AND ON LINE 1 OF SCHEDULE G.]	
				0	

SCHEDULE B: IN-KIND CONTRIBUTIONS OVER \$100

REPORTING PERIOD: 27 Oct THROUGH: 30 Nov PAGE: 1 OF 1

MUST BE TYPED OR PRINTED LEGIBLY IN INK
Bett For Supervisor

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

<p>COLUMN 1</p> <p>FULL NAME OF CONTRIBUTOR MAILING ADDRESS OF CONTRIBUTOR & ZIP [LIST IN ALPHABETICAL ORDER]</p>	<p>COLUMN 2</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>COLUMN 3</p> <p>DATE RECEIVED</p>	<p>COLUMN 4</p> <p>CONTRIBUTION THIS PERIOD</p>	<p>COLUMN 5</p> <p>AGGREGATE TO DATE</p>

	1. _____			
	2. _____			
	3. _____			
	4. _____			
	5. _____			
	1. <i>NONE</i>			
	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 0

SUPERSEDES ALL PREVIOUS VERSIONS

CFDA-945B

REVISED MAY 1, 2014

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 DEC 05 2014

**SCHEDULE C:
BANK INTEREST, REFUNDED EXPENDITURES AND REBATES**

REPORTING PERIOD: 27 OCT THROUGH: 30 NOV
PAGE: 1 OF: 1

MUST BE TYPED OR PRINTED LEGIBLY IN INK

Bob For Soderison

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
<i>NONE</i>			
<i>NONE</i>			
<i>NONE</i>			
<i>NONE</i>			
<i>NONE</i>			
<i>NONE</i>			
<i>NONE</i>			
<i>NONE</i>			
<p>TOTAL THIS PERIOD [ENTER ON LAST PAGE OF SCHEDULE C AND ON LINE 6 OF SCHEDULE G.]</p>			0

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

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

Boat For Supervisor

REPORTING PERIOD: 27 Oct THROUGH: 30 Nov

PAGE: 1 OF 1

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
<i>Rappahannock Keenond 27 N MAIN ST HILMARPOCK, VA 22482</i>	<i>POLITICAL ADS</i>	<i>GRBate</i>	<i>10-30-17</i>	<i>\$530.59</i>

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.] *530.59*

SCHEDULE E: LOANS

MUST BE TYPED OR PRINTED LEGIBLY IN INK

REPORTING PERIOD: 27 Oct THROUGH: 30 Nov
PAGE 1 OF 1

Bott For Supervisor

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
None This Period				
TOTAL THIS PERIOD [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
George R Bott IV 147 Crescent Cove Ln Lancaster, VA 22503	—	11-29-17	\$ 100	0
George R Bott IV 147 Crescent Cove Ln Lancaster, VA 22503	—	11-29-17	\$ 400	0
TOTAL THIS PERIOD [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.

REPORTING PERIOD: 27 Oct THROUGH: 30 Nov
PAGE: 1 OF 1

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.

Bott For Supervisor

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
<i>NONE</i>			
<i>(The rest of the table is crossed out with a diagonal line)</i>			
<p>FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN. [ENTER ON LAST PAGE OF SCHEDULE F AND ON LINE 20 OF SCHEDULE H.]</p>			0

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 27 Oct THROUGH 30 NOV - 2017

Bott For Supervisor

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>—</u>	\$ <u>0</u>	
2. Schedule B [Over \$100]	# <u>—</u>	\$ <u>0</u>	
3. Un-itemized cash contributions [\$100 or less]	# <u>3</u>	\$ <u>300</u>	
4. Un-itemized In-Kind Contributions [\$100 or less]	# <u>—</u>	\$ <u>0</u>	
5. TOTAL [Add Lines 1, 2, 3 & 4]	# <u>3</u>		\$ <u>300.00</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>530.59</u>	
10. TOTAL [add lines 7, 8 and 9]		\$ <u>530.59</u>

RECONCILIATION OF LOAN ACCOUNT

11. Beginning loan balance [from Line 15 of last report]	\$ <u>500.00</u>	
12. Loans received this period [from Schedule E - Part I]	\$ <u>0</u>	
13. SUBTOTAL [Add Lines 11 and 12]		\$ <u>500.00</u>
14. Subtract: Loans repaid this period [from Schedule E - Part II]	(\$ <u>500</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 27 Oct THROUGH 30 Nov 2017

Bott For Supervisor

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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] \$ 1,322.53
- 17. **Receipts for Current Reporting Period:**
 - a. Contributions received this period [Line 5 of Schedule G] \$ 300
 - 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] \$ 300
 - e. **Total Expendable Funds** [Add Lines 16 and 17d] \$ 1,622.53
- 18. **Disbursements for Current Reporting Period:**
 - a. Expenditures made this reporting period [Line 10 of Schedule G] \$ 530.59
 - b. Loans repaid this reporting period [Line 14 of Schedule G] \$ 500.00
 - c. Other surplus funds paid out [from Schedule I] \$ _____
 - d. **Total Payments Made** [Add lines 18a, 18b, and 18c] \$ 1,030.59
- 19. **Ending Balance** [Subtract Line 18d from Line 17e]
(MUST MATCH LINE 29) \$ 591.94 ←
- 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]
(ENTER ZERO IF FIRST REPORT OF ELECTION CYCLE) \$ 4,541.94
- 23. Receipts from Current Reporting Period [Line 17d above] \$ 300.00
- 24. Total Receipts this Election Cycle [Add lines 22 and 23] \$ 4,841.94
- 25. Total Funds Available [Add lines 21 and 24] \$ 4,841.94
- 26. Previous Disbursements [Line 28 from last report]
(ENTER ZERO IF FIRST REPORT OF ELECTION CYCLE) \$ 3,219.41
- 27. Disbursements from Current Reporting Period [Line 18d above] \$ 1,030.59
- 28. Total Disbursements this Election Cycle [Add lines 26 and 27] \$ 4,250
- 29. **Ending Balance** [Subtract Line 28 from Line 25 - Difference must match Line 19] \$ 591.94 ←

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: 27 OCT THROUGH: 30 NOV

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Bott For Supervisor
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
<i>No Surplus Left</i>					
TOTAL THIS PERIOD					
[ENTER ON LAST PAGE OF SCHEDULE I AND ON LINE 130 OF SCHEDULE H.]					0

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