



RECEIVED
NOV 15 2017

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 # _____ | |
| Robert S Westbrook | | | |
| Name of Candidate Campaign Committee | | Committee ID # (if one) | |
| 395 King Carter Dr | | 804-438-1000 | |
| Candidate's Residence Address (include number and street) | | Daytime Phone Number (for person filling out this report) | |
| Irvington VA 22480 | | drbob@va.metrocast.net | |
| 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 FINAL REPORT for the period beginning _____ and ending _____, 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 FINAL REPORT 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> | |
| <p>November 15, 2017</p> <p>Date</p> | <p>Robert S. Westbrook</p> <p>Signature of Treasurer or Candidate</p> |

SCHEDULE A: DIRECT CONTRIBUTIONS OVER \$100

MUST BE TYPED OR PRINTED LEGIBLY IN INK

Robert S. Westbrook

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

REPORTING PERIOD: 04-01-17 THROUGH: 11-15-17

PAGE: 1 OF: 1

| 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 | COLUMN 2 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 |
|--|--|--|---------------------------|---|-------------------------------|
| Westbrook, Robert S. PO BOX 130 Irvington VA 22180 | 1. SELF 2. DENTIST 3. 4346 Irvington Rd, Irvington VA | | 04-25-17 | 550.00 | 550.00 |
| | 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. | | | | TOTAL THIS PERIOD 550.00 | |
| | | | | [ENTER ON LAST PAGE OF SCHEDULE A AND ON LINE I OF SCHEDULE G.] | |

SCHEDULE B: IN-KIND CONTRIBUTIONS OVER \$100

REPORTING PERIOD: 04-01-17 THROUGH: 11-15-17

PAGE: 1 OF 1

MUST BE TYPED OR PRINTED LEGIBLY IN INK

Robert S Westbrock

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>DONOR INFORMATION</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. | | | | |
| 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

CFDA-945B

SUPERSEDES ALL PREVIOUS VERSIONS

REVISED MAY 1, 2014

RECEIVED
NOV 15 2017

SCHEDULE C:

BANK INTEREST, REFUNDED EXPENDITURES AND REBATES

MUST BE TYPED OR PRINTED LEGIBLY IN INK

Robert S Westbrook

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

REPORTING PERIOD: 04-01-17 THROUGH: 11-15-17
 PAGE: 1 OF: 1

| 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 |
|---|------------------------------------|---------------------------|----------------------------|
| Rappahannock River Yacht Club PO Box 55 Irvington VA 22480 | Rental Deposit | 10-23-17 | 250.00 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN. | | | 250.00 |
| TOTAL THIS PERIOD [ENTER ON LAST PAGE OF SCHEDULE C AND ON LINE 6 OF SCHEDULE G.] | | | |

SCHEDULE D: EXPENDITURES

MUST BE TYPED OR PRINTED LEGIBLY IN INK

REPORTING PERIOD: 04-01-17 THROUGH: 11-15-17
PAGE: 1 OF 2

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

Robert S Westbrook

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 |
|---|--|--|------------------------------------|-------------------------|
| Chesapeake Bank PO Box 1419 Kilmarnock VA 22482 | Checkprinting | F. Westbrook | 04-25-17 | 20.45 |
| VA Dept of Elections 1100 Bank St. Richmond VA 23219 | Registered Voter List | F. Westbrook | 05-01-17 | 33.00 |
| Rappahannock River Yacht Club PO Box 55 Irvington VA 22482 | Rental Deposit | F. Westbrook | 05-01-17 | 250.00 |
| Robert S. Westbrook PO Box 130 Irvington VA 22480 | Reimb: VA ASSOC OF COUNTIES 1207 E MAIN ST RICHMOND VA 23219 "SUPERVISORS MANUAL" | R. Westbrook | 10-23-17 | 35.00 |
| Robert S. Westbrook PO Box 130 Irvington VA 22480 | Reimb: LEXIS NEXIS PO BOX 9584 NY, NY 10087-4584 "VA LOCAL TAX 2016 ED" | R. Westbrook | 10-23-17 | 136.47 |
| 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.] | | | | Cont |

CFDA-945D

SUPersedes ALL PREVIOUS VERSIONS

REVISED OCTOBER 1, 2014

RECEIVED
NOV 15 2017

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

Robert S Westbrock

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

REPORTING PERIOD: 04-01-17 THROUGH: 11-15-17
PAGE: 2 OF 2

| 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 |
|---|--|--|------------------------------------|-------------------------|
| Frances Westbrock PO Box 130 Invington VA 22480 | Reimb: Kilmarnock Lettering 217 S. Main St Kilmarnock VA 22482 | F. Westbrock | 10-23-17 | 19.00 |
| Chesapeake Bank PO Box 1419 Kilmarnock VA 22482 | Refurbish Banner Monthly Service Fees 6 @ \$5.00 ea. | F. Westbrock | 06-01-17 thru 11-15-17 | 30.00 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 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.] | | | | 523.92 |

RECEIVED
NOV 15 2017

SCHEDULE E: LOANS

MUST BE TYPED OR PRINTED LEGIBLY IN INK

REPORTING PERIOD: 04-01-17 THROUGH: 11-15-17

PAGE 1 OF 1

Robert S Westbrook

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 |
|--|---|-------------------------------------|--|--|
| | | | | |
| | | | | |
| | | | | |

PART II: ITEMIZATION OF LOANS REPAYED

| TOTAL THIS PERIOD [ENTER ON LAST PAGE OF SCHEDULE E, PART I AND ON LINE 12 OF SCHEDULE G] | | | | |
|--|---|------------------------------------|--|--|
| 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 REPAYED | COLUMN 4 AMOUNT REPAYED THIS PERIOD | COLUMN 5 REMAINING LOAN BALANCE |
| | | | | |
| | | | | |
| | | | | |

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

0

RECEIVED
NOV 15 2017

RECEIVED
NOV 15 2017

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 04-01-17 THROUGH 11-15-17

Robert S Westbrook

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>1</u> | \$ <u>550.00</u> |
| 2. Schedule B [Over \$100] | # _____ | \$ _____ |
| 3. Un-itemized cash contributions [\$100 or less] | # _____ | \$ _____ |
| 4. Un-itemized In-Kind Contributions [\$100 or less] | # _____ | \$ _____ |
| 5. TOTAL [Add Lines 1, 2, 3 & 4] | # <u>1</u> | \$ <u>550.00</u> |

BANK INTEREST, REFUNDED EXPENDITURES AND REBATES

6. Schedule C [also enter on Line 17b on Schedule H] \$ 250.00

EXPENDITURES MADE THIS PERIOD

| | |
|--|------------------|
| 7. Schedule B [From line 2 Above] | \$ _____ |
| 8. Un-itemized In-Kind contributions [From line 4 Above] | \$ _____ |
| 9. Schedule D [Expenditures] | \$ <u>523.92</u> |
| 10. TOTAL [add lines 7, 8 and 9] | \$ <u>523.92</u> |

RECONCILIATION OF LOAN ACCOUNT

| | |
|---|-------------|
| 11. Beginning loan balance [from Line 15 of last report] | \$ <u>∅</u> |
| 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] | \$ <u>∅</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 04-01-17 THROUGH 05-11-17.

Robert S Westbrook

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

*Please Enter Zero On Lines with No Activity

RECEIVED
NOV 15 2017

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

17. Receipts for Current Reporting Period:

- a. Contributions received this period [Line 5 of Schedule G] \$ 550.00
- b. Bank interest, refunded expenditures and rebates [Line 6 of Schedule G] \$ 250.00
- c. Loans received this period [Line 12 of Schedule G] \$ _____
- d. **Subtotal:** Contributions and Receipts received this period [Add Lines 17a, 17b and 17c above] \$ 800.00
- e. **Total Expendable Funds** [Add Lines 16 and 17d] \$ _____

18. Disbursements for Current Reporting Period:

- a. Expenditures made this reporting period [Line 10 of Schedule G] \$ 523.92
- b. Loans repaid this reporting period [Line 14 of Schedule G] \$ _____
- c. Other surplus funds paid out [from Schedule I] \$ 276.08
- d. **Total Payments Made** [Add lines 18a, 18b, and 18c] \$ 800.00

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

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

Committee's Receipts and Disbursements – Election Cycle Totals

- 21. Balance at Start of Election Cycle \$ ∅
- 22. Previous Receipts [Line 24 from last report] (ENTER ZERO IF FIRST REPORT OF ELECTION CYCLE) \$ ∅
- 23. Receipts from Current Reporting Period [Line 17d above] \$ 800.00
- 24. Total Receipts this Election Cycle [Add lines 22 and 23] \$ 800.00
- 25. Total Funds Available [Add lines 21 and 24] \$ 800.00
- 26. Previous Disbursements [Line 28 from last report] (ENTER ZERO IF FIRST REPORT OF ELECTION CYCLE) \$ ∅
- 27. Disbursements from Current Reporting Period [Line 18d above] \$ 800.00
- 28. Total Disbursements this Election Cycle [Add lines 26 and 27] \$ 800.00
- 29. **Ending Balance** [Subtract Line 28 from Line 25 - Difference must match Line 19] \$ ∅

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: 04-01-17 THROUGH: 11-15-17
 PAGE 1 OF 1

Robert S. Westbrook

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 |
|--|---|---------------------------------------|--|------------------------------------|-------------------------|
| Robert Westbrook | PO Box 130 Irvington VA 22980 | To close campaign checking account | f. Westbrook | 11-15-17 | 276.08 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN. [ENTER ON LAST PAGE OF SCHEDULE I AND ON LINE 18d OF SCHEDULE H] | | | | | 276.08 |