Allan Levene for Congress 678-819-2089 x 118 | 678-819-2795 face | CEIVED

4290 Bells Ferry Road, Suite 106-574, Kennesaw, GA 30144

2014 JUL 16 AM 8: 39 FEC MAIL GENTER

July 10, 2014

FEDERAL ELECTION COMMISSION Form 3 report 999 E Street, NW Washington, DC 20463

Sir,

I am enclosing my 2014 House FEC Form 3 termination report. As I lost the primary, I forgave the loans to myself, from myself and have zeroed out the remaining funds from the bank account. In addition, no expenses or donations occurred during this final period.

Please send a termination acknowledgment, and if I have made an error please let me know so it can be corrected.

Allan Levene

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The Committee of the Co

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

2014 JUL 16 AM 8: 39

Office HISE ONVALL OF MITE

NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
Allan Levene for (Congress Committee			1
				1
	4290 Bells Ferry Rd.	Suite 106-574		
ADDRESS (number and street)	1			
Check if different than previously reported. (ACC)	Kennesaw		[GA] [3014	*
2. FEC IDENTIFICATION N	JMBER ▼C	CITY A	STATE	ZIP CODE
C 00546176	3. IS RE	THIS X NEW PORT (N) OR	AMENDED (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT (Ch	oose One) (b) 12-l	Day PRE -Election Report for the	ne:'	
(a) Quarterly Reports:		Primary (12P)	General (12G)	Runoff (12R)
April 15 Quarterly I		Convention (12C)	Special (12S)	
July 15 Quarterly F	·	M M / D O	, <u> </u>	in the
October 15 Quarte January 31 Year-Er		ction on	<u> </u>	State of
Ualidary 31 Tear-Li	(c) , 30-l	Day POST-Election Report for General (30G)	Runoff (30R)	Special (30S)
X Termination Report		ction on	, <u>*****</u>	in the State of
5. Covering Period 05	01 / 2014	through	06 ' 30° ' 20°	4 * * * *
I certify that I have examined th		of my knowledge and belief it	is true, correct and comp	olete.
Type or Print Name of Treasure Signature of Treasurer	Allah Levene	9. Mar W. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Date 07 / (2014
NOTE: Submission of false, erron	eous, o incomplete informat	(/ tion may subject the person sign	ning this Report to the pen	alties of 2 U.S.C. §437g.
Office Use			1	EC FORM 3

SUMMARY PAGE

		FEC Form 3 (Revised 02/2003)	of Receipts and Disbursements	Page 2
W	rite d	or Type Committee Name		*
		Allan Levene for Congre	ess Committee	·
Re	eport	Covering the Period: From:	05 / 01 / 2014	To: 06 30 ' 2014 ' Y
	Net	Contributions (other than loans)	COLUMN A This Period	COLUMN B Election Cycle-to-Date
	(a)	Total Contributions (other than loans) (from Line 11(e))	0.00	640.00
	(b)	Total Contribution Refunds (from Line 20(d))		
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	640.00
	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	0.00	7416.42
	(b)	Total Offsets to Operating Expenditures (from Line 14)		
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	7416.42
		sh on Hand at Close of porting Period (from Line 27)	0.00	•
	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	0.00	•
0.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	0.00	Forgiven by candidate, as funds loaned b candidate to candidate's committee

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 12/2003)	of Receipts	Page: 3
Write or Type Committee Name		
Allan Levene for Con	gress Committee	•.
Report Covering the Period: From:	05 / 01° / 2014 T	o: M06 / 30 b / 2014 Y
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than		
Political Committees (i) Itemized (use Schedule A)	0.00	620.00
(ii) Unitemized		: 20.00
(iii) TOTAL of contributions from individuals	0.00	640.00
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) The Candidate		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		640.00
12. TRANSFERS FROM OTHER		
AUTHORIZED COMMITTEES	0.00	
13. LOANS: (a) Made or Guaranteed by the		
Candidate	0.00	6800.00
(b) All Other Loans		
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	6800.00
14. OFFSETS TO OPERATING	·	
EXPENDITURES (Refunds, Rebates, etc.)		
15. OTHER RECEIPTS		inger in the second contraction of the secon
(Dividends, Interest, etc.)		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	7440.00

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Disbursements

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
•			
17.	OPERATING EXPENDITURES	0.00	
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19.	LOAN REPAYMENTS:		ė
	(a) Of Loans Made or Guaranteed by the Candidate	1440.33	
	(b) Of All Other Loans		
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	1440.33	
	(add Lines Total and (b))	Balance forgiven by candidate	
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other		
	Than Political Committees		
	(A) Dalitical Backs Garagina		
	(b) Political Party Committees		
	(such as PACs)		
	(d) TOTAL CONTRIBUTION REFUNDS		
	(add Lines 20(a), (b), and (c))		
		International systems of the second s	
21.	OTHER DISBURSEMENTS		
22.	TOTAL DISBURSEMENTS	to the state of th	
	(add Lines 17, 18, 19(c), 20(d), and 21)	1440.33	7416.42
	III. CASH SU	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	1440.33
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
	•		Commissional According to Section Sect
25.	SUBTOTAL (add Line 23 and Line 24)		1440.33
	TOTAL DISDLIBOUNEAUTO TURO DESIGN # -		. 1440.33
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	
27.	CASH ON HAND AT CLOSE OF REPORTING		0.00
	(subtract Line 26 from Line 25)	······································	terred and track the section of the
	e tour en la transmission de la company		and the second of the second o

INDELIZE REGISTER

	ILE A (FEC Form 3) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 11d
Any information for for comm	tion copied from such Reports and S percial purposes, other than using the	tatements m	nay not be sold or used by any paddress of any political committe	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF	F COMMITTEE (In Full) Allan Levene for Congress	Committe	e	
Full Name	e (Last, First, Middle Initial)			
A. Mailing A	ddress			Date of Receipt
City		State	Zip Code	
	number of contributing olitical committee.	C		Amount of Each Receipt this Period
Name of	Employer	Occupation	1	
l4	For: mary General ner (specify)	Election C	ycle-to-Date	
Full Name	e (Last, First, Middle Initial)			Pute of Paralist
B. Mailing A	ddress	 		Date of Receipt
City		State	Zip Code	
	number of contributing olitical committee.	C	~~~~	Amount of Each Receipt this Period
Name of	Employer	Occupation	1	
—	For: mary	Election C	ycle-to-Date	
Full Nam	e (Last, First, Middle Initial)			
C. Mailing A	ddress			Date of Receipt
City		State	Zip Code	- Indicate temperal destructural
	number of contributing olitical committee.	С		Amount of Each Receipt this Period
	Employer none	Occupation nor	ne	
1 1	For: mary General ner (specify)	Election C	ycle-to-Date	·
SUBTOTAL	of Receipts This Page (optional)			
TOTAL Thi	s Period (last page this line number o	anly)		

TEROST - TOUGH CANAGES

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1 OF 1 (check only one) X 17
Ar	y information copied from such Reports and Statements me for commercial purposes, other than using the name and	hay not be sold or used by any address of any political committee	person for the purpose of soliciting contributions
۲	NAME OF COMMITTEE (In Full)	addisse of any political committee	as some contributions north addit committee,
\rangle	Allan Levene for Congress Committee	ee	
	Full Name (Last, First, Middle Initial)		Date of Disbursement
A.			Date of Disbursement
	Mailing Address		
	City State	Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement]
	Candidate Name	Category, Type	, , , , , , , , , , , , , , , , , , ,
	Office Sought: House Disbursement For Senate Primary President Other (s	r: General	
	State: GA District:		
В.	Full Name (Last, First, Middle Initial)		Date of Disbursement
	Mailing Address		Mam / DaD / AaAaA
	City State	Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement]
	Candidate Name	Category, Type	7
	Office Sought: House Disbursement For Senate Primary President Other (s	General	
_	State: District:		
C.	Full Name (Last, First, Middle Initial)		Date of Disbursement
	Mailing Address	· — — — — — — — — — — — — — — — — — — —	M M / D D / Y Y Y Y
	City State Z	Amount of Each Disbursement this Period	
	Purpose of Disbursement	7	
	Candidate Name		
	Office Sought: House Disbursement For Senate Primary President Other (s	General	
_	State: District:		
٤	SUBTOTAL of Disbursements This Page (optional)		
1	OTAL This Period (last page this line number only)		

SCHEDULE C (FEC Form 3) .OANS		Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1 FOR LINE NUMBER: (check only one)
NAME OF COMMITTEE (in Fuil)	•		
	Congress Committee		-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
LOAN SOURCE Full Name (Last, Fin	st, Middle Initial)		ction:
Levene, Allan		<u>X</u>	Primary General
Mailing Address 4290 Bells Ferry Rd. Suite 1	06-574		Other (specify)
City Kennesaw	State ZIP Co GA 3014		
Original Amount of Loan 700.00	Cumulative Payment To	Date Balance	Outstanding at Close of This Period 5359.67 forgiven
Date Incurred Mod / 04 / 2014 List All Endorsers or Guarantors (if	12 31	Interest Rate 2016 2.00	Secured: W (apr) Yes No
1. Full Name (Last, First, Middle Initi		Name of Employer	
Mailing Address		Occupation	
City S	ate ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initia	1)	Name of Employer	
Mailing Address		Occupation	
City S	tate ZIP Code	Amount Guaranteed Outstanding:	0
3. Full Name (Last, First, Middle Initia	1)	Name of Employer	
Mailing Address	· · · · · · · · · · · · · · · · · · ·	Occupation	
City S	tate ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initia	1)	Name of Employer	
Mailing Address		Occupation	
City S	late ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (opt	ional)		
TOTALS This Period (last page in this li	ne only)		700.00

SCHEDULE C-1 (FEC Form 3) OANS AND LINES OF CREDIT FROM	LENDING INSTITUTION	Supplementary for Information found on		
ederal Election Commission, Washington, D.C. 20463		Page of Schedule C		
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER		
Allan Levene for Congress Committ	ee	C 00546176		
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Date (ADD)		
Full Name	The second secon	Interest Rate (APR)		
Mailing Address	Date Incurred or Establishe	d Man / Gab / Yavavay		
City State Zip Code	Date Due			
A. Has loan been restructured? No Yes	If yes, date originally incurr	red Mam / Dab /		
B. If line of credit, Amount of this Draw:	Total Outstanding Balance:			
C. Are other parties secondarily liable for the debt in No Yes (Endorsers and guarantors	curred? must be reported on Schedule C	S.)		
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? No Yes If yes, specify: Does the lender have a pointerest in it?				
E. Are any future contributions or future receipts of in collateral for the loan? No Yes If ye	nterest income, pledged as s, specify:	interest in it? No Yes What is the estimated value?		
A depository account must be established pursua to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:			
Date account established:	Address:			
M M / D D / Y Y Y Y	City, State, Zip:			
F. If neither of the types of collateral described abovexceed the loan amount, state the basis upon wh	re was pledged for this loan, or if			
G. COMMITTEE TREASURER Typed Name Signature		DATE / POYOUS		
H. Attach a signed copy of the loan agreement.				
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the are accurate as stated above. II. The loan was made on terms and conditions similar extensions of credit to other borrower. III. This institution is aware of the requirement the complied with the requirements set forth at	ne terms of the loan and other inf s (including interest rate) no more rs of comparable credit worthines hat a loan must be made on a ba	favorable at the time than those imposed for its. asis which assures repayment, and has		
AUTHORIZED REPRESENTATIVE	· · · · · · · · · · · · · · · · · · ·	DATE		
Typed Name Signature	Title	Maw / Bap / Ashada		

CHEDULE D (FEC Form 3)	(Use separate PAGE 1 OF 1
EBTS AND OBLIGATIONS	schedule(s) FOR LINE NUMBER: for each (check only one) 9
cluding Loans	numbered line) 10
AME OF COMMITTEE (In Full)	
Allan Levene for Congress Committee	·
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	• • • • • • • • • • • • • • • • • • • •
City State Zip Code	
City State Zip Code	
Outstanding Balance Beginning This Period	- · · · · · · · · · · · · · · · · · · ·
the state of the s	
hand and hand hand hand hand hand hand	
Amount Incurred This Period Payment	t This Period Outstanding Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
	·
Mailing Address , ·	
City State Zip Code	
Outstanding Balance Beginning This Period	
Amount Incurred This Period Payment	at This Period Outstanding Balance at Close of This Perio
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Z	Zip Code
Outstanding Balance Beginning This Period	
Catalana Salahas Sagamag Tina Tanas	•
hand made and the Control of the Con	
Amount Incurred This Period Payment	t This Period Outstanding Balance at Close of This Perio
SUBTOTALS This Period This Page (optional)	
SUBTOTALS This Period This Page (optional)	
TOTALS This Period (last page this line number only)	<u> </u>
A TOTAL OUTSTANDING LOANS from Colonial College	
) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
ADD 2) and 3) and carry forward to appropriate line of Summary P	Page (last page only)

HELOWIT - FANCE - NAMEDON

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Na	Name of Principal Campaign Committee (In Full) Allan Levene for Congress Committee				Report Cover From:	ing Period:	To: 06 / 30	, 2014 2014
	Committee Name						(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
Α		Allan Leven	e for Congress Com	mitte	e			
В	C	olumn Total Last Page O	nly			······		
	Total Contributions Total Contributions			(e) ine No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans	
	Α							
	В							
		(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures		(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
	A							
	В							
		(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Candidate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans		(q) ine No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
	Α				1440.33			
	В							
		(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements		(w) Line No. 22 Total risbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owad TO the Committee
i	Α				1440.33	1440.33	0.00	
	в			-				
		(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions		(cc) Line No. 7(c) let Operating Expenditures			
	Α	0.00						
	В							

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MLFC. 4290 Selis Ferry Road, Suite 106-574 Kennesaw, GA 30144

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt** Hand Delivered Postmarked USPS First Class Mail Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):