

Disclosure Report Cover

Amendment
 Yes No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Information		c. ID Number																																					
a. Full Name		COMMITTEE TO ELECT VERNETTA ALSTON																																					
b. Mailing Address (include City, State and Zip Code)		<div style="text-align: center; color: blue; font-weight: bold;">E-MAIL</div> <div style="text-align: center; color: blue; font-weight: bold;">SEP 07 2017</div> <div style="text-align: center; color: blue; font-weight: bold;">DURHAM BOE</div>																																					
PO BOX 379 DURHAM, NC 27702		d. Date Filed 09/05/2017																																					
		e. Phone Number (919) 794-4961																																					
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name																																				
2017	07/01/2017	08/29/2017	LUKE HIRST																																				
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)																																					
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:33%;">Municipal</th> <th style="width:33%;">State/County</th> <th style="width:33%;">Referendum</th> </tr> <tr> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> <td><input type="checkbox"/> Organizational</td> </tr> <tr> <td><input checked="" type="checkbox"/> Thirty-five day</td> <td><input type="checkbox"/> Quarterly</td> <td><input type="checkbox"/> Pre-referendum</td> </tr> <tr> <td><input type="checkbox"/> Pre-primary</td> <td><input type="checkbox"/> First</td> <td><input type="checkbox"/> Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-election</td> <td><input type="checkbox"/> Second</td> <td><input type="checkbox"/> Supplemental Final</td> </tr> <tr> <td><input type="checkbox"/> Pre-runoff</td> <td><input type="checkbox"/> Third</td> <td><input type="checkbox"/> Annual</td> </tr> <tr> <td><input type="checkbox"/> Semi-annual</td> <td><input type="checkbox"/> Fourth</td> <td><input type="checkbox"/> Special</td> </tr> <tr> <td><input type="checkbox"/> Mid Year</td> <td><input type="checkbox"/> Semi-annual</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Year End</td> <td><input type="checkbox"/> Mid Year</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Final</td> <td><input type="checkbox"/> Year End</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Special</td> <td><input type="checkbox"/> Final</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>		Municipal	State/County	Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input checked="" type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum	<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final	<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final	<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual	<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special	<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year		<input type="checkbox"/> Final	<input type="checkbox"/> Year End		<input type="checkbox"/> Special	<input type="checkbox"/> Final			<input type="checkbox"/> Special	
Municipal	State/County	Referendum																																					
<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational																																					
<input checked="" type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum																																					
<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final																																					
<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final																																					
<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual																																					
<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special																																					
<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual																																						
<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year																																						
<input type="checkbox"/> Final	<input type="checkbox"/> Year End																																						
<input type="checkbox"/> Special	<input type="checkbox"/> Final																																						
	<input type="checkbox"/> Special																																						
7. Type of Fund (if applicable, check one)		10. Special Report Name																																					
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:																																							
8. Number of Fundraisers this Report																																							
4																																							
3. Account Information		3. Account Information																																					
a. Financial Institution Full Name		a. Financial Institution Full Name																																					
SELF-HELP CREDIT UNION																																							
b. Purpose	c. Account Code	b. Purpose	c. Account Code																																				
CAMPAIGN EXPENSES	25																																						
	d. Period Begin Balance		d. Period Begin Balance																																				
	\$ 16,994.27		\$																																				
CERTIFICATION																																							
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board																																							
_____		_____	09/05/2017																																				
Printed Name of Signer		Signature of Appointed Treasurer	Date																																				
FOR OFFICE USE ONLY																																							
Date Received: _____	Employee: _____	Delivery Method																																					
Date Postmarked: _____	Employee: _____	<input type="checkbox"/> Normal Mail																																					
Date Scanned: _____	Employee: _____	<input type="checkbox"/> Registered Mail																																					
Date Data Entered: _____	Employee: _____	<input type="checkbox"/> Hand Delivered																																					
		<input type="checkbox"/> Electronically Filed																																					
		<input type="checkbox"/> Signer has not received mandatory training																																					
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.																																							
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.																																							

Detailed Summary

Amendment
 Yes No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON	2017 Thirty-five-day		
Start of Election Cycle: January 1, <u>2017</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 14,744.58	\$ 0.00
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 1,516.48	\$ 3,379.20
6) Contributions from Individuals (CRO-1210)		\$ 13,524.29	\$ 31,461.33
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00	\$ 2,000.00
9) Loan Proceeds (CRO-1410)		\$ 0.00	\$ 0.00
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00	\$ 200.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)		\$ 1.98	\$ 3.20
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00	\$ 0.00
11c) Outside Sources of Income (CRO-1250)		\$ 0.00	\$ 0.00
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00	\$ 0.00
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 15,042.75	\$ 37,043.73
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 6,723.71	\$ 12,621.96
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 26.94	\$ 225.33
15) Loan Repayments (CRO-1420)		\$ 0.00	\$ 0.00
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00	\$ 0.00
17) In-Kind Contributions (CRO-1510)		\$ 1,096.77	\$ 2,256.53
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 7,847.42	\$ 15,103.82
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 21,939.91	\$ 21,939.91
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00	
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00	
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00	
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00	
25) Administrative Support (CRO-1710)		\$ 0.00	\$ 0.00
26) Forgiven Loans (CRO-1440)		\$ 0.00	\$ 0.00
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00	\$ 0.00
28) Contributions to be Refunded (CRO-1215)		\$ 0.00	\$ 0.00

Aggregated Contributions from Individuals

Page 1 of 2

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Cash		08/26/2017	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/23/2017	\$	35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/25/2017	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/17/2017	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/17/2017	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Check		08/06/2017	\$	40.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Check		08/24/2017	\$	10.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Check		08/06/2017	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Cash		08/24/2017	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Cash		08/24/2017	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Check		08/06/2017	\$	35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/10/2017	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/17/2017	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		07/11/2017	\$	35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		07/06/2017	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/23/2017	\$	35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/25/2017	\$	20.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		07/07/2017	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Cash		08/24/2017	\$	36.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	In-Kind	JUL-AUG MILEAGE	08/29/2017	\$	45.48
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		07/18/2017	\$	50.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/24/2017	\$	35.00
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/29/2017	\$	50.00
4. Total only this Page					\$	816.48
5. Total of ALL CRO-1205 Pages					\$	1,516.48
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Aggregated Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)					2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON						
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		07/03/2017	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Check		08/06/2017	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		07/11/2017	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/14/2017	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/07/2017	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		07/18/2017	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Check		08/24/2017	\$ 40.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Cash		08/17/2017	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/24/2017	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/24/2017	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/15/2017	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/01/2017	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Check		08/06/2017	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/22/2017	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		07/18/2017	\$ 50.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Cash		08/06/2017	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Cash		08/17/2017	\$ 40.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Cash		08/27/2017	\$ 40.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Cash		08/24/2017	\$ 5.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/24/2017	\$ 20.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Check		08/24/2017	\$ 25.00	
<input type="checkbox"/> Add <input type="checkbox"/> Remove	25	Credit Card		08/24/2017	\$ 35.00	
4. Total only this Page					\$ 700.00	
5. Total of ALL CRO-1205 Pages <i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>					\$ 1,516.48	

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
VERNETTA ALSTON PO BOX 379 DURHAM, NC 27702 (919) 794-4961				ATTORNEY			
				c. Employer's Name/Specific Field			
				CENTER FOR DEATH PENALTY LITIGATION			
						e. Election Sum to Date	
						\$ 541.74	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	In-Kind	PRECINCTS MAP	07/11/2017	\$ 10.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LILITH ANDERSON 38 ROGERSON DR CHAPEL HILL, NC 27517 (919) 448-8353				PORTFOLIO MANAGEMENT			
				c. Employer's Name/Specific Field			
				BCBSNC			
						e. Election Sum to Date	
						\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Check		08/17/2017	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ANNA ARCENEUX 6004 KELVIN DR DURHAM, NC 27712 (919) 599-3733				ATTORNEY			
				c. Employer's Name/Specific Field			
				ACLU			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		08/27/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 310.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 13,524.29	

Contributions from Individuals

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
DOROTHY ARIAIL 2765 BROOKE RD STAFFORD, VA 22554 (910) 810-6606			ASSISTANT				
			c. Employer's Name/Specific Field LAKE CLAIR APARTMENTS				
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		08/21/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
BOB BOYKIN 4658 HIGHWAY 222 EAST KENLY, NC 27542 (919) 210-3105			PRIVATE INVESTIGATOR				
			c. Employer's Name/Specific Field AMERICAN DETECTIVE SERVICES, INC.				
						e. Election Sum to Date	
						\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Money Order		07/20/2017	\$ 150.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
SHEILA BRODERICK 1400 ARNETTE AVE DURHAM, NC 27707 (919) 943-1645			SOCIAL WORKER				
			c. Employer's Name/Specific Field DUKE UNIVERSITY				
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		08/17/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 350.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 13,524.29	

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CHANEL CHAMBERS 231 STROLLING WAY DURHAM, NC 27707 (919) 434-6154				MARKETING DIRECTOR			
				c. Employer's Name/Specific Field TANIUM			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		08/21/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
EMILY COWARD 2212 W CLUB BLVD DURHAM, NC 27705				RESEARCH ATTORNEY			
				c. Employer's Name/Specific Field UNC			
						e. Election Sum to Date	
						\$ 1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Check		08/21/2017	\$ 900.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MARJORIE COWARD 12781 LAVENDER KEEP CIRCLE FAIRFAX, VA 22033 (571) 236-5423				RETIRED			
				c. Employer's Name/Specific Field N/A			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Check		08/06/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,100.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 13,524.29	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CAITLIN CURTIS 1406 JAMES ST DURHAM, NC 27705 (206) 409-8397				NURSE PRACTITIONER			
				c. Employer's Name/Specific Field			
				DUKE			
						e. Election Sum to Date	
						\$ 150.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Check		08/24/2017	\$ 150.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JAY FERGUSON 3902 TYNDRUM DR DURHAM, NC 27705-6320				ATTORNEY			
				c. Employer's Name/Specific Field			
				THOMAS FERGUSON & MULLINS			
						e. Election Sum to Date	
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Check		08/03/2017	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
SONIA GARRISON 1203 NORTH ST DURHAM, NC 27701 (919) 491-9239				CONSULTANT			
				c. Employer's Name/Specific Field			
				SELF-EMPLOYED			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		08/23/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 500.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 13,524.29	

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
KRISTI GRAUNKE 1104 ENGLEWOOD AVE DURHAM, NC 27701 (404) 323-4052				ATTORNEY			
				c. Employer's Name/Specific Field SOUTHERN POVERTY LAW CENTER			
				e. Election Sum to Date		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Check		08/06/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
HOLLY HARDIN 912 ARNETTE AVE DURHAM, NC 27701 (919) 271-5990				CAMPAIGN MANAGER			
				c. Employer's Name/Specific Field COMMITTEE TO ELECT VERNETTA ALSTON			
				e. Election Sum to Date		\$ 309.18	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	In-Kind	MILEAGE FOR JUL-AUG	08/29/2017	\$ 49.70		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
SHAWN HEGELE 1015 GREEN ST DURHAM, NC 27701 (704) 968-8717				FUNDRAISING			
				c. Employer's Name/Specific Field BROOKLYN WORKFORCE INNOVATIONS			
				e. Election Sum to Date		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		08/17/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 249.70	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 13,524.29	

Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LUKE HIRST PO BOX 379 DURHAM, NC 27702 (919) 794-4961				ACCOUNTANT			
				c. Employer's Name/Specific Field			
				MIG MURPHY SISTROM, CPA, PC			
						e. Election Sum to Date	
						\$ 117.14	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	In-Kind	ENVELOPES	07/05/2017	\$ 3.99		
<input type="checkbox"/>	25	In-Kind	JUL-AUG MILEAGE	08/29/2017	\$ 30.01		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
EDWARD IVEY 388 BRIDGE ST APT 31 BROOKLYN, NY 11201 (919) 593-1921				ATTORNEY			
				c. Employer's Name/Specific Field			
				LINKLATERS LLP			
						e. Election Sum to Date	
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		07/17/2017	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MARION JOHNSON 413 E CHAPEL HILL ST APT 101 DURHAM, NC 27701 (704) 650-8025				POLICY ADVOCATE			
				c. Employer's Name/Specific Field			
				NC JUSTICE CENTER			
						e. Election Sum to Date	
						\$ 53.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		07/24/2017	\$ 53.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 587.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 13,524.29	

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ANGELA LIU 450 E WATERSIDE DR 1910 CHICAGO, IL 60601 (816) 304-7770				ATTORNEY			
				c. Employer's Name/Specific Field DECHERT LLP			
						e. Election Sum to Date \$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		07/21/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
AMY MACKIN 3913 STERLING RIDGE DURHAM, NC 27707 (919) 491-6118				ATTORNEY			
				c. Employer's Name/Specific Field HALL RENDER			
						e. Election Sum to Date \$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		08/06/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CARLOS MAHONEY 3408 MIDDLEBROOK DR DURHAM, NC 27705 (919) 623-6558				ATTORNEY			
				c. Employer's Name/Specific Field GLENN MILLS FISHER & MAHONEY			
						e. Election Sum to Date \$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		07/13/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 300.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 13,524.29	

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ELLAN MAYNARD 1163 HARP STREET RALEIGH, NC 27604 (919) 522-4909				OWNER			
				c. Employer's Name/Specific Field			
				SEA CHANGE HOME FURNISHINGS		e. Election Sum to Date	
						\$ 400.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Check		07/31/2017	\$ 400.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
REGINALD MITCHNER 6927 LOUISE CIRCLE SALEM, VA 24153 (540) 905-2789				RETIRED			
				c. Employer's Name/Specific Field			
				N/A		e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Check		07/20/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CAROL O'MALLEY 23288 ASPENHILL LANE MIDDLEBURG, VA 20118 (540) 905-3727				RETIRED			
				c. Employer's Name/Specific Field			
				N/A		e. Election Sum to Date	
						\$ 2,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Check		07/24/2017	\$ 2,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 2,500.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 13,524.29	

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BEN PAULSON 619 W MARKHAM AVE DURHAM, NC 27701 (919) 818-6767				SCIENTIST			
				c. Employer's Name/Specific Field EAG LABORATORIES			
				e. Election Sum to Date		\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		08/24/2017	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
KARI POINTS 1210 RUFFIN ST DURHAM, NC 27701 (646) 496-6754				POLICY ADVISOR			
				c. Employer's Name/Specific Field SELF			
				e. Election Sum to Date		\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		08/23/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
SAM POOLE 1317 VICKERS AVE DURHAM, NC 27707 (919) 724-0424				REAL ESTATE AGENT			
				c. Employer's Name/Specific Field 501 REALTY LLC			
				e. Election Sum to Date		\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		08/22/2017	\$ 250.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 600.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 13,524.29	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
SEBASTIAN REY 649 JEFFERSON HEIGHTS AVE NEW ORLEANS, LA 70121 (504) 252-8311				WEB DEVELOPER			
				c. Employer's Name/Specific Field			
				LET'S HATCH MEDIA			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		07/22/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
KEN ROSE 809 CAROLINA AVE DURHAM, NC 27705 (919) 886-0350				ATTORNEY			
				c. Employer's Name/Specific Field			
				SELF-EMPLOYED			
						e. Election Sum to Date	
						\$ 147.27	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	In-Kind	FOOD FOR HOUSE PARTY	08/06/2017	\$ 147.27		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BETH SILBERMAN 809 CAROLINA AVE DURHAM, NC 27705 (919) 698-9803				PHYSICAL THERAPIST			
				c. Employer's Name/Specific Field			
				DUKE HEALTH			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		07/31/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 347.27	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 13,524.29	

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JUDITH STIRLING 5 SEARIDGE LAGUNA NIGUEL, CA 92677 (949) 500-1406				STAY-AT-HOME SPOUSE			
				c. Employer's Name/Specific Field			
				N/A			
						e. Election Sum to Date	
						\$ 4,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Check		08/17/2017	\$ 4,000.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CASSANDRA STUBBS 1309 VIRGINIA AVE DURHAM, NC 27705 (919) 449-4885				LAWYER			
				c. Employer's Name/Specific Field			
				ACLU			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		07/12/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BRIAN STULL 54 BEVERLY DR DURHAM, NC 27707 (919) 767-4981				LAWYER			
				c. Employer's Name/Specific Field			
				AMERICAN CIVIL LIBERTIES UNION			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		08/02/2017	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 4,200.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 13,524.29	

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ALEXIS VANDERHUYE 801 RIDGE DR MCLEAN, VA 22101 (703) 442-0422				CONSULTANT			
				c. Employer's Name/Specific Field			
				ELEVATE			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	25	Credit Card		08/26/2017		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
AMY VRIEZE 2005 CAROLINA AVE DURHAM, NC 27705 (919) 274-1820				FARMER			
				c. Employer's Name/Specific Field			
				BLUEBIRD MEADOWS OF NC			
						e. Election Sum to Date	
						\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	25	Credit Card		07/11/2017		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
RYAN WILDE 5424 TRALEE PL RALEIGH, NC 27609-4438 (315) 408-2168				BUSINESS OWNER			
				c. Employer's Name/Specific Field			
				BUDGET BLINDS OF EAST RALEIGH			
						e. Election Sum to Date	
						\$ 1,881.92	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
<input type="checkbox"/>	25	In-Kind	FUNDRAISING DINNER	07/27/2017		\$ 457.85	
<input type="checkbox"/>	25	In-Kind	PALM CARDS	08/22/2017		\$ 77.39	
<input type="checkbox"/>	25	In-Kind	MILEAGE FOR JUL-AUG	08/29/2017		\$ 231.12	
4. Total only this Page						\$ 966.36	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 13,524.29	

Contributions from Individuals

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
CARA WITTEKIND 3400 SHAFTSBURY ST DURHAM, NC 27704 (828) 316-1483			CITY PLANNING CONSULTANT				
			c. Employer's Name/Specific Field SELF-EMPLOYED				
						e. Election Sum to Date	
						\$ 63.96	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Cash		08/24/2017	\$ 20.00		
<input type="checkbox"/>	25	In-Kind	FOOD FOR HOUSE PARTY	08/24/2017	\$ 43.96		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
KATHRYN WRIGGELSWORTH 3805 LANCASTER DR RALEIGH, NC 27612 (919) 345-5534			PSYCHIATRIC NURSE PRACTITIONER				
			c. Employer's Name/Specific Field LIFE ENHANCEMENT MEDICAL SERVICES				
						e. Election Sum to Date	
						\$ 750.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Credit Card		07/12/2017	\$ 750.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments		
KAY WRIGGELSWORTH 7401 SPYGLASS WAY RALEIGH, NC 27615 (919) 215-9754			RETIRED				
			c. Employer's Name/Specific Field N/A				
						e. Election Sum to Date	
						\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Check		07/20/2017	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 1,013.96	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 13,524.29	

Contributions from Individuals

Amendment
 Yes No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DENNIS YOUNG 1305 ENSENADA WAY LOS ALTOS, CA 94024 (650) 209-1811				PARTNER			
				c. Employer's Name/Specific Field			
				YOUNG, CRIAG & CO LLP		e. Election Sum to Date	
						\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>	25	Check		08/03/2017	\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$ 500.00	
5. Total of ALL CRO-1210 Pages <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						\$ 13,524.29	

Other Receipt Sources

Amendment
 Yes No

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

1. Committee Full Name (and Fund if applicable)		2. ID Number		
COMMITTEE TO ELECT VERNETTA ALSTON				
3. Type of Receipt Source (Please use separate CRO-1250 forms for each type of Receipt Source.)				
<input checked="" type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income				
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Not-for-Profit Federal ID #	d. Comments	
SELF-HELP CREDIT UNION 123 W MAIN ST DURHAM, NC 27701 (919) 683-2000				
		c. Outside Source Explanation		
			e. Election Sum to Date	
			\$ 3.20	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
25	Electric Funds Tran		07/31/2017	\$ 1.98
				\$
5. Total only this Page				\$ 1.98
6. Total of ALL CRO-1250 Pages				\$ 1.98
<i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i>				
<i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i>				
<i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>				

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
CAPITOL PROMOTIONS PO BOX 231 GLENSIDE, PA 19038 (800) 884-3024							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 1,525.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
25	Debit Card	B	08/05/2017	\$ 1,525.00	YARD SIGNS		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
DURHAM COMMITTEE ON THE AFFAIRS OF BLACK PEOPLE PO BOX 3846 DURHAM, NC 27702 (919) 578-5506							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:			
						\$ 399.68	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
25	Debit Card	O	08/08/2017	\$ 149.68	TICKETS TO BANQUET		
25	Debit Card	A	08/08/2017	\$ 250.00	BANQUET AD		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
DURHAM COUNTY BOARD OF ELECTIONS 201 N ROXBORO ST DURHAM, NC 27701 (919) 560-0700							
				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 221.17	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
25	Check	O	07/11/2017	\$ 221.17	FILING FEE		
				\$			
5. Total only this Page						\$ 2,145.85	
6. Total of ALL CRO-1310 Pages						\$ 6,723.71	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number
COMMITTEE TO ELECT VERNETTA ALSTON						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
FACEBOOK 1601 WILLOW RD MENLO PARK, CA 94025						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 60.47
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
25	Debit Card	A	07/01/2017	\$ 10.00	ADS	
25	Debit Card	A	07/21/2017	\$ 24.67	ADS	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
FACEBOOK 1601 WILLOW RD MENLO PARK, CA 94025						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 60.47
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
25	Debit Card	A	08/01/2017	\$ 1.92	ADS	
25	Debit Card	A	08/01/2017	\$ 23.88	ADS	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
HOLLY HARDIN 912 ARNETTE AVE DURHAM, NC 27701 (919) 271-5990						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 3,011.94
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
25	Check	E	07/31/2017	\$ 1,500.00		
				\$		
5. Total only this Page						\$ 1,560.47
6. Total of ALL CRO-1310 Pages						\$ 6,723.71
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)						
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* Other						
* Codes require detailed explanation in required remarks field (k)						

Disbursements

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
LUKE HIRST PO BOX 379 DURHAM, NC 27702 (919) 794-4961				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 991.45	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
25	Check	E	07/31/2017	\$ 250.00			
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
MARION JOHNSON 413 E CHAPEL HILL ST APT 101 DURHAM, NC 27701 (704) 650-8025				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 700.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
25	Check	E	07/16/2017	\$ 350.00			
25	Check	E	07/31/2017	\$ 350.00			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone <i>(include city, state, & zip)</i>				b. Coordinated Committee Name		d. Comments	
M. DOVE KENT 1401 VIRGINIA AVE DURHAM, NC 27705 (347) 977-7011				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 500.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
25	Check	E	07/16/2017	\$ 250.00			
25	Check	E	07/31/2017	\$ 250.00			
5. Total only this Page						\$ 1,450.00	
6. Total of ALL CRO-1310 Pages						\$ 6,723.71	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

Disbursements

Amendment
 Yes No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number
COMMITTEE TO ELECT VERNETTA ALSTON						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
CAITLIN METZGUER 810 GERARD ST #B DURHAM, NC 27701 (919) 215-1261						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$ 700.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
25	Check	E	07/31/2017	\$ 350.00		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
NGP VAN 1445 NEW YORK AVE WASHINGTON, DC 20005						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$ 300.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
25	Debit Card	K	07/03/2017	\$ 150.00	SOFTWARE FEE	
25	Debit Card	K	08/02/2017	\$ 150.00	SOFTWARE FEE	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
ORLANDO'S CUSTOM SCREENPRINTING 2824 N ROXBORO RD DURHAM, NC 27704 (919) 220-5515						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
						e. Election Sum to Date
						\$ 1,096.50
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
25	Debit Card	B	07/10/2017	\$ 322.50	T-SHIRTS	
5. Total only this Page						\$ 972.50
6. Total of ALL CRO-1310 Pages						\$ 6,723.71
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* Other						
* Codes require detailed explanation in required remarks field (k)						

Disbursements

Amendment
 Yes No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number
COMMITTEE TO ELECT VERNETTA ALSTON						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
SAGE PAYMENT SOLUTIONS 12120 SUNSET HILLS RD SUITE 500 RESTON, VA 20190 (877) 841-7014						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 453.58
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
25	Draft	K	07/03/2017	\$ 165.95	CREDIT CARD FEES	
25	Draft	K	08/02/2017	\$ 117.56	CREDIT CARD FEES	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
AUDREY SHORE 7525 RED OAK LN CHARLOTTE, NC 28226-7246 (704) 604-3422						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 500.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
25	Check	E	07/31/2017	\$ 250.00		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
US POSTAL SERVICE 3710 SHANNON RD DURHAM, NC 27707						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 61.38
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
25	Debit Card	I	07/07/2017	\$ 20.93		
25	Debit Card	I	07/26/2017	\$ 40.45		
5. Total only this Page						\$ 594.89
6. Total of ALL CRO-1310 Pages						\$ 6,723.71
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)						
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
7. Purpose Codes (last detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* Other						
* Codes require detailed explanation in required remarks field (k)						

Aggregated Non-Media Expenditures

Amendment
 Yes No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and Fund) (applicable)					2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON						
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add	25	Check	B	08/16/2017	\$ 11.94	YARD SIGN MAPS
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	25	Draft	K	07/31/2017	\$ 15.00	BANK FEE
<input type="checkbox"/> Remove						
4. Total only this Page					\$	26.94
5. Total of ALL CRO-1315 Pages					\$	26.94
<i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>						
6. Purpose Codes (See detailed explanation code in (g) above)						
B* - Printing		C* - Fundraising		D - To Another Candidate		
E - Salaries		F* - Equipment		H* - Holding Public Office Expenses		
I - Bonds		J - Penalties		K* - Office Expenses		Q* - Donations to Legal Expense Fund
O* - Other						
* Codes require detailed explanation in required remarks field (g)						

In-Kind Contributions

Pg 1 of 3

Amendment
 Yes No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
 Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
Aggregated Individual Contribution		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 45.48	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
JUL-AUG MILEAGE		08/29/2017	\$ 45.48
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
VERNETTA ALSTON PO BOX 379 DURHAM, NC 27702 (919) 794-4961		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 541.74	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
PRECINCTS MAP		07/11/2017	\$ 10.00
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
HOLLY HARDIN 912 ARNETTE AVE DURHAM, NC 27701 (919) 271-5990		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 309.18	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
MILEAGE FOR JUL-AUG		08/29/2017	\$ 49.70
			\$
			\$
4. Total only this Page		\$ 105.18	
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$ 1,096.77	

In-Kind Contributions

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	e. Comments
LUKE HIRST PO BOX 379 DURHAM, NC 27702 (919) 794-4961		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 117.14
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
ENVELOPES		07/05/2017	\$ 3.99
JUL-AUG MILEAGE		08/29/2017	\$ 30.01
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	e. Comments
KEN ROSE 809 CAROLINA AVE DURHAM, NC 27705 (919) 886-0350		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 147.27
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD FOR HOUSE PARTY		08/06/2017	\$ 147.27
			\$
			\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	e. Comments
RYAN WILDE 5424 TRALEE PL RALEIGH, NC 27609-4438 (315) 408-2168		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
			d. Election Sum to Date
			\$ 1,881.92
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FUNDRAISING DINNER		07/27/2017	\$ 457.85
PALM CARDS		08/22/2017	\$ 77.39
MILEAGE FOR JUL-AUG		08/29/2017	\$ 231.12
4. Total only this Page			\$ 947.63
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>			\$ 1,096.77

In-Kind Contributions

Pg 3 of 3

Amendment
 Yes No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.
 Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
COMMITTEE TO ELECT VERNETTA ALSTON			
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	c. Comments
CARA WITTEKIND 3400 SHAFTSBURY ST DURHAM, NC 27704 (828) 316-1483		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$	63.96
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
FOOD FOR HOUSE PARTY		08/24/2017	\$ 43.96
			\$
			\$
4. Total only this Page		\$	43.96
5. Total of ALL CRO-1510 Pages <i>(This line must be on line 17 of Detailed Summary Page CRO-1100)</i>		\$	1,096.77

CRO-1510

NC State Board of Elections

December 2007