

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				
a. Full Name			c. ID Number	
COMMITTEE TO ELECT ERIN BANKS				
b. Mailing Address (include City, State and Zip Code)			d. Date Filed	
PO BOX 312 HARRISBURG, NC 28075			09/29/2025	
			e. Phone Number	
			(704) 426-2483	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name	
2025	07/24/2025	09/23/2025	ERIN BANKS	
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
☒ Candidate Campaign ☐ Party		Municipal		
☐ Joint Fundraiser ☐ PAC		☐ Organizational		
☐ Referendum ☐ Legal Expense Fund		☒ Thirty-five day		
		☐ Pre-primary		
		☐ Pre-election		
		☐ Pre-runoff		
		☐ Semi-annual		
		☐ Mid Year		
		☐ Year End		
		☐ Final		
		☐ Special		
7. Type of Fund (if applicable, check one)		State/County		
☐ "Booster Fund"		☐ Organizational		
☐ Building Fund		Quarterly		
☐ Presidential Election Year Candidates Fund		☐ First		
☐ NC Public Campaign Financing Fund		☐ Second		
		☐ Third		
		☐ Fourth		
		☐ Semi-annual		
		☐ Mid Year		
		☐ Year End		
		☐ Final		
		☐ Special		
8. Number of Fundraisers this Report		10. Special Report Name		
0				
3. Account Information				
a. Financial Institution Full Name				
UWHARRIE BANK				
b. Purpose		c. Account Code		
CAMPAIGN		EB2025		
		d. Period Begin Balance		
		\$ 1,087.96		
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				
Erin Banks		Erin Banks		09/29/2025
Printed Name of Signer		Signature of Appointed Treasurer		Date
FOR OFFICE USE ONLY				
Date Received:	9-29-25	Employee:	LAN	Delivery Method
Date Postmarked:		Employee:		☐ Normal Mail
Date Scanned:	9-29-25	Employee:	LAN	☐ Registered Mail
Date Data Entered:		Employee:		☒ Hand Delivered
				☒ Electronically Filed
				☐ 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 ERIN BANKS		2025 Thirty-five-day			
Start of Election Cycle: January 1, 2025			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 538.31		\$ 0.00
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 0.00		\$ 0.00	
6) Contributions from Individuals (CRO-1210)		\$ 8,162.40		\$ 8,921.66	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 0.00	
9) Loan Proceeds (CRO-1410)		\$ 0.00		\$ 0.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00		\$ 0.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00		\$ 0.00	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00		\$ 0.00	
11c) Outside Sources of Income (CRO-1250)		\$ 300.00		\$ 300.00	
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)		\$ 8,462.40		\$ 9,221.66	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 6,306.82		\$ 6,313.51	
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)		\$ 0.00		\$ 0.00	
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)		\$ 662.40		\$ 876.66	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 6,969.22		\$ 7,190.17	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2,031.49		\$ 2,031.49	
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	

Contributions from Individuals

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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 ERIN BANKS						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
CALVIN BANKS 10460 SW 176 ST MIAMI, FL 33157			NONE			
			c. Employer's Name/Specific Field			
			NOT 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	
☐	EB2025	Electric Funds Tran		07/28/2025	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ERIN BANKS PO BOX 312 HARRISBURG, NC 28075			EDUCATOR			
			c. Employer's Name/Specific Field			
			SELF-EMPLOYED		e. Election Sum to Date	
					\$ 423.62	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	EB2025	In-Kind	WEBSITE DOMAIN NAME	08/01/2025	\$ 13.48	
☐	EB2025	In-Kind	WEB HOSTING FEE	08/09/2025	\$ 95.88	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
FREDRICKA BANKS 10460 SW 176 ST MIAMI, FL 33157			TECHNOLOGY			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED		e. Election Sum to Date	
					\$ 553.04	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	EB2025	In-Kind	CAMPAIGN T-SHIRTS	08/08/2025	\$ 253.04	
☐	EB2025	Electric Funds Tran		08/09/2025	\$ 300.00	
☐					\$	
4. Total only this Page					\$ 762.40	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
EVANDER BATTLE NC						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 20.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	EB2025	Electric Funds Tran		08/12/2025	\$ 20.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
TAURIN BATTS NC						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	EB2025	Electric Funds Tran		08/18/2025	\$ 50.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
BARBARA BRADSHAW 3980 NW 176 STREET OPA-LOCKA, FL 33055			TECHNOLOGY			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED			
					e. Election Sum to Date	
					\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	EB2025	Electric Funds Tran		08/20/2025	\$ 75.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 145.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LEROY BRADSHAW NC							
				c. Employer's Name/Specific Field			
				e. Election Sum to Date			
						\$ 75.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		07/26/2025		\$ 50.00	
☐	EB2025	Electric Funds Tran		09/19/2025		\$ 25.00	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
KEITH BURRIDGE NC							
				c. Employer's Name/Specific Field			
				e. Election Sum to Date			
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		09/02/2025		\$ 50.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
HANNAH BUTLER 10676 CORONET CT HARRISBURG, NC 28075				ADVISOR			
				c. Employer's Name/Specific Field			
				SELF			
				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	
☐	EB2025	Electric Funds Tran		08/28/2025		\$ 250.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 375.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BETZAIDA CHARLES NC							
						e. Election Sum to Date	
		\$ 25.00					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	EB2025	Electric Funds Tran		09/23/2025	\$ 25.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MARY CULPEPPER NC							
						e. Election Sum to Date	
		\$ 25.00					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	EB2025	Electric Funds Tran		09/15/2025	\$ 25.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ALFRED CUMMINGS NC							
						e. Election Sum to Date	
		\$ 40.00					
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	EB2025	Electric Funds Tran		09/07/2025	\$ 40.00		
☐					\$		
☐					\$		
4. Total only this Page						\$ 90.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
NYLA DAVIS NC							
				c. Employer's Name/Specific Field			
				e. Election Sum to Date			
						\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		08/04/2025		\$ 25.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TUERE DUNTON-FORBES NC							
				c. Employer's Name/Specific Field			
				e. Election Sum to Date			
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		09/01/2025		\$ 50.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LARKEN EGLESTON 1517 LANDIS AVE CHARLOTTE, NC 28205				DIRECTOR			
				c. Employer's Name/Specific Field			
				NC DEPT OF JUSTICE			
				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	
☐	EB2025	Electric Funds Tran		07/25/2025		\$ 100.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 175.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
GILES FERRELL NC						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	EB2025	Electric Funds Tran		08/18/2025	\$ 25.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ASHLEY FITCH NC						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	EB2025	Electric Funds Tran		08/02/2025	\$ 50.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
KENITRA FLAVORS NC						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	EB2025	Electric Funds Tran		09/20/2025	\$ 25.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 100.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DEBORAH GORDON NC							
				c. Employer's Name/Specific Field			
				e. Election Sum to Date			
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		09/02/2025		\$ 50.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ANTHONY HARDIN NC							
				c. Employer's Name/Specific Field			
				e. Election Sum to Date			
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		09/16/2025		\$ 50.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
VALERIE HARGROVE NC							
				c. Employer's Name/Specific Field			
				e. Election Sum to Date			
						\$ 20.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		08/20/2025		\$ 20.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 120.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CLIFTON HARRIS 10256 OCTOBER GLORY WAY CHARLOTTE, NC 28215				PASTOR			
				c. Employer's Name/Specific Field			
				FAITH CME		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		
☐	EB2025	Electric Funds Tran		08/18/2025	\$ 100.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BORIS HENDERSON 10117 COLEY DR HUNTERSVILLE, NC 28078				EDUCATION			
				c. Employer's Name/Specific Field			
				NOT EMPLOYED		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		
☐	EB2025	Electric Funds Tran		08/07/2025	\$ 150.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CAROL HENDERSON NC							
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	EB2025	Electric Funds Tran		09/07/2025	\$ 25.00		
☐					\$		
☐					\$		
4. Total only this Page						\$ 275.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MICHAEL HERNDON NC							
				c. Employer's Name/Specific Field			
				e. Election Sum to Date			
						\$ 20.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	EB2025	Electric Funds Tran		09/05/2025	\$ 20.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
RONNIE JACKSON 406 WESTWOOD DR CHAPEL HILL, NC 27516				NONE			
				c. Employer's Name/Specific Field			
				NOT 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		
☐	EB2025	Electric Funds Tran		09/05/2025	\$ 100.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MORRIS JONES NC							
				c. Employer's Name/Specific Field			
				e. Election Sum to Date			
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	EB2025	Electric Funds Tran		08/19/2025	\$ 50.00		
☐					\$		
☐					\$		
4. Total only this Page						\$ 170.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CARL KINGCADE 17455 SW 33RD CT HOLLYWOOD, FL 33029				IT MANAGER			
				c. Employer's Name/Specific Field			
				AT&T			
						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		
☐	EB2025	Electric Funds Tran		08/26/2025	\$ 100.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LISA LEWIS NC							
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	EB2025	Electric Funds Tran		08/05/2025	\$ 50.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ALICIA LOCKARD 6012 LENNOX PL WAKE FOREST, NC 27587				LAW ENFORCEMENT			
				c. Employer's Name/Specific Field			
				RETIRED			
						e. Election Sum to Date	
						\$ 450.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☒	EB2025	Electric Funds Tran		07/23/2025	\$ 50.00		
☐	EB2025	Electric Funds Tran		08/19/2025	\$ 300.00		
☐	EB2025	Electric Funds Tran		08/23/2025	\$ 50.00		
4. Total only this Page						\$ 500.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ALICIA LOCKARD 6012 LENNOX PL WAKE FOREST, NC 27587			LAW ENFORCEMENT			
			c. Employer's Name/Specific Field			
			RETIRED		e. Election Sum to Date	
				\$ 450.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	EB2025	Electric Funds Tran		09/23/2025	\$ 50.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
TAMMIE LOZOLLA NC						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
				\$ 50.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	EB2025	Electric Funds Tran		08/28/2025	\$ 50.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
WENDY MCCONNELL 1113 HANOVER DR NW CONCORD, NC 28027			TRAINER			
			c. Employer's Name/Specific Field			
			NOT EMPLOYED		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	
☐	EB2025	Electric Funds Tran		08/22/2025	\$ 300.00	
☐					\$	
☐					\$	
4. Total only this Page					\$ 400.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
DENISE MERRIMAN 1358 ROLLING HILLS CT CONCORD, NC 28025				SURGICAL TECH			
				c. Employer's Name/Specific Field			
				MEDICAL		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		
☐	EB2025	Electric Funds Tran		09/16/2025	\$ 500.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
SHELLEY MILLS-BRINKLEY NC							
				c. Employer's Name/Specific Field			
						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		
☒	EB2025	Electric Funds Tran		07/23/2025	\$ 50.00		
☐	EB2025	Electric Funds Tran		08/23/2025	\$ 50.00		
☐	EB2025	Electric Funds Tran		08/23/2025	\$ 50.00		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
MARTHA MOON NC							
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	EB2025	Electric Funds Tran		09/16/2025	\$ 50.00		
☐					\$		
☐					\$		
4. Total only this Page						\$ 650.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TIMOTHY PATTERSON NC							
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		08/20/2025		\$ 25.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ANTHONY PIGHET NC							
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		08/20/2025		\$ 50.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CAROL RANKIN 2016 HUNGARIAN RD CHESAPEAKE, VA 23322				HEALTHCARE			
				c. Employer's Name/Specific Field			
				NOT EMPLOYED		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	
☐	EB2025	Electric Funds Tran		08/14/2025		\$ 150.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 225.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
RONALD RAPOPORT 5529 GENTRY LANE WILLIAMSBURG, NC 21388				PROFESSOR			
				c. Employer's Name/Specific Field			
				WILLIAM & MARY UNIVERSITY			
						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		
☐	EB2025	Electric Funds Tran		09/09/2025	\$ 1,000.00		
☐	EB2025	Electric Funds Tran		09/09/2025	\$ 1,000.00		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
HERBERT REDDICK 11139 S VERMONT AV LOS ANGELES, CA 90044				FIRE INSPECTOR			
				c. Employer's Name/Specific Field			
				LOS ANGELES CITY FIRE DEPT			
						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		
☐	EB2025	Electric Funds Tran		07/24/2025	\$ 200.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
THERESA RYAN NC							
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	EB2025	Electric Funds Tran		08/06/2025	\$ 50.00		
☐					\$		
☐					\$		
4. Total only this Page						\$ 2,250.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
PATRICIA SALING NC							
				c. Employer's Name/Specific Field			
				e. Election Sum to Date			
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		09/02/2025		\$ 50.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
KAREN SAUNDERS NC							
				c. Employer's Name/Specific Field			
				e. Election Sum to Date			
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		08/12/2025		\$ 50.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
JAMES SHELTON 20616 TOP RIDGE DR BOYDS, MD 20841				NONE			
				c. Employer's Name/Specific Field			
				RETIRED			
				e. Election Sum to Date			
						\$ 1,300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		09/01/2025		\$ 500.00	
☐	EB2025	Electric Funds Tran		09/07/2025		\$ 800.00	
☐						\$	
4. Total only this Page						\$ 1,400.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
AVRIL SMART GOGGANS 41680 WAKEHURST PL LEESBURG, VA 20176				CEO			
				c. Employer's Name/Specific Field			
				AVRIL SMART GOGGANS			
						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		
☐	EB2025	Electric Funds Tran		08/15/2025	\$ 100.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
BRIA SMITH NC							
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	EB2025	Electric Funds Tran		08/19/2025	\$ 25.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
RITA SMITH NC							
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	EB2025	Electric Funds Tran		08/10/2025	\$ 25.00		
☐					\$		
☐					\$		
4. Total only this Page						\$ 150.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TONYA SMITH NC							
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		07/27/2025		\$ 25.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
TRINACE STEELE NC							
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 10.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		07/27/2025		\$ 10.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
LAURA TAVORMINA 900 W 190TH ST APT 14-O NEW YORK, NC 10040				NONE			
				c. Employer's Name/Specific Field			
				RETIRED		e. Election Sum to Date	
						\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		09/03/2025		\$ 50.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 85.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
KATE TORREY NC							
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 20.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		09/04/2025		\$ 20.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
KEMAH WASHINGTON 2426 ATLANTIC AVE RALEIGH, NC 27604				PRESIDENT			
				c. Employer's Name/Specific Field			
				BRANDILLY CREATIVE GROUP			
						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	
☐	EB2025	Electric Funds Tran		08/09/2025		\$ 100.00	
☐						\$	
☐						\$	
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
CHRISTOPHER WILKES NC							
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount	
☐	EB2025	Electric Funds Tran		08/18/2025		\$ 25.00	
☐						\$	
☐						\$	
4. Total only this Page						\$ 145.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,162.40	

Contributions from Individuals

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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 ERIN BANKS							
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ANGELA WILLIAMS 3110 ETUDE PL CHARLOTTE, NC 28262				LAW ENFORCEMENT			
				c. Employer's Name/Specific Field			
				RETIRED			
						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		
☐	EB2025	Electric Funds Tran		07/24/2025	\$ 100.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
PATRICIA WOODS NC							
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	EB2025	Electric Funds Tran		08/28/2025	\$ 25.00		
☐					\$		
☐					\$		
3. Contributor Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profession		d. Comments	
ROBERT ZOHLMAN NC							
				c. Employer's Name/Specific Field			
						e. Election Sum to Date	
						\$ 20.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
☐	EB2025	Electric Funds Tran		09/07/2025	\$ 20.00		
☐					\$		
☐					\$		
4. Total only this Page						\$ 145.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)						\$ 8,162.40	

Other Receipt Sources

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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 ERIN BANKS					
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>					
☐ Interest ☐ Contributions from Not-for-Profit Organizations ☒ Outside Sources of Income					
4. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Not-for-Profit Federal ID #		d. Comments
NC DEMOCRATIC PARTY 220 HILLSBOROUGH ST RALEIGH, NC 27603			c. Outside Source Explanation		
					e. Election Sum to Date
					\$ 300.00
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
EB2025	In-Kind	VOTE BUILDER ACCESS	09/04/2025	\$ 300.00	
				\$	
5. Total only this Page					\$ 300.00
6. Total of ALL CRO-1250 Pages <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>					\$ 300.00

CRO-1250

NC State Board of Elections

December 2007

Disbursements

Amendment
Pg 1 of 12 ☐ 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 ERIN BANKS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	07/24/2025	\$ 1.50	EFT FEE		
EB2025	Electric Funds Tran	C	07/24/2025	\$ 3.00	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	07/25/2025	\$ 1.50	EFT FEE		
EB2025	Electric Funds Tran	C	07/26/2025	\$ 0.75	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	07/27/2025	\$ 0.15	EFT FEE		
EB2025	Electric Funds Tran	C	07/27/2025	\$ 0.38	EFT FEE		
5. Total only this Page						\$ 7.28	
6. Total of ALL CRO-1310 Pages						\$ 6,306.82	
(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

Pg 2 of 12

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 ERIN BANKS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	07/28/2025	\$ 1.50	EFT FEE		
EB2025	Electric Funds Tran	C	08/02/2025	\$ 0.53	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	08/04/2025	\$ 0.27	EFT FEE		
EB2025	Electric Funds Tran	C	08/05/2025	\$ 0.53	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	08/06/2025	\$ 0.53	EFT FEE		
EB2025	Electric Funds Tran	C	08/07/2025	\$ 1.58	EFT FEE		
5. Total only this Page						\$ 4.94	
6. Total of ALL CRO-1310 Pages							
(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)						\$ 6,306.82	
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

Pg 3 of 12

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 ERIN BANKS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	08/09/2025	\$ 1.05	EFT FEE		
EB2025	Electric Funds Tran	C	08/09/2025	\$ 3.15	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	08/10/2025	\$ 0.27	EFT FEE		
EB2025	Electric Funds Tran	C	08/12/2025	\$ 0.21	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	08/12/2025	\$ 0.53	EFT FEE		
EB2025	Electric Funds Tran	C	08/14/2025	\$ 1.58	EFT FEE		
5. Total only this Page						\$ 6.79	
6. Total of ALL CRO-1310 Pages							
(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)						\$ 6,306.82	
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

Pg 4 of 12

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 ERIN BANKS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	08/15/2025	\$ 1.05	EFT FEE		
EB2025	Electric Funds Tran	C	08/18/2025	\$ 0.27	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	08/18/2025	\$ 0.27	EFT FEE		
EB2025	Electric Funds Tran	C	08/18/2025	\$ 0.53	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	08/18/2025	\$ 1.05	EFT FEE		
EB2025	Electric Funds Tran	C	08/19/2025	\$ 0.27	EFT FEE		
5. Total only this Page						\$ 3.44	
6. Total of ALL CRO-1310 Pages							
(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)						\$ 6,306.82	
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
Pg 5 of 12 ☐ 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 ERIN BANKS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	08/19/2025	\$ 0.53	EFT FEE		
EB2025	Electric Funds Tran	C	08/19/2025	\$ 3.15	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	08/20/2025	\$ 0.21	EFT FEE		
EB2025	Electric Funds Tran	C	08/20/2025	\$ 0.27	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Debit Card	C	08/20/2025	\$ 0.53	EFT FEE		
EB2025	Electric Funds Tran	C	08/20/2025	\$ 0.79	EFT FEE		
5. Total only this Page						\$ 5.48	
6. Total of ALL CRO-1310 Pages							
<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>						\$ 6,306.82	
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

Pg 6 of 12

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 ERIN BANKS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	08/22/2025	\$ 3.15	EFT FEE		
EB2025	Electric Funds Tran	C	08/23/2025	\$ 0.53	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	08/23/2025	\$ 0.53	EFT FEE		
EB2025	Electric Funds Tran	C	08/26/2025	\$ 1.05	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	08/28/2025	\$ 0.27	EFT FEE		
EB2025	Electric Funds Tran	C	08/28/2025	\$ 0.53	EFT FEE		
5. Total only this Page						\$ 6.06	
6. Total of ALL CRO-1310 Pages							
(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)						\$ 6,306.82	
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
Pg 7 of 12 ☐ 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 ERIN BANKS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	08/28/2025	\$ 2.63	EFT FEE		
EB2025	Electric Funds Tran	C	09/01/2025	\$ 0.53	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	09/01/2025	\$ 5.25	EFT FEE		
EB2025	Electric Funds Tran	C	09/02/2025	\$ 0.53	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	09/02/2025	\$ 0.53	EFT FEE		
EB2025	Electric Funds Tran	C	09/02/2025	\$ 0.53	EFT FEE		
5. Total only this Page						\$ 10.00	
6. Total of ALL CRO-1310 Pages						\$ 6,306.82	
<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

Pg 8 of 12

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 ERIN BANKS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	09/03/2025	\$ 0.53	EFT FEE		
EB2025	Electric Funds Tran	C	09/03/2025	\$ 1.05	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	09/04/2025	\$ 0.21	EFT FEE		
EB2025	Electric Funds Tran	C	09/05/2025	\$ 0.21	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	09/07/2025	\$ 0.21	EFT FEE		
EB2025	Electric Funds Tran	C	09/07/2025	\$ 0.27	EFT FEE		
5. Total only this Page						\$ 2.48	
6. Total of ALL CRO-1310 Pages							
(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)						\$ 6,306.82	
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
Pg 9 of 12 ☐ 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 ERIN BANKS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	09/07/2025	\$ 0.42	EFT FEE		
EB2025	Electric Funds Tran	C	09/07/2025	\$ 8.40	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	09/09/2025	\$ 10.50	EFT FEE		
EB2025	Electric Funds Tran	C	09/09/2025	\$ 10.50	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	09/15/2025	\$ 0.27	EFT FEE		
EB2025	Electric Funds Tran	C	09/16/2025	\$ 0.53	EFT FEE		
5. Total only this Page						\$ 30.62	
6. Total of ALL CRO-1310 Pages						\$ 6,306.82	
<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

Pg 10 of 12

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 ERIN BANKS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	09/16/2025	\$ 0.53	EFT FEE		
EB2025	Electric Funds Tran	C	09/16/2025	\$ 5.25	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	09/19/2025	\$ 0.27	EFT FEE		
EB2025	Electric Funds Tran	C	09/20/2025	\$ 0.27	EFT FEE		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	09/23/2025	\$ 0.27	EFT FEE		
EB2025	Electric Funds Tran	C	09/23/2025	\$ 0.53	EFT FEE		
5. Total only this Page						\$ 7.12	
6. Total of ALL CRO-1310 Pages							
(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)						\$ 6,306.82	
(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

Pg 11 of 12

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 ERIN BANKS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
ACT BLUE NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 91.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Electric Funds Tran	C	09/23/2025	\$ 0.53	EFT FEE		
				\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BAD DADDY'S BURGER BAR NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 115.72	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Debit Card	O	09/20/2025	\$ 115.72	LUNCH FOR		
				\$	VOLUNTEERS/GOTV		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BRANDILLY NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 6,106.36	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Debit Card	A	08/08/2025	\$ 940.79	WEBSITE DEVELOPMENT		
EB2025	Debit Card	A	08/21/2025	\$ 1,000.00	BUTTONS PALM CARDS YARD SIGNS		

5. Total only this Page		\$ 2,057.04
6. Total of ALL CRO-1310 Pages		
<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>		\$ 6,306.82
7. Purpose Codes (List detailed expenditure code in (h.) above)		
A* - Media	B* - Printing	C* - Fundraising
E - Salaries	F* - Equipment	G - Political Party
I - Postage	J - Penalties	K* - Office Expenses
O* Other		D - To Another Candidate
		H* - Holding Public Office Expenses
		Q* - Donation to Legal Expense Fund
* Codes require detailed explanation in required remarks field (k)		

Disbursements

Pg 12 of 12

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 ERIN BANKS							
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures							
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BRANDILLY NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 6,106.36	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Debit Card	A	08/24/2025	\$ 661.27	YARD SIGNS		
EB2025	Debit Card	A	09/04/2025	\$ 292.15	T-SHIRTS		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BRANDILLY NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 6,106.36	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Debit Card	A	09/15/2025	\$ 2,980.86	MAILERS		
EB2025	Debit Card	A	09/18/2025	\$ 115.78	PALM CARDS		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
BRANDILLY NC							
				c. Level Registered (Specify)			
				☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
						\$ 6,106.36	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
EB2025	Debit Card	A	09/22/2025	\$ 115.51	PALM CARDS		
				\$			
5. Total only this Page						\$ 4,165.57	
6. Total of ALL CRO-1310 Pages							
<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>						\$ 6,306.82	
<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)							

In-Kind Contributions

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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 ERIN BANKS			
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
ERIN BANKS PO BOX 312 HARRISBURG, NC 28075		☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 423.62	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
WEBSITE DOMAIN NAME		08/01/2025	\$ 13.48
WEB HOSTING FEE		08/09/2025	\$ 95.88
			\$
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
FREDRICKA BANKS 10460 SW 176 ST MIAMI, FL 33157		☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 553.04	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
CAMPAIGN T-SHIRTS		08/08/2025	\$ 253.04
			\$
			\$
3. Contributor Information ☐ Add ☐ Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
NC DEMOCRATIC PARTY 220 HILLSBOROUGH ST RALEIGH, NC 27603		☐ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☒ Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 300.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
VOTE BUILDER ACCESS		09/04/2025	\$ 300.00
			\$
			\$
4. Total only this Page		\$ 662.40	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 662.40	