

# Disclosure Report Cover

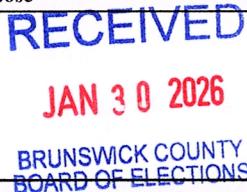
Amendment

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

<b>1. Committee Information</b>			
<b>a. Full Name</b> Committee to Elect Richard Alt		<b>c. ID Number</b>	
<b>b. Mailing Address (include City, State and Zip Code)</b> 6165 Cottage Creek Road Southport, NC 28461		<b>d. Date Filed</b> 01/30/2026	
		<b>c. Phone Number</b> 703-507-7448	
<b>2. Report Year</b> 2025	<b>3. Period Start Date (mm/dd/yy)</b> 10/21/2025	<b>4. Period End Date (mm/dd/yy)</b> 12/31/2025	<b>5. Treasurer Full Name</b> Richard Alt
<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		<b>Municipal</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
<b>7. Type of Fund (if applicable, check one)</b>		<b>State/County</b>	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
<b>8. Number of Fundraisers this Report</b> 0		<b>10. Special Report Name</b>	
<b>11. Account Information</b>		<b>11. Account Information</b>	
<b>a. Financial Institution Full Name</b> United Bank		<b>a. Financial Institution Full Name</b>	
<b>b. Purpose</b> All Campaign Expenses	<b>c. Account Code</b> 01	<b>b. Purpose</b>	<b>c. Account Code</b>
	<b>d. Period Begin Balance</b> \$ 2,136.58		<b>d. Period Begin Balance</b> \$
<b>CERTIFICATION</b>			
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 of Elections.			
Richard Alt Printed Name of Signer		R. B. Alt Signature of Appointed Treasurer	01/30/2026 Date
<b>FOR OFFICE USE ONLY</b>			
Date Received:	<u>1/30/26</u>	Employee:	<u>cnw</u>
Date Postmarked:	_____	Employee:	_____
Date Scanned:	<u>1/30/26</u>	Employee:	<u>NP</u>
Date Data Entered:	_____	Employee:	_____
<b>Delivery Method</b>			
<input type="checkbox"/> Normal Mail			
<input type="checkbox"/> Registered Mail			
<input checked="" type="checkbox"/> Hand Delivered			
<input type="checkbox"/> Electronically Filed			
<input type="checkbox"/> Signer has not received mandatory training			
<b>Please Note:</b> 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 Richard Alt	Semi-Annual Year End		
<b>Start of Election Cycle:</b> <b>January 1,</b> <b>2024</b>	<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>	
<b>4) Cash on Hand at Start</b>	\$ 2,136.58	\$ 1,216.45	
<b>RECEIPTS</b>			
<b>5) Aggregated Contributions from Individuals</b> <i>(CRO-1205)</i>	\$	\$	
<b>6) Contributions from Individuals</b> <i>(CRO-1210)</i>	\$ 3,200.00	\$ 11,407.21	
<b>7) Contributions from Political Party Committees</b> <i>(CRO-1220)</i>	\$ 0	\$ 0	
<b>8) Contributions from Other Political Committees</b> <i>(CRO-1230)</i>	\$ 0	\$ 0	
<b>9) Loan Proceeds</b> <i>(CRO-1410)</i>	\$	\$	
<b>10) Refunds/Reimbursements To the Committee</b> <i>(CRO-1240)</i>	\$	\$	
<b>11) Other Receipt Sources</b>			
<b>11a) Interest on Bank Accounts</b> <i>(CRO-1250)</i>	\$	\$	
<b>11b) Contributions from Not-for-Profit Organizations</b> <i>(CRO-1250)</i>	\$	\$	
<b>11c) Outside Sources of Income</b> <i>(CRO-1250)</i>	\$	\$	
<b>11d) Legal Expense Fund – Other Sources</b> <i>(CRO-1270)</i>	\$	\$	
<b>11 e) Exempt Purchase Price Sales</b> <i>(CRO-1265)</i>	\$	\$	
<b>12) TOTAL RECEIPTS</b> <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</i>	\$ 3,200.00	\$ 11,407.21	
<b>EXPENDITURES</b>			
<b>13) Disbursements</b>			
<b>13a) Operating Expenditures</b> <i>(CRO-1310)</i>	\$ 3,116.97	\$ 9,512.84	
<b>13b) Contributions to Candidates/Political Committees</b> <i>(CRO-1310)</i>	\$	\$	
<b>13c) Coordinated Party Expenditures</b> <i>(CRO-1310)</i>	\$	\$	
<b>14) Aggregated Non-Media Expenditures</b> <i>(CRO-1315)</i>	\$	\$	
<b>15) Loan Repayments</b> <i>(CRO-1420)</i>	\$	\$	
<b>16) Refunds/Reimbursements From the Committee</b> <i>(CRO-1320)</i>	\$ 500.00	\$ 500.00	
<b>17) In-Kind Contributions</b> <i>(CRO-1510)</i>	\$ 0	\$ 891.21	
<b>18) TOTAL EXPENDITURES</b> <i>(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</i>	\$ 3,616.97	\$ 10,904.05	
<b>19) Cash on Hand at End</b> <i>(Add lines 4 and 12 together, then subtract line 18)</i>	\$ 1,719.61	\$ 1,719.61	
<b>ADDITIONAL INFORMATION</b>			
<b>20) Non-Monetary Gifts Given to Other Committees</b> <i>(CRO-1330)</i>	\$		
<b>21) Outstanding Loans (incl. ones from other campaigns)</b> <i>(CRO-1430)</i>	\$ 416.00		
<b>22) Debts and Obligations owed By the Committee</b> <i>(CRO-1610)</i>	\$		
<b>23) Debts and Obligations owed To the Committee</b> <i>(CRO-1620)</i>	\$		
<b>24) Account Transfers Within the Committee</b> <i>(CRO-1720)</i>	\$		
<b>25) Administrative Support</b> <i>(CRO-1710)</i>	\$	\$	
<b>26) Forgiven Loans</b> <i>(CRO-1440)</i>	\$	\$	
<b>27) 48-Hour Notice Reports Sum</b> <i>(CRO-2220)</i>	\$	\$	
<b>28) Contributions to be Refunded</b> <i>(CRO-1215)</i>	\$	\$	

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Committee to Elect Richard Alt						
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
James Chiarella 6170 River Sound Circle Southport, NC 28461			No Job Title			
			<b>c. Employer's Name/Specific Field</b>			
			Not Employed			
					<b>e. Election Sum to Date</b>	
					\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	01	check		10/29/2025	\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Richard A. Sullivan 5002 Seaward Ct. Southport, NC 28461-8161			No Job Title			
			<b>c. Employer's Name/Specific Field</b>			
			Not Employed			
					<b>e. Election Sum to Date</b>	
					\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	01	check		10/26/2025	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
David A. Truglio 506 W. Owens Street Southport, NC 28461			Restauranteur			
			<b>c. Employer's Name/Specific Field</b>			
			Haven of Southport/ Co-Owner			
					<b>e. Election Sum to Date</b>	
					\$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	01	Check		10/22/2025	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 350.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 3,200.00	

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Committee to Elect Richard Alt						
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Beverly Wallace Hammond 506 West Owens Street Southport, NC 28461			Restaurateur			
			<b>c. Employer's Name/Specific Field</b>			
			Haven of Southport Co-Owner			
					<b>e. Election Sum to Date</b>	
					\$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	01	check		10/22/2025	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Francesca Slaughter 6272 Cattail Court Southport, NC 28461			Realtor			
			<b>c. Employer's Name/Specific Field</b>			
			Keller Williams 5721 E. Oak Island Drive Oak Island, NC 28461			
					<b>e. Election Sum to Date</b>	
					\$ 3753.12	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	01	check		10/23/2025	\$ 2,300.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Alan McDonald 1138 Spincast Road Southport, NC 28461			No Job Title			
			<b>c. Employer's Name/Specific Field</b>			
			Not Employed			
					<b>e. Election Sum to Date</b>	
					\$ 600.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	01	check		10/27/2025	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 2,850.00	
<b>5. Total of ALL CRO-1210 Pages</b> <i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>					\$ 3,200.00	

# Contributions to be Reimbursed

Use this form to report Contributions of \$1,000 or less to be reimbursed within 7 days.  
 Reimbursements must be disclosed on the Refunds/Reimbursements Form (CRO-1320).

<b>1. Committee Full Name</b>		<b>2. ID Number</b>	
Committee to Elect Richard Alt			
<b>3. Contributor Information</b> <input checked="" type="checkbox"/>		Add <input checked="" type="checkbox"/>	Remove
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
Sea to Landing Richard Alt 6165 Cottage Creek Rd Southport, NC 28461		Richard Alt 6165 Cottage Creek Rd Southport, NC 28461	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
Donation given using a business account/check	8/10/2025	N	\$ 500.00
<b>3. Contributor Information</b> <input type="checkbox"/>		Add <input type="checkbox"/>	Remove
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
			\$
<b>3. Contributor Information</b> <input type="checkbox"/>		Add <input type="checkbox"/>	Remove
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
			\$
<b>3. Contributor Information</b> <input type="checkbox"/>		Add <input type="checkbox"/>	Remove
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
			\$
<b>4. Total only this Page</b>			\$ 0.00
<b>5. Total of ALL CRO-1215 Pages</b> <i>(This line goes in line 28 of Detailed Summary Page CRO-1100)</i>			\$ 0.00

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>
Committee to Elect Richard Alt					
<b>3. Type of Disbursement</b> <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	
<b>4. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
State Port Pilot 114 E. Moore Street Southport, NC 28461					
		<b>c. Level Registered (Specify)</b>			
		<input type="checkbox"/> Federal <input type="checkbox"/> County:			
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				<b>e. Election Sum to Date</b>	
				\$ 6,707.00	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
01	check	O	10/22/2025	\$1,550.00	Printed Media Newspaper Ads
01	check	O	10/30/2025	\$1,275.00	Printed Media Newspaper Ad
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
		<b>c. Level Registered (Specify)</b>			
		<input type="checkbox"/> Federal <input type="checkbox"/> County:			
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				<b>e. Election Sum to Date</b>	
				\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
				\$	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Cape Fear Print Works 1517 N. Howe Street, Ste 13 Southport, NC 28461-2773					
		<b>c. Level Registered (Specify)</b>			
		<input type="checkbox"/> Federal <input type="checkbox"/> County:			
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				<b>e. Election Sum to Date</b>	
				\$ 232.19	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
01	debit card	O	10/23/2025	\$136.11	copies
				\$	
<b>5. Total only this Page</b>					\$ 2,961.11
<b>6. Total of ALL CRO-1310 Pages</b> <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>					\$ 3,116.97
<b>7. Purpose Codes</b> (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

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>
Committee to Elect Richard Alt					
<b>3. Type of Disbursement</b> <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	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
Walmart Supercenter #02772 1675 N. Howe Street Southport, NC 28461					
		<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
		<input type="checkbox"/> Federal <input type="checkbox"/> County:			
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				\$ 497.95	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
01	Credit Card	H	11/14/2025	\$155.86	replacement of printer ink
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
		<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
		<input type="checkbox"/> Federal <input type="checkbox"/> County:			
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
				\$	
				\$	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> <i>(include city, state, &amp; zip)</i>		<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
		<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
		<input type="checkbox"/> Federal <input type="checkbox"/> County:			
		<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
				\$	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>
				\$	
				\$	
<b>5. Total only this Page</b>					\$ 155.86
<b>6. Total of ALL CRO-1310 Pages</b> <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>					\$ 3,116.97
<b>7. Purpose Codes</b> (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)					

# Refunds/Reimbursements From the Committee

Use this form to report refunds/reimbursements, including contributions returned to the contributor.

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>	
Committee to Elect Richard Alt				
<b>3. Payee Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
Sea to Landing 6165 Cottage Creek Rd Southport, NC 28461		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		8/10/2025
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 500.00
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>		
L		\$ 0.00		
<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>		<b>k. Account Code</b>
				01
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>	
check	refund of donation given with a business chec	12/30/2025	\$ 500.00	
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>		
		\$		
<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>		<b>k. Account Code</b>
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>	
			\$	
<b>3. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>d. Type of Committee</b>		<b>h. Original Receipt Date</b>
		<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
		<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
		<b>e. Level Registered (Specify)</b>		<b>i. Original Receipt Amount</b>
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
<b>f. Purpose Code</b>		<b>j. Election Sum to Date</b>		
		\$		
<b>b. Job Title/Profession</b>	<b>c. Employer's Name/Specific Field</b>	<b>g. Comments</b>		<b>k. Account Code</b>
<b>l. Form of Payment</b>	<b>m. Required Remarks</b>	<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>	
			\$	
<b>4. Total only this Page</b>				\$ 500.00
<b>5. Total of ALL CRO-1320 Pages</b> (This line must be on line 16 of Detailed Summary Page CRO-1100)				\$ 500.00
L - Returned to Contributor      M - Overpayment for Service      N - Exceeded Contribution Limit P* - Reimbursement of In-Kind      O* Other * Codes require detailed explanation in required remarks field (m)				