



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Alma Adams for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	112637.05	202130.12
(b) Total Contribution Refunds (from Line 20(d)) .....	100.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	112537.05	201930.12
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	89363.73	109613.82
(b) Total Offsets to Operating Expenditures (from Line 14).....	21.36	21.36
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	89342.37	109592.46
8. Cash on Hand at Close of Reporting Period (from Line 27).....	92337.66	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Alma Adams for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2013 To: M M / D D / Y Y Y Y 12 / 31 / 2013

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	47383.64	111305.67
(ii) Unitemized.....	30128.41	51899.45
(iii) TOTAL of contributions from individuals ▶	77512.05	163205.12
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	35125.00	38925.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	112637.05	202130.12
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	21.36	21.36
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	112658.41	202151.48

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	89363.73	109613.82
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	100.00	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	100.00	200.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	89463.73	109813.82

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	69142.98
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	112658.41
25. SUBTOTAL (add Line 23 and Line 24).....	181801.39
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	89463.73
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	92337.66

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Hardison**

Mailing Address 3208 Champion Ct

City Snellville State GA Zip Code 30039-4721

FEC ID number of contributing federal political committee. **C**

Name of Employer TBD Occupation S/W Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : C9918290**

Amount of Each Receipt this Period  
 200.00

**B.** Full Name (Last, First, Middle Initial)  
**Gloria Scales**

Mailing Address 1910 Wake Bridge Drive

City Whitsett State NC Zip Code 27377

FEC ID number of contributing federal political committee. **C**

Name of Employer D&G Realty Occupation Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : C10165590**

Amount of Each Receipt this Period  
 200.00

**C.** Full Name (Last, First, Middle Initial)  
**Clinton E Gravely**

Mailing Address 601 Callan Drive

City Greensboro State NC Zip Code 27405

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Architect

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 27 / 2013

**Transaction ID : C10165610**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kathleen P Hoffmann**

Mailing Address 6506 Mebane Oaks Rd

City Mebane	State NC	Zip Code 27302-8235
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 29 / 2013

**Transaction ID : C10165700**

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
**Katie G. Dorsett**

Mailing Address 1000 N English St

City Greensboro	State NC	Zip Code 27405-6804
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 28 / 2013

**Transaction ID : C9940320**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Davetta Florance Bristow**

Mailing Address 201-B East Montcastle Drive

City Greensboro	State NC	Zip Code 27406
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Retired Educator
--------------------------	--------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : C10075240**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

300.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 18 / 2013**

**Transaction ID : C10064670**

Amount of Each Receipt this Period  
**1.50**

\* In-Kind: Office Supplies

**B.** Full Name (Last, First, Middle Initial)  
**Cornelia H McMillan**

Mailing Address 908 W Johnson St

City Raleigh State NC Zip Code 27605-1762

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation Unemployed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 22 / 2013**

**Transaction ID : C10070150**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Erika K Nelson**

Mailing Address 10 Topland Pl

City East Northport State NY Zip Code 11731-1939

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Finance Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**205.88**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 08 / 2013**

**Transaction ID : C10172280**

Amount of Each Receipt this Period  
**195.88**

\* In-Kind: Lodging

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**447.38**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2013

**Transaction ID : C10076000**

Amount of Each Receipt this Period  
 2.97

\* In-Kind: Postage

**B.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2013

**Transaction ID : C10161980**

Amount of Each Receipt this Period  
 35.58

\* In-Kind: Office Supplies

**C.** Full Name (Last, First, Middle Initial)  
**Robin S. Davis**

Mailing Address 11926 James Jack Ln

City Charlotte State NC Zip Code 28277-3750

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 22 / 2013

**Transaction ID : C10071030**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

538.55



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cheryl G. Heaton**

Mailing Address 3658 Upton St. NW

City Washington State DC Zip Code 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer NYU Occupation Dean Public Health and Global Studies

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2013

**Transaction ID : C9943120**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**John B. Brown Jr.**

Mailing Address 3 Willow Oak Court

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Army Officer / Local Gov Exec

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C10168890**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Linda A. Carlisle**

Mailing Address 5411 Rambling Rd

City Greensboro State NC Zip Code 27409-9504

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 27 / 2013

**Transaction ID : C10164030**

Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1525.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Shehzad Quamar**

Mailing Address 2105 Needleleaf Lane

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer SSS USA, Inc Occupation Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2542.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 07 / 2013

**Transaction ID : C9900910**

Amount of Each Receipt this Period  
342.00

\* In-Kind: Lodging

**B.** Full Name (Last, First, Middle Initial)  
**Cone Thomas**

Mailing Address 402 Country Club Dr

City Greensboro State NC Zip Code 27408-5814

FEC ID number of contributing federal political committee. **C**

Name of Employer Ott Cone & Redpath, PA Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 18 / 2013

**Transaction ID : C10158950**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1080.71

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2013

**Transaction ID : C10161981**

Amount of Each Receipt this Period  
4.58

\* In-Kind: Office Supplies

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

596.58

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**George Kilpatrick Jr.**

Mailing Address **2 Westridge Court**

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : C10165481**

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Marilyn Pusey**

Mailing Address **3802 Northumberland Dr**

City Greensboro State NC Zip Code 27406-7935

FEC ID number of contributing federal political committee. **C**

Name of Employer Pusey Realty, Inc Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **330.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : C10165521**

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**R. Steve Bowden**

Mailing Address **3504 Glen Forest Ct**

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer R. Steve Bowden & Associates Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 27 / 2013

**Transaction ID : C10165601**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**450.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 19 / 2013

**Transaction ID : C10064671**

Amount of Each Receipt this Period  
**9.47**

\* In-Kind: Catering

**B.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 20 / 2013

**Transaction ID : C10076001**

Amount of Each Receipt this Period  
**0.86**

\* In-Kind: Postage

**C.** Full Name (Last, First, Middle Initial)  
**Mary H. Purnell**

Mailing Address 161 N. Dudley St

City Greensboro State NC Zip Code 27401

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : C10156891**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**110.33**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pamela Moye**

Mailing Address 518 Leitzel Ave

City Greensboro State NC Zip Code 27406-6615

FEC ID number of contributing federal political committee. **C**

Name of Employer NC A&T SU Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 04 / 2013

**Transaction ID : C10076901**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Veda Wilson**

Mailing Address 3520 Saint Francis Dr

City Wilmington State NC Zip Code 28409-6917

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation NA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 25 / 2013

**Transaction ID : C10071711**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Willie Turner Jr**

Mailing Address 16614 Ruby Hill Place

City Charlotte State NC Zip Code 28278

FEC ID number of contributing federal political committee. **C**

Name of Employer Mount Level Missionary Baptist Church Occupation Pastor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 29 / 2013

**Transaction ID : C9943121**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1350.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Donald R. Vaughan**

Mailing Address 902 Sunset Dr

City Greensboro State NC Zip Code 27408-7206

FEC ID number of contributing federal political committee. **C**

Name of Employer Donald R. Vaughan and Associates Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 30 / 2013

**Transaction ID : C9943131**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Linda Falls**

Mailing Address 828 N Elm St Apt A5

City Greensboro State NC Zip Code 27401-1501

FEC ID number of contributing federal political committee. **C**

Name of Employer Guilford County Occupation District Court Judge

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : C10165482**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Amber Bullock**

Mailing Address PO Box 339

City Boyds State MD Zip Code 20841-0339

FEC ID number of contributing federal political committee. **C**

Name of Employer American Legacy Foundation Occupation Health Educator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 10 / 2013

**Transaction ID : C10084282**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Karen R Savage**

Mailing Address 2300 Sharpe Rd

City Greensboro State NC Zip Code 27406

FEC ID number of contributing federal political committee. **C**

Name of Employer: Savage Enterprises Inc Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **460.00**

Date of Receipt: **12 / 28 / 2013**

**Transaction ID : C10169812**

Amount of Each Receipt this Period: **50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer: Alma Adams for Congress Occupation: Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1080.71**

Date of Receipt: **10 / 18 / 2013**

**Transaction ID : C10064672**

Amount of Each Receipt this Period: **13.55**

\* In-Kind: Office Supplies

**C.** Full Name (Last, First, Middle Initial)  
**Karen R Savage**

Mailing Address 2300 Sharpe Rd

City Greensboro State NC Zip Code 27406

FEC ID number of contributing federal political committee. **C**

Name of Employer: Savage Enterprises Inc Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **460.00**

Date of Receipt: **12 / 19 / 2013**

**Transaction ID : C10165512**

Amount of Each Receipt this Period: **250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>313.55</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cheryl A Wilson**

Mailing Address 601 Richardson Street

City Greensboro State NC Zip Code 27403

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : C10165582**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Carolyn S. Allen**

Mailing Address 2611 David Caldwell Dr

City Greensboro State NC Zip Code 27408-3901

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 24 / 2013

**Transaction ID : C9940312**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Davetta Florance Bristow**

Mailing Address 201-B East Montcastle Drive

City Greensboro State NC Zip Code 27406

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired Educator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : C10075242**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**450.00**



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 134	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bob Holmes**

Mailing Address 315 Muirfield Rd

City Los Angeles State CA Zip Code 90020

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Piedmont Endoscopy Center, Inc. Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2250.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 31 / 2013

**Transaction ID : C10172242**

Amount of Each Receipt this Period  
750.00

**B.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Alma Adams for Congress Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1080.71

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 27 / 2013

**Transaction ID : C10172282**

Amount of Each Receipt this Period  
6.70

\* In-Kind: Office Supplies

**C.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Alma Adams for Congress Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1080.71

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 13 / 2013

**Transaction ID : C10076002**

Amount of Each Receipt this Period  
2.97

\* In-Kind: Postage

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

759.67

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bernard Marshall**

Mailing Address P.O. 21922

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify) Special Primary

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 31 / 2013

**Transaction ID : C10172962**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Stanley L Allen**

Mailing Address 1522 Worthington PI

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer Stanley Allen DDS, PA Occupation Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : C10156892**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Wanda Autrey**

Mailing Address 922 Omaha St

City Greensboro State NC Zip Code 27406-2012

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation US Navy Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 30 / 2013

**Transaction ID : C10167802**

Amount of Each Receipt this Period  
0.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Elizabeth L Schnider</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 13 / 2013	
Mailing Address PO Box 38470 None		<b>Transaction ID : C10146812</b>	
City Charlotte	State NC	Zip Code 28278-1008	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer A Preferred Women's Health Center	Occupation Executive Administrator / CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) <b>B. Kevin D. Ossey</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 05 / 2013	
Mailing Address 210 Manchester Pl		<b>Transaction ID : C9943082</b>	
City Greensboro	State NC	Zip Code 27410-6082	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer American Anesthesiology	Occupation Physician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>C. George Kilpatrick Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2013	
Mailing Address 2 Westridge Court		<b>Transaction ID : C9943132</b>	
City Greensboro	State NC	Zip Code 27410	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Self Employed	Occupation Physician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3200.00
<b>TOTAL</b> This Period (last page this line number only).....	3200.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joan Brinson Dressler**

Mailing Address 1600 Red Forest Rd

City Greensboro State NC Zip Code 27410-3031

FEC ID number of contributing federal political committee. **C**

Name of Employer VF Jeanswear Occupation Manager, Customs Compliance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 02 / 2013

**Transaction ID : C9891352**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Katherine Lea Harrelson**

Mailing Address 3214 Winchester Dr

City Greensboro State NC Zip Code 27406-5240

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : C10160303**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Sally S Cone**

Mailing Address 500 Country Club Dr

City Greensboro State NC Zip Code 27408-5710

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired Librarian

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2037.75

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 30 / 2013

**Transaction ID : C9923293**

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

360.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Veita J. Bland-Spencer**

Mailing Address 2119 Candelar Drive

City State Zip Code  
High Point NC 27265

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bland Clinic PA Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 20 / 2013

**Transaction ID : C10165483**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Donald R. Vaughan**

Mailing Address 902 Sunset Dr

City State Zip Code  
Greensboro NC 27408-7206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Donald R. Vaughan and Associates Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 19 / 2013

**Transaction ID : C10165583**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Dawn S. Chaney**

Mailing Address 2002 W. Market St

City State Zip Code  
Greensboro NC 27403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Chaney Properties Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 19 / 2013

**Transaction ID : C10165593**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 07 / 2013
Mailing Address P.O. Box 20622		<b>Transaction ID : C10076003</b>
City Greensboro	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.33
Name of Employer Alma Adams for Congress	Occupation Campaign Manager	* In-Kind: Printing
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1080.71	

Full Name (Last, First, Middle Initial) <b>B. Millicent Rainey</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 11 / 2013
Mailing Address P.O. Box 544		<b>Transaction ID : C10064653</b>
City Hillsborough	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00
Name of Employer Bennett College	Occupation Provost	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1200.00	

Full Name (Last, First, Middle Initial) <b>C. Kyle Gott</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2013
Mailing Address P.O. Box 20622		<b>Transaction ID : C10064673</b>
City Greensboro	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 117.26
Name of Employer Alma Adams for Congress	Occupation Campaign Manager	* In-Kind: Facebook Ads
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1080.71	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	822.59
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Yvonne J Johnson**

Mailing Address 4311 King Arthur Place

City Greensboro State NC Zip Code 27405

FEC ID number of contributing federal political committee. **C**

Name of Employer City of Greensboro Occupation Mayor Pro Tem

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C10172243**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1080.71

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 18 / 2013

**Transaction ID : C10172273**

Amount of Each Receipt this Period  
32.54

\* In-Kind: Office Supplies

**C.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1080.71

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 27 / 2013

**Transaction ID : C10172283**

Amount of Each Receipt this Period  
8.91

\* In-Kind: Postage

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

291.45

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Florence L. Snider**

Mailing Address 4505 Blue Violet Dr

City Greensboro State NC Zip Code 27410-8862

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : C10156893**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Elvord Guidry**

Mailing Address 2901 Hackney Way

City Jamestown State NC Zip Code 27282

FEC ID number of contributing federal political committee. **C**

Name of Employer NorAg Technology Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 22 / 2013

**Transaction ID : C10071033**

Amount of Each Receipt this Period  
 750.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary H. Purnell**

Mailing Address 161 N. Dudley St

City Greensboro State NC Zip Code 27401

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 30 / 2013

**Transaction ID : C9943133**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

600.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Patricia McCoy**

Mailing Address 792 Columbus Ave  
Apt 9E

City State Zip Code  
New York NY 10025-5108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NA NA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
229.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 13 / 2013

**Transaction ID : C10147193**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**John A Barbee**

Mailing Address 5103 McMurray Cir

City State Zip Code  
Greensboro NC 27410-8492

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 31 / 2013

**Transaction ID : C10168064**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Hilda Pinnix Ragland**

Mailing Address 100 Loch Cove Ln

City State Zip Code  
Cary NC 27518-9604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Progress Energy Vice President--Northern Region

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 25 / 2013

**Transaction ID : C9940314**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

450.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joe Sam Queen**

Mailing Address 71 Pigeon St

City State Zip Code  
Waynesville NC 28786-2087

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Architect

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 30 / 2013

**Transaction ID : C10166124**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City State Zip Code  
Greensboro NC 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Alma Adams for Congress Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1080.71

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2013

**Transaction ID : C10064674**

Amount of Each Receipt this Period  
16.93

\* In-Kind: Internet Services

**C.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City State Zip Code  
Greensboro NC 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Alma Adams for Congress Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1080.71

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 07 / 2013

**Transaction ID : C10076004**

Amount of Each Receipt this Period  
6.91

\* In-Kind: Catering

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

523.84

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James F Goodman Sr.**

Mailing Address 719 Lakestone Dr

City Raleigh State NC Zip Code 27609-6341

FEC ID number of contributing federal political committee. **C**

Name of Employer Capitol Broadcasting Co. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 30 / 2013

**Transaction ID : C9922824**

Amount of Each Receipt this Period  
 2600.00

2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Sally S Cone**

Mailing Address 500 Country Club Dr

City Greensboro State NC Zip Code 27408-5710

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired Librarian

Receipt For: 2014  
 Primary  General  
 Other (specify) Special Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : C10172814**

Amount of Each Receipt this Period  
 777.75

\* In-Kind: Catering

2037.75

**C.** Full Name (Last, First, Middle Initial)  
**Loretta Anna Jennings**

Mailing Address 1810 Woodmere Drive

City Greensboro State NC Zip Code 27405

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 22 / 2013

**Transaction ID : C10071034**

Amount of Each Receipt this Period  
 100.00

300.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3477.75

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Barrett**

Mailing Address 100 Morgan Bluff Ln

City Chapel Hill State NC Zip Code 27517-4925

FEC ID number of contributing federal political committee. **C**

Name of Employer IBM Occupation Software Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : C10167754**

Amount of Each Receipt this Period  
 25.00

**B.** Full Name (Last, First, Middle Initial)  
**Janice Robinson**

Mailing Address 2601 Wilpar Dr

City Greensboro State NC Zip Code 27406-9493

FEC ID number of contributing federal political committee. **C**

Name of Employer National League for Nursing Occupation chief Program officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C10168434**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Thomas D. Garlitz**

Mailing Address 4434 Mullens Ford Rd

City Charlotte State NC Zip Code 28226-5509

FEC ID number of contributing federal political committee. **C**

Name of Employer Carlington Williamson Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2013

**Transaction ID : C9943134**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**525.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ambrous Jacobs</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 3004 Lawndale Dr Apt H		<b>Transaction ID : C10061624</b>
City Greensboro	State NC Zip Code 27408-3451	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Bennett College	Occupation Professor	Amount of Each Receipt this Period 850.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. Melissa Dimondstein</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 2518 Burgundy Dr		<b>Transaction ID : C9922134</b>
City Greensboro	State NC Zip Code 27407-5922	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation Retired	Amount of Each Receipt this Period 500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C. Anne D. Hummel</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 13 / 2013
Mailing Address 1907 Rosecrest Dr		<b>Transaction ID : C9900804</b>
City Greensboro	State NC Zip Code 27408-6215	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer N/A	Occupation N/A	Amount of Each Receipt this Period 550.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Shahzad Akbar**

Mailing Address 3706 Worthing Court

City Greensboro State NC Zip Code 27455

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Entrepreneur

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2443.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 07 / 2013

**Transaction ID : C9900915**

Amount of Each Receipt this Period  
329.00

\* In-Kind: Lodging

**B.** Full Name (Last, First, Middle Initial)  
**Treana Adkins Bowling**

Mailing Address 1806 Sharpe Rd

City Greensboro State NC Zip Code 27406-9413

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Education/Administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : C10165485**

Amount of Each Receipt this Period  
125.00

**C.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1080.71

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 07 / 2013

**Transaction ID : C9918685**

Amount of Each Receipt this Period  
1.72

\* In-Kind: Postage

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

455.72

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LeKecia D McGee-Glover**

Mailing Address 3102 Cabarrus Dr

City Greensboro State NC Zip Code 27407

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : C10165585**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Millicent Rainey**

Mailing Address P.O. Box 544

City Hillsborough State NC Zip Code 27278

FEC ID number of contributing federal political committee. **C**

Name of Employer Bennett College Occupation Provost

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 27 / 2013

**Transaction ID : C10165605**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Cheryl A Wilson**

Mailing Address 601 Richardson Street

City Greensboro State NC Zip Code 27403

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 28 / 2013

**Transaction ID : C9940325**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1600.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Crandall C. Bowles**

Mailing Address 6725 Old Providence Rd

City State Zip Code  
Charlotte NC 28226-7735

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Springs Company Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 30 / 2013

**Transaction ID : C10165985**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City State Zip Code  
Greensboro NC 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Alma Adams for Congress Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1080.71

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 01 / 2013

**Transaction ID : C10064665**

Amount of Each Receipt this Period  
29.21

\* In-Kind: Office Supplies

**C.** Full Name (Last, First, Middle Initial)  
**Catharine Biggs Arrowood**

Mailing Address 723 Staley Ct

City State Zip Code  
Raleigh NC 27609-6361

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Parker Poe Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 17 / 2013

**Transaction ID : C10064705**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

529.21



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Julius A Fulmore**

Mailing Address 2006 New Castle Rd

City Greensboro State NC Zip Code 27406-3229

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C10172245**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Patricia McCoy**

Mailing Address 792 Columbus Ave Apt 9E

City New York State NY Zip Code 10025-5108

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation NA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **229.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : C10172275**

Amount of Each Receipt this Period  
**49.00**

\* In-Kind: Printing

**C.** Full Name (Last, First, Middle Initial)  
**Patricia A. Orrange**

Mailing Address 1509 Granada Dr

City Raleigh State NC Zip Code 27612

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : C10167045**

Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**749.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 134	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 09 / 2013**

**Transaction ID : C10076005**

Amount of Each Receipt this Period  
**0.80**

\* In-Kind: Printing

**B.** Full Name (Last, First, Middle Initial)  
**Roberta Waddle**

Mailing Address 3941 Gainey Rd

City Fayetteville State NC Zip Code 28306-3381

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 30 / 2013**

**Transaction ID : C10167415**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kendall Phills**

Mailing Address 451 Shasta Lane

City Charlotte State NC Zip Code 28211-4053

FEC ID number of contributing federal political committee. **C**

Name of Employer The McDevitt Agency Occupation Real Estate Broker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 22 / 2013**

**Transaction ID : C10071035**

Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**600.80**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 134  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Florine S Jackson**

Mailing Address 9 Northline Place

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2013

**Transaction ID : C9916645**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 200.00

**B.** Full Name (Last, First, Middle Initial)  
**Mary Braxton Joseph**

Mailing Address 60140 Davie

City Chapel Hill State NC Zip Code 27517-8466

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed Occupation Media Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C10168945**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Gregory P. Hatem**

Mailing Address 133 Fayetteville Street Mall 6f

City Raleigh State NC Zip Code 27601

FEC ID number of contributing federal political committee. **C**

Name of Employer Empire Occupation CEO/FOUNDER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C10169035**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

\_\_\_\_\_ 700.00

\_\_\_\_\_

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cheryl G. Heaton**

Mailing Address 3658 Upton St. NW

City Washington State DC Zip Code 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer NYU Occupation Dean Public Health and Global Studies

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2013

**Transaction ID : C9943635**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Erika K Nelson**

Mailing Address 10 Topland Pl

City East Northport State NY Zip Code 11731-1939

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Finance Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
205.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 27 / 2013

**Transaction ID : C10164025**

Amount of Each Receipt this Period  
10.00

**C.** Full Name (Last, First, Middle Initial)  
**Katherine G. Stern**

Mailing Address 1804 Nottingham Rd

City Greensboro State NC Zip Code 27408-5613

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2013

**Transaction ID : C10147755**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1260.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Brice Barnes**

Mailing Address 122 Finsbury St

City Durham State NC Zip Code 27703-8205

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C10148326**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Anne D. Hummel**

Mailing Address 1907 Rosecrest Dr

City Greensboro State NC Zip Code 27408-6215

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C10169806**

Amount of Each Receipt this Period  
**150.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jasie S. Barringer**

Mailing Address 1620 Fairfax Rd

City Greensboro State NC Zip Code 27407

FEC ID number of contributing federal political committee. **C**

Name of Employer R.H. Barringer Dist. Co. Inc. Occupation Chairman of the Board

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C10169876**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1400.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>Katie G. Dorsett</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 1000 N English St		<b>Transaction ID : C10165496</b>
City Greensboro	State NC	Zip Code 27405-6804
FEC ID number of contributing federal political committee.	C	
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	
		Amount of Each Receipt this Period 100.00

Full Name (Last, First, Middle Initial) <b>Kyle Gott</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 07 / 2013
Mailing Address P.O. Box 20622		<b>Transaction ID : C10161976</b>
City Greensboro	State NC	Zip Code 27420
FEC ID number of contributing federal political committee.	C	
Name of Employer Alma Adams for Congress	Occupation Campaign Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1080.71	
		Amount of Each Receipt this Period 22.83
		* In-Kind: Catering

Full Name (Last, First, Middle Initial) <b>John A Barbee</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 5103 McMurray Cir		<b>Transaction ID : C9939536</b>
City Greensboro	State NC	Zip Code 27410-8492
FEC ID number of contributing federal political committee.	C	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	
		Amount of Each Receipt this Period 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	222.83
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>Jennifer Weiss</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 11 / 2013
Mailing Address 303 Tibbetts Rock Dr		<b>Transaction ID : C9945726</b>
City Cary	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation former State legislator	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Ledford Austin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 20 / 2013
Mailing Address 118 East Keeling Road		<b>Transaction ID : C10165486</b>
City Greensboro	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) <b>Kyle Gott</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 07 / 2013
Mailing Address P.O. Box 20622		<b>Transaction ID : C9918686</b>
City Greensboro	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 154.76
Name of Employer Alma Adams for Congress	Occupation Campaign Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1080.71	* In-Kind: Office Supplies

<b>SUBTOTAL</b> of Receipts This Page (optional).....	654.76
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dorothy Kendall Kearns</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2013	
Mailing Address 1315 Longcreek Dr		<b>Transaction ID : C10165586</b>	
City State Zip Code High Point NC 27262-4526	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Craven-Johnson-Pollock, Inc. Realtor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 25 / 2013	
Mailing Address P.O. Box 20622		<b>Transaction ID : C10075996</b>	
City State Zip Code Greensboro NC 27420	Amount of Each Receipt this Period 35.08		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Alma Adams for Congress Campaign Manager		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1080.71		
* In-Kind: Catering			

Full Name (Last, First, Middle Initial) <b>C. Bob Holmes</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 08 / 2013	
Mailing Address 315 Muirfield Rd		<b>Transaction ID : C10064646</b>	
City State Zip Code Los Angeles CA 90020	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Piedmont Endoscopy Center, Inc. Physician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1735.08
<b>TOTAL</b> This Period (last page this line number only).....	[ ]



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cynthia G Marshall**

Mailing Address 4101 Glenbrook Dr

City Richardson State TX Zip Code 75082

FEC ID number of contributing federal political committee. **C**

Name of Employer AT&T Occupation Senior VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 11 / 2013

**Transaction ID : C10064656**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 28 / 2013

**Transaction ID : C10064666**

Amount of Each Receipt this Period  
 65.70

\* In-Kind: Travel Expense / Gas

**C.** Full Name (Last, First, Middle Initial)  
**Patricia McCoy**

Mailing Address 792 Columbus Ave Apt 9E

City New York State NY Zip Code 10025-5108

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation NA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2013

**Transaction ID : C10172276**

Amount of Each Receipt this Period  
 80.00

\* In-Kind: Catering

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

645.70

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Acquenetta V Wheeler**

Mailing Address 1304 Westminster Dr.

City Greensboro	State NC	Zip Code 27410
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FEC ID number of contributing federal political committee. **C**

Name of Employer United Healthcare	Occupation Certified Physician Executive
---------------------------------------	---

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 17 / 2013

**Transaction ID : C10156476**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro	State NC	Zip Code 27420
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FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress	Occupation Campaign Manager
---	--------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1080.71

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 09 / 2013

**Transaction ID : C10076006**

Amount of Each Receipt this Period  
33.91

\* In-Kind: Catering

**C.** Full Name (Last, First, Middle Initial)  
**Janice G. Brewington**

Mailing Address 2601 Wilpar Drive

City Greensboro	State NC	Zip Code 27406
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NC A & T University	Occupation Vice Chancellor
---	-------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 29 / 2013

**Transaction ID : C9943126**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

783.91

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pamela Moye**

Mailing Address 518 Leitzel Ave

City Greensboro State NC Zip Code 27406-6615

FEC ID number of contributing federal political committee. **C**

Name of Employer NC A&T SU Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C10168846**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Naomi Lambert**

Mailing Address 2028 Cadenza Ln

City Raleigh State NC Zip Code 27614-8532

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation NA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 25 / 2013

**Transaction ID : C10072256**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Archie Barksdale**

Mailing Address 1517 Hamilton Hills Dr

City Greensboro State NC Zip Code 27406-9812

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **270.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 18 / 2013

**Transaction ID : C9916646**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**375.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 134  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Barrett**

Mailing Address 100 Morgan Bluff Ln

City Chapel Hill State NC Zip Code 27517-4925

FEC ID number of contributing federal political committee. **C**

Name of Employer IBM Occupation Software Engineer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 21 / 2013

**Transaction ID : C9916656**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Roberta Waddle**

Mailing Address 3941 Gainey Rd

City Fayetteville State NC Zip Code 28306-3381

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 25 / 2013

**Transaction ID : C9922136**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Amber Bullock**

Mailing Address PO Box 339

City Boyds State MD Zip Code 20841-0339

FEC ID number of contributing federal political committee. **C**

Name of Employer American Legacy Foundation Occupation Health Educator

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C10169026**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

550.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lisa Unsworth**

Mailing Address **34 Bradford Rd**

City **Newton** State **MA** Zip Code **02461-1027**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Arnold** Occupation **Advertising**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 15 / 2013**

**Transaction ID : C9901317**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Robert S Chiles Sr**

Mailing Address **1804 Chiles-Higgins Court**

City **Greensboro** State **NC** Zip Code **27406**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Chiles Dunning Inc** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 31 / 2013**

**Transaction ID : C10169877**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address **P.O. Box 20622**

City **Greensboro** State **NC** Zip Code **27420**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Alma Adams for Congress** Occupation **Campaign Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 10 / 2013**

**Transaction ID : C10161977**

Amount of Each Receipt this Period  
**30.00**

\* In-Kind: Facebook Ads

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**380.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Hardison**

Mailing Address 3208 Champion Ct

City Snellville State GA Zip Code 30039-4721

FEC ID number of contributing federal political committee. **C**

Name of Employer TBD Occupation S/W Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : C10167047**

Amount of Each Receipt this Period  
**20.00**

**B.** Full Name (Last, First, Middle Initial)  
**Pamela Moye**

Mailing Address 518 Leitzel Ave

City Greensboro State NC Zip Code 27406-6615

FEC ID number of contributing federal political committee. **C**

Name of Employer NC A&T SU Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 28 / 2013

**Transaction ID : C10165077**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Archie Barksdale**

Mailing Address 1517 Hamilton Hills Dr

City Greensboro State NC Zip Code 27406-9812

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **270.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : C10165487**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**170.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sandra Koritz**

Mailing Address 1801 Murrayhill Rd

City Greensboro State NC Zip Code 27406-3919

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Letter Carrier

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : C10165507**

Amount of Each Receipt this Period  
**125.00**

**B.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 10 / 2013

**Transaction ID : C9918687**

Amount of Each Receipt this Period  
**12.15**

\* In-Kind: Catering

**C.** Full Name (Last, First, Middle Initial)  
**Delores A. Parker**

Mailing Address 6408 Gainsborough Dr.

City Raleigh State NC Zip Code 27612

FEC ID number of contributing federal political committee. **C**

Name of Employer Parker Consulting Group Occupation Consultant/Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : C10165597**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**237.15**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark R. Craig**

Mailing Address 6434 Carmon Rd

City State Zip Code  
Gibsonville NC 27249-8862

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
R.H. Barringer Dist. Co., Inc. President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 27 / 2013

**Transaction ID : C10165607**

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
**Al Mir**

Mailing Address 17W727 Butterfield Rd  
Suite FG

City State Zip Code  
Oakbrook Terrace IL 60181-4278

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
State Home Health Agency Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 24 / 2013

**Transaction ID : C9919367**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**L. Allen Dobson Jr.**

Mailing Address 1600 S Main St

City State Zip Code  
Mt Pleasant NC 28124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Carolinas Healthcare System Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 02 / 2013

**Transaction ID : C10075247**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1600.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 134  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 25 / 2013**

**Transaction ID : C10064667**

Amount of Each Receipt this Period  
**45.38**

\* In-Kind: Office Supplies

**B.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 08 / 2013**

**Transaction ID : C10172277**

Amount of Each Receipt this Period  
**42.00**

\* In-Kind: Travel Expense / Gas

**C.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 22 / 2013**

**Transaction ID : C10075997**

Amount of Each Receipt this Period  
**5.33**

\* In-Kind: Catering

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**92.71**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 11 / 2013**

**Transaction ID : C10076007**

Amount of Each Receipt this Period  
**26.67**

\* In-Kind: Catering

**B.** Full Name (Last, First, Middle Initial)  
**Elvord Guidry**

Mailing Address 2901 Hackney Way

City Jamestown State NC Zip Code 27282

FEC ID number of contributing federal political committee. **C**

Name of Employer NorAg Technology Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 22 / 2013**

**Transaction ID : C10071037**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Carolyn S. Allen**

Mailing Address 2611 David Caldwell Dr

City Greensboro State NC Zip Code 27408-3901

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 11 / 2013**

**Transaction ID : C10147757**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**226.67**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James E Little**

Mailing Address 13713 Kerrydale Rd

City Dale City State VA Zip Code 22193-4710

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2013

**Transaction ID : C9943127**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Edolphus Towns**

Mailing Address 286 Highland Blvd

City Brooklyn State NY Zip Code 11207

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : C10147767**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Nancy J. Hoffmann**

Mailing Address 204 Muirs Chapel Road Suite 100

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer Reffett Associates Occupation Managing Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : C10165518**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1350.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 17 / 2013

**Transaction ID : C10161978**

Amount of Each Receipt this Period  
 2.02

\* In-Kind: Facebook Ads

**B.** Full Name (Last, First, Middle Initial)  
**Amber Bullock**

Mailing Address PO Box 339

City Boyds State MD Zip Code 20841-0339

FEC ID number of contributing federal political committee. **C**

Name of Employer American Legacy Foundation Occupation Health Educator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 30 / 2013

**Transaction ID : C10073588**

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Anne D. Hummel**

Mailing Address 1907 Rosecrest Dr

City Greensboro State NC Zip Code 27408-6215

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : C10079248**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

202.02

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charles Lownes**

Mailing Address 2404 Brewington-Sibert Place

City Greensboro State NC Zip Code 27406

FEC ID number of contributing federal political committee. **C**

Name of Employer NC A&T University Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C10169878**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**John B. Brown Jr.**

Mailing Address 3 Willow Oak Court

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Army Officer / Local Gov Exec

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : C10165498**

Amount of Each Receipt this Period  
 200.00

**C.** Full Name (Last, First, Middle Initial)  
**Sandra Koritz**

Mailing Address 1801 Murrayhill Rd

City Greensboro State NC Zip Code 27406-3919

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Letter Carrier

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : C10165508**

Amount of Each Receipt this Period  
 125.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

575.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 16 / 2013

**Transaction ID : C9918688**

Amount of Each Receipt this Period  
**6.24**

\* In-Kind: Catering

**B.** Full Name (Last, First, Middle Initial)  
**Jasie S. Barringer**

Mailing Address 1620 Fairfax Rd

City Greensboro State NC Zip Code 27407

FEC ID number of contributing federal political committee. **C**

Name of Employer R.H. Barringer Dist. Co. Inc. Occupation Chairman of the Board

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 27 / 2013

**Transaction ID : C10165608**

Amount of Each Receipt this Period  
**400.00**

**C.** Full Name (Last, First, Middle Initial)  
**Anne D. Hummel**

Mailing Address 1907 Rosecrest Dr

City Greensboro State NC Zip Code 27408-6215

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2013

**Transaction ID : C10165678**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**506.24**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ann Fogelman**

Mailing Address 5 Saint James Pl

City Chapel Hill State NC Zip Code 27514-4218

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 01 / 2013

**Transaction ID : C9940298**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C10176778**

Amount of Each Receipt this Period  
 12.83

\* In-Kind: Catering

**C.** Full Name (Last, First, Middle Initial)  
**Arthur M Winstead Jr.**

Mailing Address 1401 McDowell Dr

City Greensboro State NC Zip Code 27408-5218

FEC ID number of contributing federal political committee. **C**

Name of Employer Davenport, Marvin, Joyce & Co., LLP Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 11 / 2013

**Transaction ID : C10064658**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

762.83

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 24 / 2013**

**Transaction ID : C10064668**

Amount of Each Receipt this Period  
**7.78**

\* In-Kind: Catering

**B.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 08 / 2013**

**Transaction ID : C10172278**

Amount of Each Receipt this Period  
**57.15**

\* In-Kind: Catering

**C.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 18 / 2013**

**Transaction ID : C10075998**

Amount of Each Receipt this Period  
**40.01**

\* In-Kind: Travel Expense / Gas

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>104.94</b>
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 11 / 2013

**Transaction ID : C10076008**

Amount of Each Receipt this Period  
 4.77

\* In-Kind: Catering

**B.** Full Name (Last, First, Middle Initial)  
**Elizabeth L Schnider**

Mailing Address PO Box 38470  
None

City Charlotte State NC Zip Code 28278-1008

FEC ID number of contributing federal political committee. **C**

Name of Employer A Preferred Women's Health Center Occupation Executive Administrator / CEO

Receipt For: 2014  
 Primary  General  
 Other (specify) Special Primary

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : C10162258**

Amount of Each Receipt this Period  
 400.00

**C.** Full Name (Last, First, Middle Initial)  
**Sally S Cone**

Mailing Address 500 Country Club Dr

City Greensboro State NC Zip Code 27408-5710

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired Librarian

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2037.75**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 22 / 2013

**Transaction ID : C10071038**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**654.77**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Amber Bullock**

Mailing Address **PO Box 339**

City **Boyd** State **MD** Zip Code **20841-0339**

FEC ID number of contributing federal political committee. **C**

Name of Employer **American Legacy Foundation** Occupation **Health Educator**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2013**

**Transaction ID : C9943128**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Erskine B Bowles**

Mailing Address **6725 Old Providence Rd**

City **Charlotte** State **NC** Zip Code **28226-7735**

FEC ID number of contributing federal political committee. **C**

Name of Employer **University of NC** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 18 / 2013**

**Transaction ID : C9916648**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Ernestine T Taylor**

Mailing Address **404 Quick Silver Ct**

City **Greensboro** State **NC** Zip Code **27455-9213**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **770.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 11 / 2013**

**Transaction ID : C10147758**

Amount of Each Receipt this Period  
**75.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**425.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Donison S. Willis**

Mailing Address 3104 Saint Regis Rd.

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C10169879**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C10161979**

Amount of Each Receipt this Period  
**11.93**

\* In-Kind: Catering

**C.** Full Name (Last, First, Middle Initial)  
**Katherine Lea Harrelson**

Mailing Address 3214 Winchester Dr

City Greensboro State NC Zip Code 27406-5240

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 20 / 2013

**Transaction ID : C10068639**

Amount of Each Receipt this Period  
**15.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**276.93**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Samuel Hummel**

Mailing Address 1907 Rosecrest Drive

City Greensboro State NC Zip Code 27408-6215

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : C10165499**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Linda R Wilson**

Mailing Address 5 Round Hill Ct

City Greensboro State NC Zip Code 27408-3709

FEC ID number of contributing federal political committee. **C**

Name of Employer North Carolina A&T State University Occupation Health Care Administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : C10165579**

Amount of Each Receipt this Period  
 750.00

**C.** Full Name (Last, First, Middle Initial)  
**Derrick Chambers**

Mailing Address 3811 Saxonbury Way

City Charlotte State NC Zip Code 28269

FEC ID number of contributing federal political committee. **C**

Name of Employer Building Bridges for Life Occupation Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 22 / 2013

**Transaction ID : C10071029**

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1300.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2013

**Transaction ID : C10064669**

Amount of Each Receipt this Period  
 1.52

\* In-Kind: Postage

**B.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : C10172279**

Amount of Each Receipt this Period  
 113.36

\* In-Kind: Lodging

**C.** Full Name (Last, First, Middle Initial)  
**Kyle Gott**

Mailing Address P.O. Box 20622

City Greensboro State NC Zip Code 27420

FEC ID number of contributing federal political committee. **C**

Name of Employer Alma Adams for Congress Occupation Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1080.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2013

**Transaction ID : C10075999**

Amount of Each Receipt this Period  
 0.80

\* In-Kind: Printing

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

115.68

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William H White III**

Mailing Address 86 Park Village Lane

City Greensboro State NC Zip Code 27455

FEC ID number of contributing federal political committee. **C**

Name of Employer White Family Farms LLC Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 22 / 2013

**Transaction ID : C10071039**

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Katherine G. Stern**

Mailing Address 1804 Nottingham Rd

City Greensboro State NC Zip Code 27408-5613

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 29 / 2013

**Transaction ID : C9943119**

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Lisa Drapkin**

Mailing Address 37 Putnam Avenue

City Cambridge State MA Zip Code 02139

FEC ID number of contributing federal political committee. **C**

Name of Employer Real Estate Occupation Coldwell Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 17 / 2013

**Transaction ID : C10162070A**

Amount of Each Receipt this Period  
 250.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

450.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Emily's List**

Mailing Address 1800 M Street NW, Suite 375N

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
18509.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2013

**Transaction ID : C10162070AB**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Katharine B. Mountcastle**

Mailing Address 37 Oenoke Lane

City New Canaan State CT Zip Code 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2013

**Transaction ID : C10148521A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**Emily's List**

Mailing Address 1800 M Street NW, Suite 375N

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
18509.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2013

**Transaction ID : C10148521AB**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Katherine B Redding**

Mailing Address **PO Box 612**

City **Brooklandville** State **MD** Zip Code **21022**

FEC ID number of contributing federal political committee. **C**

Name of Employer **None** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 24 / 2013**

**Transaction ID : C10164971**

Amount of Each Receipt this Period  
**250.00**

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**Emily's List**

Mailing Address **1800 M Street NW, Suite 375N**

City **Washington** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00193433**

Name of Employer  Occupation **Conduit total listed in Agg. field**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **18509.20**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 24 / 2013**

**Transaction ID : C10164971B**

Amount of Each Receipt this Period  
**250.00**

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Joan S. Powers**

Mailing Address **3001 Veazey Terrace  
Apt 1501**

City **Washington** State **DC** Zip Code **20008**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Lawyer/Consultant** Occupation **Self-Employed**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 17 / 2013**

**Transaction ID : C10162161A**

Amount of Each Receipt this Period  
**250.00**

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**500.00**



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Emily's List**

Mailing Address 1800 M Street NW, Suite 375N

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
18509.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2013

**Transaction ID : C10162161AB**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Valerie Block**

Mailing Address 50 Glenwood Road

City Montclair State NJ Zip Code 07043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Writer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 25 / 2013

**Transaction ID : C10164972**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**Emily's List**

Mailing Address 1800 M Street NW, Suite 375N

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
18509.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 25 / 2013

**Transaction ID : C10164972B**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

250.00

250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Diane Mosbacher**

Mailing Address 3570 Clay Street

City San Francisco State CA Zip Code 94118-1839

FEC ID number of contributing federal political committee. **C**

Name of Employer Woman Vision Occupation MD, Filmmaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : C10169272**

Amount of Each Receipt this Period  
2600.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**Emily's List**

Mailing Address 1800 M Street NW, Suite 375N

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
18509.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : C10169272B**

Amount of Each Receipt this Period  
2600.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Serena Connelly**

Mailing Address 3156 Brookhollow Drive

City Farmers Branch State TX Zip Code 75234

FEC ID number of contributing federal political committee. **C**

Name of Employer Contran Corp. Occupation foundation executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2013

**Transaction ID : C10168487**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3100.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Emily's List**

Mailing Address 1800 M Street NW, Suite 375N

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
18509.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2013

**Transaction ID : C10168487B**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Jason Jackson**

Mailing Address 3124 Constable St

City Las Vegas State NV Zip Code 89135

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Physician Self

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2013

**Transaction ID : C10162108A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**Emily's List**

Mailing Address 1800 M Street NW, Suite 375N

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
18509.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2013

**Transaction ID : C10162108AB**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Elizabeth Craven**

Mailing Address 4112 Powder Mill Rd

City Chapel Hill State NC Zip Code 27514-9658

FEC ID number of contributing federal political committee. **C**

Name of Employer Warner Foundation Occupation Nonprofit Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 18 / 2013

**Transaction ID : C10162219A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**Emily's List**

Mailing Address 1800 M Street NW, Suite 375N

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
18509.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 18 / 2013

**Transaction ID : C10162219AB**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

500.00

47383.64

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 134
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**NEA FUND FOR CHILDREN AND PUBLIC EDUCATION**

Mailing Address 1201 16TH STREET NW STE 418

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : C10169861**

Amount of Each Receipt this Period  
5000.00

**B. Full Name (Last, First, Middle Initial)**  
**MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 1301 CONCORD TERRACE

City SUNRISE	State FL	Zip Code 33323
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00469205

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 18 / 2013

**Transaction ID : C9916652**

Amount of Each Receipt this Period  
4000.00

**C. Full Name (Last, First, Middle Initial)**  
**WASTE MANAGEMENT EMPLOYEES BETTER GOVERNMENT FUND**

Mailing Address 701 PENNSYLVANIA AVE., NW  
SUITE 590

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00119008

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C10169873**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

9500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 134
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**OFF THE SIDELINES PAC**

Mailing Address P.O. BOX 78182

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00525600

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 27 / 2013

**Transaction ID : C10165603**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**FD & MA of NC, Inc PAC**

Mailing Address P.O. Box 6114

City Wilson State NC Zip Code 27894

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : C10078304**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**OFF THE SIDELINES PAC**

Mailing Address P.O. BOX 78182

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00525600

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)    Special Primary

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 27 / 2013

**Transaction ID : C10165604**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

10500.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : C10165604

Contribution originally received as designated for the general election. Request made to change designation to special primary. Affirmative response received. Change in designation made.

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 134
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Emily's List**

Mailing Address 1800 M Street NW, Suite 375N

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C10169887**

Amount of Each Receipt this Period  
 5000.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE**

Mailing Address 520 N. NORTHWEST HIGHWAY

City PARK RIDGE State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify) Special Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2013

**Transaction ID : C9922137**

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN POSTAL WORKERS UNION COMMITTEE ON POLITICAL ACTION**

Mailing Address 1300 L STREET NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010322

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : C10169868**

Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

15000.00



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : C9922137

Correction to designation - was originally designated for special primary by contributor and incorrectly designated to the primary on the report.

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 134
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mobleys Campaign**

Mailing Address P.O. Box 794

City State Zip Code  
Ahoskie NC 27910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 31 2013

**Transaction ID : C10172249**

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
**Committee to Re-Elect Angela Bryant**

Mailing Address 717 W. End St

City State Zip Code  
Rocky Mount NC 27803

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 13 2013

**Transaction ID : C10147769**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

125.00

35125.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sooner Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address P.O. Box 550		Amount of Each Disbursement this Period 414.49 <b>Transaction ID : D695560</b>
City Miami	State OK	
Zip Code 74355	Purpose of Disbursement Printing	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Sooner Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address P.O. Box 550		Amount of Each Disbursement this Period 955.00 <b>Transaction ID : D700299</b>
City Miami	State OK	
Zip Code 74355	Purpose of Disbursement Printing	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2013
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 0.99 <b>Transaction ID : D701027</b>
City Somerville	State MA	
Zip Code 02144	Purpose of Disbursement Processing Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1370.48
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013		
Mailing Address 366 Summer Street			Amount of Each Disbursement this Period 0.40		
City Somerville	State MA	Zip Code 02144	Transaction ID : D701028		
Purpose of Disbursement Processing Fee		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2013		
Mailing Address 366 Summer Street			Amount of Each Disbursement this Period 1.98		
City Somerville	State MA	Zip Code 02144	Transaction ID : D701029		
Purpose of Disbursement Processing Fee		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013		
Mailing Address 366 Summer Street			Amount of Each Disbursement this Period 1.98		
City Somerville	State MA	Zip Code 02144	Transaction ID : D696242		
Purpose of Disbursement Processing Fee		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4.36
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Greenprint Strategies Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2013	
Mailing Address 122 Finsbury St.			Amount of Each Disbursement this Period 3153.15	
City Durham	State NC	Zip Code 27703	Transaction ID : <b>D696266</b>	
Purpose of Disbursement Fundraising Consulting		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Greenprint Strategies Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013	
Mailing Address 122 Finsbury St.			Amount of Each Disbursement this Period 6216.56	
City Durham	State NC	Zip Code 27703	Transaction ID : <b>D695060</b>	
Purpose of Disbursement Fundraising Consulting		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Greenprint Strategies Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013	
Mailing Address 122 Finsbury St.			Amount of Each Disbursement this Period 993.94	
City Durham	State NC	Zip Code 27703	Transaction ID : <b>D695061</b>	
Purpose of Disbursement Catering		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10363.65
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Greenprint Strategies Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013		
Mailing Address 122 Finsbury St.			Amount of Each Disbursement this Period 69.54		
City Durham	State NC	Zip Code 27703	Transaction ID : <b>D695062</b>		
Purpose of Disbursement Event Supplies		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Greenprint Strategies Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013		
Mailing Address 122 Finsbury St.			Amount of Each Disbursement this Period 372.25		
City Durham	State NC	Zip Code 27703	Transaction ID : <b>D695063</b>		
Purpose of Disbursement Postage		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Greenprint Strategies Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013		
Mailing Address 122 Finsbury St.			Amount of Each Disbursement this Period 304.50		
City Durham	State NC	Zip Code 27703	Transaction ID : <b>D697566</b>		
Purpose of Disbursement Postage		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	746.29
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Greenprint Strategies Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 122 Finsbury St.		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : D697809</b>
City Durham	State NC	
Zip Code 27703	Purpose of Disbursement Fundraising Consulting	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Rhue Still, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 1216 East Kenosha St., #313		Amount of Each Disbursement this Period 2486.50 <b>Transaction ID : D695563</b>
City Broken Arrow	State OK	
Zip Code 74012	Purpose of Disbursement Website	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. First Data North America</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 5565 Glenridge Connector NE Suite 2000		Amount of Each Disbursement this Period 258.30 <b>Transaction ID : D695085</b>
City Atlanta	State GA	
Zip Code 30342	Purpose of Disbursement Credit Card Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5744.80
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. First Data North America</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 5565 Glenridge Connector NE Suite 2000		Amount of Each Disbursement this Period 99.83 <b>Transaction ID : D695086</b>
City Atlanta State GA Zip Code 30342	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. First Data North America</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 5565 Glenridge Connector NE Suite 2000		Amount of Each Disbursement this Period 23.50 <b>Transaction ID : D695087</b>
City Atlanta State GA Zip Code 30342	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. First Data North America</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 5565 Glenridge Connector NE Suite 2000		Amount of Each Disbursement this Period 166.91 <b>Transaction ID : D696269</b>
City Atlanta State GA Zip Code 30342	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	290.24
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 134			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. First Data North America</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 5565 Glenridge Connector NE Suite 2000		Amount of Each Disbursement this Period 115.00 <b>Transaction ID : D696270</b>
City Atlanta State GA Zip Code 30342	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. First Data North America</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 5565 Glenridge Connector NE Suite 2000		Amount of Each Disbursement this Period 45.26 <b>Transaction ID : D696271</b>
City Atlanta State GA Zip Code 30342	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. First Data North America</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 5565 Glenridge Connector NE Suite 2000		Amount of Each Disbursement this Period 155.57 <b>Transaction ID : D699932</b>
City Atlanta State GA Zip Code 30342	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	315.83
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. First Data North America</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 5565 Glenridge Connector NE Suite 2000		Amount of Each Disbursement this Period 67.52 <b>Transaction ID : D699934</b>
City Atlanta State GA Zip Code 30342	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. First Data North America</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 5565 Glenridge Connector NE Suite 2000		Amount of Each Disbursement this Period 41.79 <b>Transaction ID : D699937</b>
City Atlanta State GA Zip Code 30342	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Arrowhead Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 508 Houston St.		Amount of Each Disbursement this Period 64.05 <b>Transaction ID : D695564</b>
City Greensboro State NC Zip Code 27401	Purpose of Disbursement Printing 006 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	173.36
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Arrowhead Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address 508 Houston St.		Amount of Each Disbursement this Period 557.11 <b>Transaction ID : D695071</b>
City Greensboro State NC Zip Code 27401	Purpose of Disbursement Printing Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Kseniya Kniazeva</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 2017 S. Lincoln Street Apt. 811		Amount of Each Disbursement this Period 2700.00 <b>Transaction ID : D695056</b>
City Salt Lake City State UT Zip Code 84105	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Kseniya Kniazeva</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 2017 S. Lincoln Street Apt. 811		Amount of Each Disbursement this Period 18.00 <b>Transaction ID : D695057</b>
City Salt Lake City State UT Zip Code 84105	Purpose of Disbursement Reimbursement / Parking Fee Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3275.11
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Enterprise Rent A Car</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2013
Mailing Address 434 US 70		Amount of Each Disbursement this Period 244.00 <b>Transaction ID : D696254</b>
City Raleigh	State NC	
Zip Code 27601	Purpose of Disbursement Rental Car	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 4405 Wendover Ave		Amount of Each Disbursement this Period 64.75 <b>Transaction ID : D695069</b>
City Greensboro	State NC	
Zip Code 27407	Purpose of Disbursement Telephone Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 4405 Wendover Ave		Amount of Each Disbursement this Period 90.00 <b>Transaction ID : D697481</b>
City Greensboro	State NC	
Zip Code 27407	Purpose of Disbursement Telephone Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	398.75
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 134		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 4405 Wendover Ave		Amount of Each Disbursement this Period 90.00 <b>Transaction ID : D697482</b>
City Greensboro	State NC Zip Code 27407	
Purpose of Disbursement Telephone Expense	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Emily's List</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 1800 M Street NW, Suite 375N		Amount of Each Disbursement this Period 2.99 <b>Transaction ID : D697475</b>
City Washington	State DC Zip Code 20036	
Purpose of Disbursement Processing Fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Emily's List</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 1800 M Street NW, Suite 375N		Amount of Each Disbursement this Period 0.79 <b>Transaction ID : D697562</b>
City Washington	State DC Zip Code 20036	
Purpose of Disbursement Processing Fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	93.78
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

**A. Emily's List**

Full Name (Last, First, Middle Initial)

Mailing Address 1800 M Street NW, Suite 375N

City Washington State DC Zip Code 20036

Purpose of Disbursement Processing Fee 001 Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 26 / 2013

Amount of Each Disbursement this Period: 1.71

Transaction ID : D699912

**B. Emily's List**

Full Name (Last, First, Middle Initial)

Mailing Address 1800 M Street NW, Suite 375N

City Washington State DC Zip Code 20036

Purpose of Disbursement Processing Fee 001 Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 05 / 2013

Amount of Each Disbursement this Period: 13.19

Transaction ID : D699913

**C. Emily's List**

Full Name (Last, First, Middle Initial)

Mailing Address 1800 M Street NW, Suite 375N

City Washington State DC Zip Code 20036

Purpose of Disbursement Processing Fee 001 Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 17 / 2013

Amount of Each Disbursement this Period: 8.82

Transaction ID : D695386

**SUBTOTAL** of Disbursements This Page (optional) ..... 23.72

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 134		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Emily's List</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 1800 M Street NW, Suite 375N		Amount of Each Disbursement this Period ..... 2.62
City Washington State DC Zip Code 20036	Purpose of Disbursement Processing Fee	
Candidate Name	Category/Type 001	<b>Transaction ID : D695373</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Emily's List</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 1800 M Street NW, Suite 375N		Amount of Each Disbursement this Period ..... 2.61
City Washington State DC Zip Code 20036	Purpose of Disbursement Processing Fee	
Candidate Name	Category/Type 001	<b>Transaction ID : D695876</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Emily's List</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 1800 M Street NW, Suite 375N		Amount of Each Disbursement this Period ..... 4.43
City Washington State DC Zip Code 20036	Purpose of Disbursement Processing Fee	
Candidate Name	Category/Type 001	<b>Transaction ID : D696553</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	..... 9.66
<b>TOTAL</b> This Period (last page this line number only) .....	.....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Emily's List</b>		Date of Disbursement
Mailing Address 1800 M Street NW, Suite 375N		M M / D D / Y Y Y Y 11 / 06 / 2013
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Processing Fee	Candidate Name	Amount of Each Disbursement this Period 5.45
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Emily's List</b>		Date of Disbursement
Mailing Address 1800 M Street NW, Suite 375N		M M / D D / Y Y Y Y 11 / 14 / 2013
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Processing Fee	Candidate Name	Amount of Each Disbursement this Period 8.00
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Emily's List</b>		Date of Disbursement
Mailing Address 1800 M Street NW, Suite 375N		M M / D D / Y Y Y Y 12 / 19 / 2013
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Processing Fee	Candidate Name	Amount of Each Disbursement this Period 253.93
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	267.38
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. H+P Political Compliance</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 29 Briarwood Dr.		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : D696556</b>
City Ringgold	State GA	
Zip Code 30736	Purpose of Disbursement Compliance Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. H+P Political Compliance</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 29 Briarwood Dr.		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : D695059</b>
City Ringgold	State GA	
Zip Code 30736	Purpose of Disbursement Compliance Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. NGP VAN, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 1101 15th St, NW		Amount of Each Disbursement this Period 225.00 <b>Transaction ID : D695058</b>
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Computer Software	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3975.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN, Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013		
Mailing Address 1101 15th St, NW			Amount of Each Disbursement this Period 2100.00		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>D696272</b>		
Purpose of Disbursement Computer Software		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. NGP VAN, Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013		
Mailing Address 1101 15th St, NW			Amount of Each Disbursement this Period 225.00		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>D696264</b>		
Purpose of Disbursement Computer Software		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. Ms. Alma Shealey Adams</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013		
Mailing Address 2109 Liberty Valley Rd			Amount of Each Disbursement this Period 81.60		
City Greensboro	State NC	Zip Code 27406	Transaction ID : <b>D696558</b>		
Purpose of Disbursement Travel Reimbursement		002 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2406.60
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms. Alma Shealey Adams</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013	
Mailing Address 2109 Liberty Valley Rd			Amount of Each Disbursement this Period 145.77	
City Greensboro	State NC	Zip Code 27406	Transaction ID : D701038	
Purpose of Disbursement Travel Reimbursement		Category/Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Ms. Sally S Cone</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013	
Mailing Address 500 Country Club Dr			Amount of Each Disbursement this Period 777.75	
City Greensboro	State NC	Zip Code 27408-5710	Transaction ID : D701140	
Purpose of Disbursement Catering		Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special Primary		* In-Kind Received	
State: District:				

Full Name (Last, First, Middle Initial) <b>c. North Carolina Democratic Party</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2013	
Mailing Address 220 Hillsborough St			Amount of Each Disbursement this Period 1500.00	
City Raleigh	State NC	Zip Code 27603	Transaction ID : D695066	
Purpose of Disbursement Voter File		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2423.52
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Stanford Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2013
Mailing Address 2520 Longview St., Suite 410		Amount of Each Disbursement this Period 7000.00 <b>Transaction ID : D695067</b>
City Austin State TX Zip Code 78705	Purpose of Disbursement Consulting / Research 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Stanford Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 2520 Longview St., Suite 410		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : D696263</b>
City Austin State TX Zip Code 78705	Purpose of Disbursement Consulting / Research 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Planned Parenthood Health Systems Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2013
Mailing Address 100 S Boylan Ave		Amount of Each Disbursement this Period 550.72 <b>Transaction ID : D695068</b>
City Raleigh State NC Zip Code 27502	Purpose of Disbursement List Purchase 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10050.72
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 134		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. NationBuilder</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 448 S. Hill St., Suite 200		Amount of Each Disbursement this Period 99.00 <b>Transaction ID : D697476</b>
City Los Angeles	State CA	
Zip Code 90013	Purpose of Disbursement Internet Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. NationBuilder</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 448 S. Hill St., Suite 200		Amount of Each Disbursement this Period 99.00 <b>Transaction ID : D697477</b>
City Los Angeles	State CA	
Zip Code 90013	Purpose of Disbursement Internet Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. NationBuilder</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 448 S. Hill St., Suite 200		Amount of Each Disbursement this Period 99.00 <b>Transaction ID : D701050</b>
City Los Angeles	State CA	
Zip Code 90013	Purpose of Disbursement Internet Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	297.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 15501 Weston Pkwy, Suite 100		Amount of Each Disbursement this Period 57.77 <b>Transaction ID : D697274</b>
City Cary State NC Zip Code 27513	Purpose of Disbursement Payroll Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address 15501 Weston Pkwy, Suite 100		Amount of Each Disbursement this Period 57.77 <b>Transaction ID : D697275</b>
City Cary State NC Zip Code 27513	Purpose of Disbursement Payroll Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 15501 Weston Pkwy, Suite 100		Amount of Each Disbursement this Period 1866.22 <b>Transaction ID : D697276</b>
City Cary State NC Zip Code 27513	Purpose of Disbursement Payroll Taxes 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1981.76
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address 15501 Weston Pkwy, Suite 100		Amount of Each Disbursement this Period 1866.21 <b>Transaction ID : D697277</b>
City Cary State NC Zip Code 27513	Purpose of Disbursement Payroll Taxes 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 15501 Weston Pkwy, Suite 100		Amount of Each Disbursement this Period 57.77 <b>Transaction ID : D699949</b>
City Cary State NC Zip Code 27513	Purpose of Disbursement Payroll Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 15501 Weston Pkwy, Suite 100		Amount of Each Disbursement this Period 1825.13 <b>Transaction ID : D699951</b>
City Cary State NC Zip Code 27513	Purpose of Disbursement Payroll Taxes 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3749.13
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 15501 Weston Pkwy, Suite 100		Amount of Each Disbursement this Period 2861.40 <b>Transaction ID : D695090</b>
City Cary State NC Zip Code 27513	Purpose of Disbursement Payroll Taxes 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 15501 Weston Pkwy, Suite 100		Amount of Each Disbursement this Period 275.62 <b>Transaction ID : D695091</b>
City Cary State NC Zip Code 27513	Purpose of Disbursement Payroll Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 15501 Weston Pkwy, Suite 100		Amount of Each Disbursement this Period 651.23 <b>Transaction ID : D695093</b>
City Cary State NC Zip Code 27513	Purpose of Disbursement Payroll Taxes 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3788.23
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 134		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2013</b>
Mailing Address <b>15501 Weston Pkwy, Suite 100</b>		Amount of Each Disbursement this Period <b>75.62</b>
City <b>Cary</b> State <b>NC</b> Zip Code <b>27513</b>	Purpose of Disbursement <b>Payroll Fees</b> <span style="border: 1px solid black; padding: 2px;">001</span> Category/Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

**Transaction ID : D695094**

Full Name (Last, First, Middle Initial) <b>B. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2013</b>
Mailing Address <b>15501 Weston Pkwy, Suite 100</b>		Amount of Each Disbursement this Period <b>3398.66</b>
City <b>Cary</b> State <b>NC</b> Zip Code <b>27513</b>	Purpose of Disbursement <b>Payroll Taxes</b> <span style="border: 1px solid black; padding: 2px;">001</span> Category/Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

**Transaction ID : D696258**

Full Name (Last, First, Middle Initial) <b>c. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2013</b>
Mailing Address <b>15501 Weston Pkwy, Suite 100</b>		Amount of Each Disbursement this Period <b>57.77</b>
City <b>Cary</b> State <b>NC</b> Zip Code <b>27513</b>	Purpose of Disbursement <b>Payroll Fees</b> <span style="border: 1px solid black; padding: 2px;">001</span> Category/Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

**Transaction ID : D696259**

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3532.05</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Erika K Nelson</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2013		
Mailing Address 10 Topland Pl			Amount of Each Disbursement this Period 195.88		
City East Northport	State NY	Zip Code 11731-1939	Transaction ID : <b>D701037</b>		
Purpose of Disbursement Lodging		Category/ Type 002	* In-Kind Received		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Erika K Nelson</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013		
Mailing Address 10 Topland Pl			Amount of Each Disbursement this Period 100.00		
City East Northport	State NY	Zip Code 11731-1939	Transaction ID : <b>D700302</b>		
Purpose of Disbursement Salary		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Borum &amp; Associates Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013		
Mailing Address P.O. Box 14215			Amount of Each Disbursement this Period 200.00		
City Greensboro	State NC	Zip Code 27415	Transaction ID : <b>D696559</b>		
Purpose of Disbursement Rent		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	495.88
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Borum &amp; Associates Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address P.O. Box 14215		Amount of Each Disbursement this Period 174.00 <b>Transaction ID : D695565</b>
City Greensboro State NC Zip Code 27415	Purpose of Disbursement Rent Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Borum &amp; Associates Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address P.O. Box 14215		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D695566</b>
City Greensboro State NC Zip Code 27415	Purpose of Disbursement Rent Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Borum &amp; Associates Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address P.O. Box 14215		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D700300</b>
City Greensboro State NC Zip Code 27415	Purpose of Disbursement Rent Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	574.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 134			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : D700301</b>
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 32.54 <b>Transaction ID : D701030</b>
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	* In-Kind Received

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 42.00 <b>Transaction ID : D701033</b>
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Travel Expense / Gas Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	* In-Kind Received

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	174.54
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 57.15
City Greensboro	State NC	
Zip Code 27420	Purpose of Disbursement Catering	Transaction ID : D701034
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 113.36
City Greensboro	State NC	
Zip Code 27420	Purpose of Disbursement Lodging	Transaction ID : D701035
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 20.00
City Greensboro	State NC	
Zip Code 27420	Purpose of Disbursement Office Supplies	Transaction ID : D701036
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	190.51
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 22.83
City Greensboro	State NC	
Zip Code 27420	Purpose of Disbursement Catering	Transaction ID : D700290
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 30.00
City Greensboro	State NC	
Zip Code 27420	Purpose of Disbursement Facebook Ads	Transaction ID : D700291
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 2.02
City Greensboro	State NC	
Zip Code 27420	Purpose of Disbursement Facebook Ads	Transaction ID : D700292
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	54.85
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 11.93
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Catering 007 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D700293  * In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 35.58
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D700294  * In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 4.58
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D700295  * In-Kind Received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	52.09
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 134			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 35.08
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Catering	Transaction ID : D697496
Candidate Name	Category/Type 007	* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 5.33
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Catering	Transaction ID : D697497
Candidate Name	Category/Type	* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 40.01
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Travel Expense / Gas	Transaction ID : D697498
Candidate Name	Category/Type	* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	80.42
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013	
Mailing Address P.O. Box 20622			Amount of Each Disbursement this Period 0.80	
City Greensboro	State NC	Zip Code 27420	Transaction ID : <b>D697499</b>	
Purpose of Disbursement Printing		Category/ Type 001	* In-Kind Received	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013	
Mailing Address P.O. Box 20622			Amount of Each Disbursement this Period 2.97	
City Greensboro	State NC	Zip Code 27420	Transaction ID : <b>D697500</b>	
Purpose of Disbursement Postage		Category/ Type	* In-Kind Received	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013	
Mailing Address P.O. Box 20622			Amount of Each Disbursement this Period 0.86	
City Greensboro	State NC	Zip Code 27420	Transaction ID : <b>D697501</b>	
Purpose of Disbursement Postage		Category/ Type 001	* In-Kind Received	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4.63
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 2.97
City Greensboro	State NC	
Zip Code 27420	Purpose of Disbursement Postage	Transaction ID : D697502
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 5.33
City Greensboro	State NC	
Zip Code 27420	Purpose of Disbursement Printing	Transaction ID : D697503
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 6.91
City Greensboro	State NC	
Zip Code 27420	Purpose of Disbursement Catering	Transaction ID : D697504
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15.21
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 0.80 <b>Transaction ID : D697505</b>
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Printing 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 33.91 <b>Transaction ID : D697506</b>
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Catering 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 26.67 <b>Transaction ID : D697507</b>
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Catering Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	61.38
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 134			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 4.77
City Greensboro	State NC	Zip Code 27420
Purpose of Disbursement Catering	Category/Type 001	
Candidate Name		Transaction ID : D697508
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	* In-Kind Received	

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 1.72
City Greensboro	State NC	Zip Code 27420
Purpose of Disbursement Postage	Category/Type 001	
Candidate Name		Transaction ID : D695374
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	* In-Kind Received	

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 154.76
City Greensboro	State NC	Zip Code 27420
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name		Transaction ID : D695375
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	* In-Kind Received	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	161.25
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 12.15
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Catering	Transaction ID : D695376
Candidate Name	001 Category/Type	* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 6.24
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Catering	Transaction ID : D695377
Candidate Name	001 Category/Type	* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 221.38
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Office Supplies	Transaction ID : D695064
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	239.77
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 134			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 29.21
City Greensboro	State NC	Zip Code 27420
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name	Transaction ID : D696560	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 65.70
City Greensboro	State NC	Zip Code 27420
Purpose of Disbursement Travel Expense / Gas	Category/Type 002	
Candidate Name	Transaction ID : D696561	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 45.38
City Greensboro	State NC	Zip Code 27420
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name	Transaction ID : D696562	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	140.29
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013	
Mailing Address P.O. Box 20622			Amount of Each Disbursement this Period 7.78	
City Greensboro	State NC	Zip Code 27420	Transaction ID : <b>D696563</b>	
Purpose of Disbursement Catering		Category/ Type 001	* In-Kind Received	
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013	
Mailing Address P.O. Box 20622			Amount of Each Disbursement this Period 1.52	
City Greensboro	State NC	Zip Code 27420	Transaction ID : <b>D696564</b>	
Purpose of Disbursement Postage		Category/ Type 001	* In-Kind Received	
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013	
Mailing Address P.O. Box 20622			Amount of Each Disbursement this Period 1.50	
City Greensboro	State NC	Zip Code 27420	Transaction ID : <b>D696565</b>	
Purpose of Disbursement Office Supplies		Category/ Type 001	* In-Kind Received	
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10.80
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 9.47
City Greensboro	State NC	Zip Code 27420
Purpose of Disbursement Catering	Category/Type 007	
Candidate Name		Transaction ID : D696566
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	* In-Kind Received	

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 13.55
City Greensboro	State NC	Zip Code 27420
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name		Transaction ID : D696567
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	* In-Kind Received	

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 117.26
City Greensboro	State NC	Zip Code 27420
Purpose of Disbursement Facebook Ads	Category/Type 003	
Candidate Name		Transaction ID : D696568
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	* In-Kind Received	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	140.28
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 16.93 <b>Transaction ID : D696569</b>
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Internet Services Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	* In-Kind Received

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 1856.00 <b>Transaction ID : D695562</b>
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Lodging Stipend Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 6.70 <b>Transaction ID : D701043</b>
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	* In-Kind Received

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1879.63
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 8.91
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Postage	Transaction ID : D701044
Candidate Name	Category/Type 001	* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 12.83
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Catering	Transaction ID : D702027
Candidate Name	Category/Type 007	* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Shehzad Quamar</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 2105 Needleleaf Lane		Amount of Each Disbursement this Period 342.00
City Greensboro State NC Zip Code 27410	Purpose of Disbursement Lodging	Transaction ID : D694804
Candidate Name	Category/Type 001	* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	363.74
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Shahzad Akbar</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013		
Mailing Address 3706 Worthing Court			Amount of Each Disbursement this Period 329.00		
City Greensboro	State NC	Zip Code 27455	Transaction ID : <b>D694806</b>		
Purpose of Disbursement Lodging		Category/ Type 001	* In-Kind Received		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. U.S. Postmaster</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2013		
Mailing Address 201 N Murrow Blvd			Amount of Each Disbursement this Period 39.00		
City Greensboro	State NC	Zip Code 27401	Transaction ID : <b>D696265</b>		
Purpose of Disbursement PO Box Rental		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. U.S. Postmaster</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013		
Mailing Address 201 N Murrow Blvd			Amount of Each Disbursement this Period 1058.00		
City Greensboro	State NC	Zip Code 27401	Transaction ID : <b>D701047</b>		
Purpose of Disbursement Postage		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1426.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. U.S. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 201 N Murrow Blvd		Amount of Each Disbursement this Period 1012.00 <b>Transaction ID : D701048</b>
City Greensboro State NC Zip Code 27401	Purpose of Disbursement Postage 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 46.00 <b>Transaction ID : D701051</b>
City Greensboro State NC Zip Code 27401	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 69.36 <b>Transaction ID : D701045</b>
City Greensboro State NC Zip Code 27401	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1127.36
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 322.00
City Greensboro	State NC	
Zip Code 27401	Purpose of Disbursement Postage	<b>Transaction ID : D701046</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 15501 Weston Pkwy, Suite 100		Amount of Each Disbursement this Period 4300.10
City Cary	State NC	
Zip Code 27513	Purpose of Disbursement Payroll	<b>Transaction ID : D695088</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 4300.10
City Greensboro	State NC	
Zip Code 27420	Purpose of Disbursement Salary	<b>Transaction ID : D695089</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4622.10
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 03 / 2013</b>
Mailing Address <b>15501 Weston Pkwy, Suite 100</b>		Amount of Each Disbursement this Period <b>1261.61</b> <b>Transaction ID : D695092</b>
City <b>Cary</b> State <b>NC</b> Zip Code <b>27513</b>	Purpose of Disbursement <b>Payroll</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Erika K Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2013</b>
Mailing Address <b>10 Topland Pl</b>		Amount of Each Disbursement this Period <b>1261.61</b> <b>Transaction ID : D695095</b> <b>[MEMO ITEM]</b>
City <b>East Northport</b> State <b>NY</b> Zip Code <b>11731-1939</b>	Purpose of Disbursement <b>Salary</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 24 / 2013</b>
Mailing Address <b>P.O. Box 20622</b>		Amount of Each Disbursement this Period <b>604.87</b> <b>Transaction ID : D695561</b>
City <b>Greensboro</b> State <b>NC</b> Zip Code <b>27420</b>	Purpose of Disbursement <b>Office Supplies</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1866.87</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address 4405 Wendover Ave		Amount of Each Disbursement this Period 69.98
City Greensboro	State NC	
Zip Code 27407	Purpose of Disbursement Telephone Expense	Transaction ID : D697269
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. U.S. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 201 N Murrow Blvd		Amount of Each Disbursement this Period 92.00
City Greensboro	State NC	
Zip Code 27401	Purpose of Disbursement Postage	Transaction ID : D697270
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. U.S. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 201 N Murrow Blvd		Amount of Each Disbursement this Period 47.12
City Greensboro	State NC	
Zip Code 27401	Purpose of Disbursement Postage	Transaction ID : D697266
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 120 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. U.S. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 201 N Murrow Blvd		Amount of Each Disbursement this Period 28.92
City Greensboro	State NC Zip Code 27401	
Purpose of Disbursement Postage	Category/Type 001	Transaction ID : D697262 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 69.25
City Greensboro	State NC Zip Code 27401	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : D697264 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 60.84
City Greensboro	State NC Zip Code 27401	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : D697265 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 66.14
City Greensboro State NC Zip Code 27401	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name		Transaction ID : D697267 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 116.81
City Greensboro State NC Zip Code 27401	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name		Transaction ID : D697268 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 15501 Weston Pkwy, Suite 100		Amount of Each Disbursement this Period 5972.04
City Cary State NC Zip Code 27513	Purpose of Disbursement Payroll 001 Category/Type	
Candidate Name		Transaction ID : D696260
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5972.04
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Erika K Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2013</b>
Mailing Address <b>10 Topland Pl</b>		Amount of Each Disbursement this Period <b>1171.94</b>
City <b>East Northport</b> State <b>NY</b> Zip Code <b>11731-1939</b>	Purpose of Disbursement <b>Salary</b> Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : D696262</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2013</b>
Mailing Address <b>P.O. Box 20622</b>		Amount of Each Disbursement this Period <b>4800.10</b>
City <b>Greensboro</b> State <b>NC</b> Zip Code <b>27420</b>	Purpose of Disbursement <b>Salary</b> Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : D696261</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 14 / 2013</b>
Mailing Address <b>P.O. Box 20622</b>		Amount of Each Disbursement this Period <b>403.42</b>
City <b>Greensboro</b> State <b>NC</b> Zip Code <b>27420</b>	Purpose of Disbursement <b>Office Supplies</b> Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : D696557</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>403.42</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. U.S. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 201 N Murrow Blvd		Amount of Each Disbursement this Period 46.00
City Greensboro	State NC Zip Code 27401	
Purpose of Disbursement Postage	Category/Type 001	Transaction ID : D697485  [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 114.20
City Greensboro	State NC Zip Code 27401	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : D697486  [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 56.48
City Greensboro	State NC Zip Code 27401	
Purpose of Disbursement Printing	Category/Type 001	Transaction ID : D697487  [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 66.14
City Greensboro	State NC	
Zip Code 27401	Purpose of Disbursement Office Supplies	Transaction ID : D697488
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 76.85
City Greensboro	State NC	
Zip Code 27401	Purpose of Disbursement Office Supplies	Transaction ID : D697483
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 43.75
City Greensboro	State NC	
Zip Code 27401	Purpose of Disbursement Office Supplies	Transaction ID : D697484
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 125 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 15 / 2013</b>
Mailing Address 15501 Weston Pkwy, Suite 100		Amount of Each Disbursement this Period <b>3422.61</b>
City Cary	State NC	Zip Code 27513
Purpose of Disbursement Payroll	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : D697272</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Erika K Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 15 / 2013</b>
Mailing Address 10 Topland Pl		Amount of Each Disbursement this Period <b>1171.94</b>
City East Northport	State NY	Zip Code 11731-1939
Purpose of Disbursement Salary	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : D697280</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
<b>[MEMO ITEM]</b>		

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 15 / 2013</b>
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period <b>2250.67</b>
City Greensboro	State NC	Zip Code 27420
Purpose of Disbursement Salary	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : D697278</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
<b>[MEMO ITEM]</b>		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3422.61</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 15501 Weston Pkwy, Suite 100		Amount of Each Disbursement this Period 4247.62 <b>Transaction ID : D697273</b>
City Cary	State NC Zip Code 27513	
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Erika K Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 10 Topland Pl		Amount of Each Disbursement this Period 1171.94 <b>Transaction ID : D697281</b> <b>[MEMO ITEM]</b>
City East Northport	State NY Zip Code 11731-1939	
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 3075.68 <b>Transaction ID : D697279</b> <b>[MEMO ITEM]</b>
City Greensboro	State NC Zip Code 27420	
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4247.62
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 393.06 <b>Transaction ID : D697489</b>
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 4405 Wendover Ave		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : D697495</b> <b>[MEMO ITEM]</b>
City Greensboro State NC Zip Code 27407	Purpose of Disbursement Telephone Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. U.S. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 201 N Murrow Blvd		Amount of Each Disbursement this Period 186.12 <b>Transaction ID : D697490</b> <b>[MEMO ITEM]</b>
City Greensboro State NC Zip Code 27401	Purpose of Disbursement Postage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	393.06
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 22.40
City Greensboro	State NC	
Zip Code 27401	Purpose of Disbursement Office Supplies	Transaction ID : D697491
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 72.68
City Greensboro	State NC	
Zip Code 27401	Purpose of Disbursement Office Supplies	Transaction ID : D697492
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 35.20
City Greensboro	State NC	
Zip Code 27401	Purpose of Disbursement Office Supplies	Transaction ID : D705129
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 129 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 611.86 <b>Transaction ID : D699914</b>
City Greensboro State NC Zip Code 27420	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. U.S. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 201 N Murrow Blvd		Amount of Each Disbursement this Period 5.60 <b>Transaction ID : D699915</b> <b>[MEMO ITEM]</b>
City Greensboro State NC Zip Code 27401	Purpose of Disbursement Postage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 24.30 <b>Transaction ID : D699916</b> <b>[MEMO ITEM]</b>
City Greensboro State NC Zip Code 27401	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	611.86
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 412.87
City Greensboro	State NC	
Zip Code 27401	Purpose of Disbursement Office Supplies	Transaction ID : D699917
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 144.09
City Greensboro	State NC	
Zip Code 27401	Purpose of Disbursement Office Supplies	Transaction ID : D697493
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Erika K Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 10 Topland Pl		Amount of Each Disbursement this Period 195.32
City East Northport	State NY	
Zip Code 11731-1939	Purpose of Disbursement Office Supplies	Transaction ID : D699920
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	195.32
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 131 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 92.86
City Greensboro	State NC	
Zip Code 27401	Purpose of Disbursement Office Supplies	Transaction ID : D699921 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 102.46
City Greensboro	State NC	
Zip Code 27401	Purpose of Disbursement Office Supplies	Transaction ID : D699922 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PayChex, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 15501 Weston Pkwy, Suite 100		Amount of Each Disbursement this Period 3422.61
City Cary	State NC	
Zip Code 27513	Purpose of Disbursement Payroll	Transaction ID : D699953
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3422.61
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Erika K Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 10 Topland Pl		Amount of Each Disbursement this Period 1171.94
City East Northport	State NY Zip Code 11731-1939	
Purpose of Disbursement Salary	Category/Type 001	Transaction ID : D701042  [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 2250.67
City Greensboro	State NC Zip Code 27420	
Purpose of Disbursement Salary	Category/Type 001	Transaction ID : D701041  [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kyle Gott</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address P.O. Box 20622		Amount of Each Disbursement this Period 371.98
City Greensboro	State NC Zip Code 27420	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : D700296
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	371.98
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 133 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alma Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 4405 Wendover Ave		Amount of Each Disbursement this Period 50.00
City Greensboro State NC Zip Code 27407	Purpose of Disbursement Telephone Expense 001 Category/Type	
Candidate Name		Transaction ID : D700297 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 920 N Church St		Amount of Each Disbursement this Period 321.98
City Greensboro State NC Zip Code 27401	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name		Transaction ID : D700298 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name		Transaction ID : <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	88003.15

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:  
(check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Alma Adams for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Borum &amp; Associates Inc</b>	Nature of Debt (Purpose): Rent
Mailing Address P.O. Box 14215	
City State Zip Code Greensboro NC 27415	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">174.00</div>	<b>Transaction ID : D694655</b>
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">174.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></div>	
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></div>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></div>	
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></div>	

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>