D	isc	losu	ire	Re	por	t (Co	ver
_	-	1000		1.00	PUL		~	

Amendment

☐ Yes 🎞 No

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

1. Committee Information							(中国的)区1年(中国的)(1915年)(1915年)(1915年)
a. Full Name							c. ID Number
BIRKHEAD FOR DURHAN	M COUNTY	200000000000000000000000000000000000000					
b. Mailing Address (include C	ity, State and Zi	p Code)					d. Date Filed
PO BOX 13384 DURHAM, NC 27709		***************************************					07/10/2018
DURHAM, NO 27707						1	e. Phone Number
						1	
2. Report Year 3. Period Sta	art Date (mm/dd/	yy)	4. Period	End Da	nte (mm/dd/yy)	5. Treasur	rer Full Name
	04/22/2018			06/30/2		LLOYD P.	
6. Type of Committee (Check			e of Repor				ort from one category)
	arty	Munic	Control of the Contro	A STATE OF THE PARTY OF THE PAR	State/County		Referendum
	AC		Organizatio		Organizatio	nal	Organizational
	egal Expense Fund	_	Thirty-five		Quarterly	-	Pre-referendum
	ble, check one)	먐	Pre-primary		First Second	. !	Final Supplemental Final
Booster Fund"		밁	Pre-election		Second Third	1	Supplemental Final
Building Fund		-	Pre-runoff	- 1	Third		Annual Special
Presidential Election Year Ca		 _	Semi-annua Mid Va		Fourth Semi-annua		☐ Special
■ NC Public Campaign Financin	ig Fund	밆	Mid Ye		Semi-annua Mid Ye		10 C I Donout Name
- 0.1		lp	Year Ei	nd			10. Special Report Name
Other:		무	Final Special	1		nd	W.
8. Number of Fundraisers thi	is Report		Special	-	Final	J	
0					Special Special		
3. Account Information				3. Acc	ount Informati	ion	
a. Financial Institution Full Na	ame				ncial Institutio		e
WELLS FARGO				WELL	LS FARGO	-	
b. Purpose	c. Account Code	e		b. Purp	ose		c. Account Code
OPERATION		399		OPER/	ATION		5847
	d. Period Begin	Balan	ce				d. Period Begin Balance
	\$	Whomas					\$
CERTIFICATION							
I certify that the Committee Chapter 163 of the NC Gene	eral Statutes and	that no	funds are	commin	ngled with prob	hibited or ot	ther non-disclosed
funds. I further ceptify that							
1)	(4)		11/	1 44	4		
LIGHT PATILLE	- 0		IV	JU	W		07/10/2018
Printed Name of S	Signer		Sign	ature of /	Appointed Treas	surer	Date
FOR OFFICE USE ONLY	11.				. , ,		
Date Received:	7/11/18	_	Employ	yee: _	MAnust	- 1	wery Method Normal Mail
Date Postmarked:			MAPPI	yee: _		- 🗆 I	Registered Mail Hand Delivered
Date Scanned:			JUEmploy	2888 _		-	Electronically Filed
Date Data Entered:		_ D	Employ	BÖE-			Signer has not received mandatory training
Please Note: This form c	cannot be used to ant treasurer, cust						
Vou must amer	nd the Statement	of Org	anization (CRO-21	00A-E) to make	e committee	changes.

Amendment X No ☐ Yes

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

1. Committee Full Name (and Fund if applicable)	2. Type of Re	The last section is		. ID N	lumber
BIRKHEAD FOR DURHAM COUNTY	2018 Second			. 10	
Start of Election Cycle: January 1,2015			Total this orting Period	Τ	Total this Election Cycle
4) Cash on Hand at Start		\$	6,450.78		11,205.30
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	185.00	\$	540.00
6) Contributions from Individuals	(CRO-1210)	\$	3,800.00	\$	7,900.00
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	2,500.00	\$	2,500.00
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	5,000.00
0) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	0.00	\$	0.00
1) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$	0.00	\$	0.05
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	0.00	\$	0.00
11c) Outside Sources of Income	(CRO-1250)	\$	0.06	\$	0.06
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	0.00	\$	0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	0.00	\$	0.00
2) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c	,11d and 11e)	\$	6,485.06	\$	15,940.11
EXPENDITURES					
3) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	9,037.20	\$	23,025.36
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	0.00	\$	0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	0.00
4) Aggregated Non-Media Expenditures	(CRO-1315)	\$	314.70	\$	536.11
5) Loan Repayments	(CRO-1420)	\$	0.00	\$	0.00
6) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	0.00	\$	0.00
7) In-Kind Contributions	(CRO-1510)	\$	0.00	\$	0.00
8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15		\$	9,351.90	\$	23,561.47
9) Cash on Hand at End (Add lines 4 and 12 together, then sub	otract line 18)	\$	3,583.94	\$	3,583.94
ADDITIONAL INFORMATION	(GDO 1220)	•	0.00		
O) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00		
Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	17,000.00		MAIL
2) Debts and Obligations owed by the Committee	(CRO-1610)	\$	0.00	222	
B) Debts and Obligations owed to the Committee	(CRO-1620)	\$	0.00		JUL 1 1
4) Account Transfers Within the Committee	(CRO-1720)	\$	3,250.00		DURHAM
5) Administrative Support	(CRO-1710)	\$	0.00	+	
6) Forgiven Loans	(CRO-1440)	\$	0.00	\$	0.00
7) 48-Hour Notice Reports Sum	(CRO-2220)	\$	0.00	\$	0.00
8) Contributions to be Refunded	(CRO-1215)	\$	0.00	\$	0.00 August 2008

00 0			ndividuals Page From Individuals of \$		1	Amendme Ves	No No
1. Committe	e Full Name (and	Fund if applicable)			2. ID	Number	
BIRKHEAI	O FOR DURHAM	1 COUNTY		5 Y 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
3. Contribut	or Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd	l/yyyy)	f. Amount	
Add Remove	5847	Check		04/30/201	18	\$	40.00
☐ Add ☐ Remove	5847	Check		04/30/201	18	\$	50.00
☐ Add ☐ Remove	5847	Check		05/07/201	18	\$	50.00
☐ Add ☐ Remove	5847	Money Order		05/11/201	18	\$	20.00
☐ Add ☐ Remove	5847	Check		05/11/201	18	\$	25.00
4. Total or	nly this Page				\$		\$185.00
5. Total of	ALL CRO-12	205 Pages			\$		\$185.00

(This line must be on line 5 of Detailed Summary Page CRO-1100) NC State Board of Elections

April 2007

MAIL JUL 1 1 2018

		Amendment
Contributions from Individuals	Pg 1 of 3	☐ Yes ☐ No

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

1. Com	mittee Full Name	(and Fund if applicab	le)				2.	ID Number
BIRKI	HEAD FOR DUR	CHAM COUNTY						
3. Cont	ributor Informat	ion		Add		Remove		
NEWSCHOOL STATE	Name, Mailing Ad			b. Job	Title/	Profession	d.	Comments
	ude city, state, & z	zip)		attorn	ey			
	on Dellinger eachway Drive			c. Emp	loyer'	s Name/Specific Field	1	
	AM, NC 27705			Boies Schiller				
Dora.	27705			Done			e.	Election Sum to Date
							\$	125.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	criptio	n	j. Date (mm/dd/yyyy)	k. Amount
	1399	Electric Funds Tran				04/23/2018		\$ 125.00
								\$
								\$
	ributor Informati			Add	Name of Street	emove		
and the second second	Name, Mailing Add			b. Job	Title/I	Profession	d. C	Comments
	ide city, state, & z							
CARLISLE HARVARD 124 MONTICELLE AVE				c. Employer's Name/Specific Field				
		E					1	
DURHAM, NC 27707							e. I	Election Sum to Date
							\$	200.00
e n :		II E CB	li r. vi. i n.			: Data (k. Amount
		h. Form of Payment Check	i. In-Kind Desc	cription		j. Date (mm/dd/yyyy)		
	5847	CIICCK				06/01/2018		\$ 200.00
								\$
								\$
	ributor Informati		The state of the s	Add	Annual Property lies	emove	T	
	ame, Mailing Add			b. Job	litle/P	rofession	a. C	Comments
	de city, state, & zi							
	TOPHER HOWI MOREHEAD	LETT		c. Emp	oyer's	Name/Specific Field	1	
	EL HILL, NC 27	517						
011111	22 11122, 110 27						e. E	Dection Sum to Date
							\$	400.00
f. Prior	g. Account Code		i. In-Kind Desc	ription	*******************************	j. Date (mm/dd/yyyy)		k. Amount
	5847	Check	1000			06/01/2018		\$ 400.00
	200			Personal Property of the Personal Property of				\$
						MAIL		\$
4. Tota	al only this Pag	ge				2010	\$	725.00
	of ALL CRO	O-1210 Pages 6 of Detailed Summary Po	age CRO-1100)			JUL 1 1 2018	\$	3,800.00
					THE RESERVED		-	

Contributions from Individuals

				Amendm	ent
Pg	2	of	3	☐ Yes	X No

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

1. Com	mittee Full Name	(and Fund if applicab	le)			2.	2. ID Number		
	HEAD FOR DUR	······································							
3. Cont	ributor Informati	ion		Add \square	Remove				
Market College College	Name, Mailing Ad			b. Job Titl	e/Profession	d.	Comment	s	
(inclu	ide city, state, & z	ip)		***************************************			A STATE OF THE PARTY OF THE PAR		
JARVI	S MARTIN								
3608 N	OSSDALE AVE	Ξ		c. Employ	er's Name/Specific F	ield			
DURH	AM, NC 22705						D4! C	to Doto	
						e.	Hection S	um to Date	
						\$		500.00	
f. Prior	g. Account Code		i. In-Kind Des	cription	j. Date (mm/dd/	уууу)	k. Amou	nt	
	5847	Check			06/01/20	18	\$	500.00	
							\$		
		1 11					\$		
	ributor Informati			Add					
	Name, Mailing Ado			b. Job Titl	e/Profession	d.	Comment	S	
(inclu	ide city, state, & z	ip)				- 1			
	Н МССОҮ			c Employ	er's Name/Specific Fi	eld			
	PINECREST CT			c. Employe	er s Name/Specific Fi	CIU			
BOON	E, NC 28607					e.	Election S	um to Date	
								100.00	
						\$		100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/	уууу)	k. Amou	nt	
	5847	Check			06/01/20	18	\$	100.00	
							\$		
							\$		
THE RESERVE OF THE PARTY OF THE	ributor Informati			Add	Remove				
a. Full N	ame, Mailing Add	lress & Phone		b. Job Titl	e/Profession	d. 0	Comment	S	
(inclu	de city, state, & zi	ip)	***************************************						
	K MEACHEM			o Employe	r's Name/Specific Fi	eld			
	HERIDAN DR			c. Emproye	1 s Name/Specific Fi				
DURH.	AM, NC 27705					e. 1	Dection S	um to Date	
						\$	ARREST OF THE PROPERTY OF THE	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Desc	ription	j. Date (mm/dd/y	уууу)	k. Amou	nt	
	5847	Check			04/30/20	18	\$	100.00	
					MAIL		\$		
					JUL 1 1 2010	3	\$		
4. Tota	al only this Pa	ge				\$		700.00	
5. Tota	al of ALL CRO	D-1210 Pages	Paga CPO 1100)		DURHAM BO	S S		3,800.00	
(This l	ine must be on line (6 of Detailed Summary F	uge CKU-1100)						

						Amendme	ent
Contributions from Individuals		Pg	3	of	3	☐ Yes	X No
	0.50	 	0.50	0.00	CDO 120		.1

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 2. ID Number 1. Committee Full Name (and Fund if applicable) BIRKHEAD FOR DURHAM COUNTY ☐ Add ☐ Remove 3. Contributor Information b. Job Title/Profession d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) Trucking Hampton ROBINSON c. Employer's Name/Specific Field 208 STATION DR MORRISVILLE, NC 27560 Werner Enterprise e. Election Sum to Date \$ 750.00 i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment Electric Funds Tran 1399 04/23/2018 750.00 \$ \$ ☐ Add ☐ Remove 3. Contributor Information b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) MICHAEL SPEARS c. Employer's Name/Specific Field 1212 RED OAK AVE DURHAM, NC 27707 e. Dection Sum to Date 100.00 j. Date (mm/dd/yyyy) k. Amount h. Form of Payment i. In-Kind Description f. Prior g. Account Code Check 5847 05/07/2018 100.00 \$ \$ \$ ☐ Remove 3. Contributor Information ☐ Add a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) UNKNOW UNKNOW c. Employer's Name/Specific Field NC e. Dection Sum to Date 1,525.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount Check 5847 04/23/2018 1,425.00 \$ Money Order 5847 100.00 \$ 05/07/2018 \$ 2,375.00 4. Total only this Page \$ 5. Total of ALL CRO-1210 Pages \$ 3,800.00

CRO-1210

(This line must be on line 6 of Detailed Summary Page CRO-1100)

NC State Board of Elections

April 2007

Contributi	ons from Othe	r Political (Committees	Pg 1 of	1	Amendment Yes No	
	report contributions						
	ull Name (and Fund if				2. I	D Number	
***************************************	OR DURHAM COU		***************************************				
3. Contributor l	Information		Add	Remove			
a. Full Name, Ma	ailing Address & Phon	e	b. Type of Com		d. Comments		
(include city,	state, & zip)		☐ Candidate	X PAC			
NC REALTOR	PAC		☐ Referendum		4		
4511 WAYBRI	IDGE LN		c. Level Registe				
GREENSBORG	O, NC 27407		Federal	County:	_		
			■ State	☐ Municipality:	e. E	lection Sum to Date	
					\$	2,500.00	
f. Account Code	g. Form of Payment	h. In-Kind Descr	ription	i. Date (mm/dd/y	yyy)	j. Amount	
5847	Check			04/30/2018		\$ 2,500.00	
						\$	
			430			\$	
4. Total only this	s Page				\$	\$2,500.00	
	CRO-1230 Pages be on line 8 of Detailed S	ummary Page CRO-	-1100)		\$	\$2,500.00	
CRO-1230	•		te Board of Election	IS		April 2007	

MAIL JUL 1 1 2018

				Amenum	ent
Other Receipt Sources	Pg _	1 o	f 1	_ Yes	X No
TT 41 ' C	C ! . ! !		at fam	na fit aantribu	tions ata

	report income not rep full Name (and Fund if		omi. i.e. iii	terest income, not for	_	D Numbe	
	OR DURHAM COUN						
3. Type of Rece	nd virginistical called the last control of th	se separate CRO-l	THE RESERVE AND ADDRESS OF THE PARTY OF THE	s for each type of Rec		· · · · · · · · · · · · · · · · · · ·	P
4. Contributor	Haras Million Control of the Late of the Control of	butions from Not-101	Add	Remove	our ccs	or meonic	
	ailing Address & Phone	•		r-Profit Federal ID #	d. C	Comments	3
WELLS FARG NC	GO		c. Outsid	e Source Explanation		V 41	um to Data
					\$	lection St	0.09
f. Account Code	g. Form of Payment	h. In-Kind Descri	ption	i. Date (mm/dd/y	yyy)	j. Amoun	t
1399	Draft			04/30/2018		\$	0.04
	, , , , , , , , , , , , , , , , , , , ,					\$	
4. Contributor I			Add	Remove			
	ailing Address & Phone		b. Not-for-Profit Federal ID # d. Comments				
WELLS FARG NC			c. Outside Source Explanation				
					e. E	lection Su	ım to Date
					\$		0.02
f. Account Code	g. Form of Payment	h. In-Kind Descrip	otion	i. Date (mm/dd/yy	yy)	j. Amoun	t
1399	Draft			05/31/2018		\$	0.02
						\$	
5. Total only	this Page				\$		0.06
(This line goes is (This line goes is	LL CRO-1250 Pag n line 11a of Detailed Sun n line 11b of Detailed Sun n line 11c of Detailed Sun	nmary Page CRO-110 nmary Page CRO-110	00 if Not-for	r-Profit Contribution)	\$		0.06

CRO-1250

NC State Board of Elections

December 2007

MAILJUL 1 1 2018

Disbursements	Pg	_1_	0
	_		

		Amendme	ent	
of	4	☐ Yes	X No	

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

Operating Expenses
Operating Expenses
Operating Expenses
Add
D. Coordinated Committee Name d. Comments
CLEVEL Registered (Specify) CLEVEL Registered (Specify) State Municipality EDUCATION CLEVEL Registered (Specify) State County CLEVEL Registered (Specify) State Cle
CLARENCE BIRKHEAD C. Level Registered (Specify) Federal County: Co
C. Level Registered (Specify)
Federal County:
State
Sample S
Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks
Sat7
Sat7 Cash O O4/24/2018 \$ 440.00 GET OUT TO VOTE
A. Payee Information
Add Remove Add
b. Coordinated Committee Name d. Comments
include city, state, & zip) CLARENCE BIRKHEAD PO BOX 13384 DURHAM, NC 27709 C. Level Registered (Specify) State
CLARENCE BIRKHEAD
C. Level Registered (Specify)
DURHAM, NC 27709 Federal County: e. Election Sum to Da State Municipality: e. Ele
State Municipality: e. Election Sum to Da \$ 3,320 Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks 5847 Cash O 04/25/2018 \$ 460.00 GET OUT TO VOTE 5847 Cash O 04/27/2018 \$ 180.00 GET OUT TO VOTE 1. Payee Information Add Remove 2. Payee Information Add Remove 3. Full Name, Mailing Address & Phone include city, state, & zip) 3. Coordinated Committee Name d. Comments 4. Comments C. Level Registered (Specify) 5. County: Federal County: 5. County: C. Level Registered (Specify) 5. County: Federal County: 6. Election Sum to Da 8. Required Remarks 6. Election Sum to Da 8. Required Remarks 6. County: C. Level Registered (Specify) 6. Election Sum to Da 7. Cash O O4/25/2018 8. Required Remarks 6. Election Sum to Da 8. Required Remarks 6. County C. Level Registered (Specify) 7. Cash O O4/25/2018 8. Required Remarks 8. Required Remarks 9. Cash O O4/25/2018 9. Cash
S 3,320 S. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks 5847
Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks 5847 Cash O 04/25/2018 \$ 460.00 GET OUT TO VOTE 5847 Cash O 04/27/2018 \$ 180.00 GET OUT TO VOTE 6. Payee Information
Sada
5847 Cash O 04/27/2018 \$ 180.00 GET OUT TO VOTE December 18. Payee Information
. Payee Information . Full Name, Mailing Address & Phone include city, state, & zip) CLARENCE BIRKHEAD PO BOX 13384 DURHAM, NC 27709 Add Remove b. Coordinated Committee Name d. Comments c. Level Registered (Specify) Federal County:
B. Payee Information D. Full Name, Mailing Address & Phone include city, state, & zip) CLARENCE BIRKHEAD PO BOX 13384 DURHAM, NC 27709 D. Remove b. Coordinated Committee Name c. Level Registered (Specify) Federal County:
b. Coordinated Committee Name d. Comments Comments Comments
CLARENCE BIRKHEAD O BOX 13384 OURHAM, NC 27709 CLEVEL Registered (Specify) Federal County:
CLARENCE BIRKHEAD O BOX 13384 CURHAM, NC 27709 C. Level Registered (Specify) Federal County:
PO BOX 13384 DURHAM, NC 27709 C. Level Registered (Specify) Federal County:
DURHAM, NC 27709
JUKHAMI, NC 27/09
\$ 3,320.
Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks
5847 Cash O 04/30/2018 \$ 1,200.00 GET OUT TO VOTE
5847 Cash O 05/04/2018 \$ 260.00 GET OUT TO VOTE
5. Total only this Page \$ 2,620.
. Total of ALL CRO-1310 Pages
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ 9,037.
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)
. Purpose Codes (List detailed expenditure code in (h.) above)
A* - Media B* - Printing C* - Fundraising D - To Another Candidate
G - Salaries F* - Fourthment G - Political Party H* - Holding Public Office Expens
- Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fu
)* Other
* Codes require detailed explanation in required remarks field (k) NC State Board of Elections December 2

-						
II D	16	hı	IPC	em	0	nte
	1.7		u 1 3		•	1113

				Amendm	ent
g	2	of	4_	☐ Yes	X No

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

1. Committee Fu	Il Name (a	and Fund	if applicable)					2.	ID Number	er
BIRKHEAD FO	OR DURH	AM COL	JNTY							
		(DI	use separate CR	0 1210	forms for so	ale tur	a of Dichi	reamont	1	
3. Type of Disbu Operating Exp			ributions to Candid						Z Party Expe	nditures
		Cont	Tibutions to Candid		Add		nove	or diffract of	arey Empe	rejedene sa
4. Payee Informa		ogg & Dla		Ц	b. Coordina			ame d.	Comment	s
a. Full Name, Ma		ress & Pn	one		b. Coordina		, mmille C 1			
(include city, stat					-					
CLARENCE BI PO BOX 13384	KKHEAD				c. Level Reg	istere	d (Specify)			
DURHAM, NC	27709				☐ Federal		☐ County	:		
Doran IIII, III	27.103				State		☐ Munici	pality: e.	Election S	um to Date
								\ \s		3,320.00
			fi n	1		<u> </u>		ll. Pagui	ired Rema	
f. Account Code			-							
5847	Ca	sh	0	0.	5/07/2018	\$	400.00	GETO	UT TO V	OIE
						\$				
4. Payee Informa	tion				Add .	Rer	nove			
a. Full Name, Ma		ess & Ph	one		b. Coordina	ed Co	mmittee N	ame d.	Comment	s
(include city, stat										
CLARENCE BI	RKHEAD						1.6			
PO BOX 13384					c. Level Reg	istere	County			
DURHAM, NC	27709				Federal State		☐ Municip	No. of the last of	Flection S	um to Date
					State		Withirten		Deterior 5	
								\$		1,110.00
f. Account Code	g. Form of	Payment	h. Purpose Code	i. Date	(mm/dd/yyyy) j. A	mount	k. Requi	red Rema	rks
5847	Ca	***************************************	0		5/09/2018	\$	300.00	GET O	UT TO V	OTE
5847	Ca	ch.	0	0.	5/11/2018	\$	150.00	SIGN R	EMOVAI	
		311	G		Add		nove	OTOT T		
4. Payee Informa a. Full Name, Ma		aga Pr Dh	ana		b. Coordinat	the Wallet		ame d.	Comments	
a. Full Name, Ma (include city, stat		ess & File	one							-
CLARENCE BII										
PO BOX 13384	MATILAD				c. Level Reg	stered	l (Specify)			
DURHAM, NC	27709				Federal		County			
					☐ State		☐ Municip	pality: e.	Election St	um to Date
								\$		1,110.00
f. Account Code	y. Form of	Payment	h. Purpose Code	i. Date	(mm/dd/yyyy) j. A	mount	k. Requi	red Remai	rks
1399	Ca		0		5/11/2018	\$	460.00	SIGN R	EMOVAI	
						\$			EMOVAI	
5847	Ca	sn	0	0.5	5/18/2018	D.	100.00		EMOVAI	
5. Total only this	Page							\$		1,410.00
6. Total of ALL C										
(This line goes in	line 13a of	Detailed S	ummary Page CRO	0-1100 if	Operating Exp	enses)	ment 100 00 00 12	\$		9,037.20
(This line goes in	line 13b of	Detailed S	ummary Page CRC	0-1100 if	Contrib to Car	didate	s/Political C	omm)		
	The Party of the P		ummary Page CRO			arty Ex	(penauures)			
7. Purpose Co									a	
A* - Media		- Printin			undraising				Candidate	
E - Salaries		- Equipme			litical Party			Carried Strategies and		e Expenses
- Postage	J -	Penaltie	S	K* - 0	ffice Expens	es	Q^ - D	onation t	o Legai Ex	pense Fund
O* Other	detailed e									

			4
Disbur	Sem	en	10

				Am	e n dm	ent	
Pg	3	of	_4_		Yes	X	No

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

***************************************	l Name (and Fu	ind if applicable)						2. ID Nun	nber
BIRKHEAD FO	R DURHAM (COUNTY							
	/951		0 1210 6	man Comment	l. 4	a of Dist	MG 2	aret)	
3. Type of Disbur		ase use separate CRC Contributions to Candida						ted Party Ex	nenditures
Operating Expe		contributions to Candida	and the same in the			THE RESERVE TO SHARE THE PARTY OF THE PARTY	oruma	icul arty Ex	penartaes
. Payee Informat			□ A	dd Coordinate	Rem		am a	d. Comme	nts
. Full Name, Mai		Phone	D.	Coordinate	a Coi	mmittee N	ame	u. Comme	:1115
include city, state									
CARDINAL CO	NSULTING		c.	Level Regis	tered	(Specify)		1	
PO BOX 37606	27627			Federal		County		-	
RALEIGH, NC 2	2/02/			State	Ì	Municip	ality:	e. Election	Sum to Date
				***************************************				\$	3,010.00
. Account Code g	. Form of Paym	ent h. Purpose Code	i. Date (m	nm/dd/yyyy)	j. An	nount	k. Re	quired Rer	narks
5847	Cash	О	06/0	1/2018	\$	3,010.00	CON	NSULTING	3
					s			***************************************	
				ип	_		2001 E-1100		
. Payee Informat		Dhama	□ A	dd 🔲 Coordinate	Rem		a m e	d. Comme	nts
. Full Name, Mail		Phone	В.	Coordinate	u Coi	mmruee A	ame	u. Comme	11 (3
include city, state	e, & zip)								
FACEBOOK SILICON VALLI	EV		c.	Level Regis	tered	(Specify)		1	
CA	LI			Federal	1	County			
650) 543-4800				State	[Municip	ality:	e. Election	Sum to Date
030) 2 13 1000								\$	19.32
							I		
Account Code g.	. Form of Paym	ent h. Purpose Code				nount		quired Ren	narks
5847	Draft	A	05/0	2/2018	\$	19.32	AD	SERVICE	
					\$				
. Payee Informat	ion		□ Ac	dd \square	Rem	ove			
. Full Name, Mail		Phone		Coordinate	d Con	nmittee Na	ame	d. Comme	nts
nclude city, state				***************************************					
IARTLAND CL]	
5955 LA CANT			c.	Level Regist					
				Federal		County:			G . D .
AN ANTONIO,	TX 78256					Municip	ality:	e. Bection	Sum to Date
	TX 78256		L	State	L				
	TX 78256		-					\$	110.04
		ent h. Purpose Code	i. Date (m	m/dd/yyyy)	j. Am	iount		quired Ren	
AN ANTONIO,		ent h. Purpose Code	i. Date (m						OUD-SERVICES BY
Account Code g.	. Form of Payme		i. Date (m	m/dd/yyyy)	j. Am	iount		quired Ren	OUD-SERVICES BY
Account Code g. 5847	. Form of Paymo		i. Date (m	m/dd/yyyy)	j. Am \$	iount		quired Ren	narks
Account Code g. 5847 Total only this l	Form of Paymo Draft Page	0	i. Date (m	m/dd/yyyy)	j. Am \$	iount		quired Ren	OUD-SERVICES BY
Account Code g. 5847 Total only this I. Total of ALL Cl	Draft Page RO-1310 Page	O	i. Date (m 06/12	m/dd/yyyy) 2/2018	j. Am \$ \$	iount		quired Ren	narks
Account Code g. 5847 Total only this I. Total of ALL CI (This line goes in I	Draft Page RO-1310 Page	O S ed Summary Page CRO-	i. Date (m 06/12	m/dd/yyyy) 2/2018 erating Expen	j. Am \$ \$	110.04	СНЕ	quired Ren	narks
Account Code g. 5847 Total only this l. Total of ALL Cl (This line goes in l. (This line goes in l.)	Page RO-1310 Page line 13a of Detail	O S ed Summary Page CROed Summary Page CRO	i. Date (m 06/12	m/dd/yyyy) 2/2018 erating Expensive to Cand	j. Am \$ \$	110.04	СНЕ	quired Ren	3,139.36
Account Code g. 5847 Total only this 1. Total of ALL Cl (This line goes in l (This line goes in l)	Draft Page RO-1310 Page line 13a of Detail line 13c of Detail	S ed Summary Page CRO- ed Summary Page CRO- ed Summary Page CRO-	i. Date (m 06/12	m/dd/yyyy) 2/2018 erating Expendition to Candordinated Para	j. Am \$ \$	110.04	СНЕ	quired Ren	3,139.36 9,037.20
Account Code g. 5847 Total only this I. Total of ALL CI (This line goes in I (This line goes	Page RO-1310 Page line 13a of Detail line 13c of Detail line 13c of Detail	s ed Summary Page CROed Summary Page CROed Summary Page CROed Summary Page CROeled expenditure code	i. Date (m 06/12 -1100 if Ope- 1100 if Con 1100 if Coo in (h.) abo	m/dd/yyyy) 2/2018 erating Expentrib to Candordinated Parave)	j. Am \$ \$	110.04 /Political Connections	отт)	quired Ren	3,139.36 9,037.20
Account Code g. 5847 Total only this I. Total of ALL Cl. (This line goes in I. (This li	Page RO-1310 Page line 13a of Detail line 13c of Detail line 13c of Detail les (List detail B* - Prin	s ed Summary Page CROed Summary Page CROed Summary Page CROed Summary Page CROed expenditure code	i. Date (m 06/12 -1100 if Op -1100 if Con 1100 if Coo in (h.) abo C* - Func	m/dd/yyyy) 2/2018 erating Expentrib to Candordinated Parasing	j. Am \$ \$	110.04 /Political Connections	Omm)	quired Ren CCKS \$ \$	3,139.36 9,037.20
Account Code g. 5847 Total only this l. Total of ALL Cl (This line goes in l (This line goes in l). Purpose Cod* - Media - Salaries	Page RO-1310 Page line 13a of Detail line 13c of Detail line 13c of Detail line 13c - Prin F* - Equi	s ed Summary Page CROed Summary Page CROed Summary Page CROed Summary Page CROed expenditure code atting pment	i. Date (m 06/12 -1100 if Ope -1100 if Coo in (h.) abo C* - Func G - Politic	m/dd/yyyy) 2/2018 erating Expentitib to Candordinated Party draising eal Party	j. Am \$ \$ isses) idates, ty Exp	Political Conditures) D - To H* - Ho	omm) Anotle	quired Ren CCKS \$ \$ her Candida g Public Of	3,139.36 9,037.20 ate JUL fice Expenses
Account Code g. 5847 Total only this I. Total of ALL Cl. (This line goes in I. (This li	Page RO-1310 Page line 13a of Detail line 13c of Detail line 13c of Detail les (List detail B* - Prin	s ed Summary Page CROed Summary Page CROed Summary Page CROed Summary Page CROed expenditure code atting pment	i. Date (m 06/12 -1100 if Ope -1100 if Coo in (h.) abo C* - Func G - Politic	m/dd/yyyy) 2/2018 erating Expentrib to Candordinated Parasing	j. Am \$ \$ isses) idates, ty Exp	Political Conditures) D - To H* - Ho	omm) Anotle	quired Ren CCKS \$ \$ her Candida g Public Of	3,139.36 9,037.20

Dishungaments			
	Disbursements		

				Am	en dm	ent		
Pg	4	of	4		Yes	X	No	

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

1. Committee Full	Name (ar	d Fund if applicabl	le)		2. ID Nu	mber
BIRKHEAD FOR						
3. Type of Disburs	ement	(Please use separa	te CRO-1310 forms for e	ach type of Dis	bursement.)	
Operating Exper		Contributions to	Candidates/Political Committ	ees 🔲 (Coordinated Party E	xpenditures
4. Payee Informat	ion		☐ Add ☐	Remove		
a. Full Name, Mail	ing Addre	ss & Phone	b. Coordin	ated Committee	Name d. Comm	ents
(include city, state	, & zip)					
RADIO ONE			. Il Do	gistered (Specify)	
8001-101 CREED		RD.	Federal	gistered (specify		
RALEIGH, NC 2	7613		State			n Sum to Date
(919) 848-9736			***************************************		¢	1 255 00
					\$	1,355.00
f. Account Code g.	Form of P	ayment h. Purpose	e Code i. Date (mm/dd/yy	yy) j. Amount	k. Required Re	marks
5847	Draf	ì A	05/07/2018	\$ 1,355.0	0 RADIO AD	
				\$		
4 Davis Informati	han .		☐ Add ☐	Remove	EVENTANISTI ZENIO	
4. Payee Informati a. Full Name, Maili		ss & Phone		ated Committee	Name d. Comm	ents
(include city, state		35 & Hone				
STAPLES	F)					
8041 BRIER CRE	EK PKW	Y		gistered (Specify	******	
RALEIGH, NC 2	7617		Federal	Coun		n Cum to Data
			State	U Muni	cipality: e. Eectio	n Sum to Date
					\$	6,651.93
f Account Code g	Form of P	avment h. Purpose	Code i. Date (mm/dd/yy)	y) j. Amount	k. Required Re	marks
5847	Draf	······································	05/03/2018	\$ 413.22	2 FLIERS	
3017	Dia		05/05/2010	\$		
4. Payee Informati			Add	Remove	Name d Comm	anto
a. Full Name, Maili		ss & Phone	b. Coordin	ated Committee	Name d. Comm	ents
(include city, state,						
VOTER ACTIVA 1445 NEW YORK		X /	c. Level Re	gistered (Specify	()	
SUITE 200	AVEN	, v	☐ Federal	Coun	ty:	
WASHINGTON,	DC 2000	5	☐ State	☐ Muni	cipality: e. Eectio	n Sum to Date
(617) 718-2980					\$	99.62
f. Account Code g.	Form of P	ayment h. Purpose	Code i. Date (mm/dd/yyy	y) j. Amount	k. Required Re	marks
5847	Draf	t O	05/07/2018	\$ 99.62	2 DATABASE	
				\$		
5 7D-4-1 1 11 7					\$	1,867.84
5. Total only this I					3	1,007.04
6. Total of ALL CF			CBO 1100 is O	nancas)		10762 3112000A4447476A44479444
(This line goes in li	ne 13a of l	Detailed Summary Pa Detailed Summary Da	ge CRO-1100 if Operating Ex ge CRO-1100 if Contrib to Co	.penses) indidates/Political	(Comm) \$	9,037.20
(This line goes in li	ne 130 of L ne 13c of L	Detailed Summary Pa	ge CRO-1100 if Coordinated	Party Expenditure	es)	
	The second name of the last of		e code in (h.) above)			
A* - Media		Printing	C* - Fundraising		o Another Candi	
E - Salaries		Equipment	G - Political Party		Holding Public C	
I - Postage	J -	Penalties	K* - Office Expen	ses Q*-	Donation to Lega	I Expense Fund
O* Other	4-11	-louetii	and naments field (tr)			DUR
* Codes require d	etailed ex	pianation in requir	red remarks field (k)			December 2000

Aggregated Non-Media Expenditures

Page 1 of 1 Yes X No

Optional form u	ised to report	NC Non-Media	Expenditures	of \$50 or	less
-----------------	----------------	--------------	--------------	------------	------

	. Committee Full Name (and Fund if applicable) BIRKHEAD FOR DURHAM COUNTY				2.	2. ID Number			
		M COUNTY							
3. Payee Inf		c. Form of Payment	d. Purpose Code	e. Date (m m/dd/y	vvv) f.	Amount	g. Required Remarks		
Add Remove	1399	Draft	0	05/03/2018			SERVICE FEE		
Add Remove	1399	Draft	О	06/04/2018	\$	7.50	SERVICE FEE		
Add Remove	5847	Cash	О	05/22/2018	\$	50.00	SIGN REMOVAL		
Add Remove	5847	Cash	О	05/30/2018	\$	50.00	SIGN REMOVAL		
☐ Add☐ Remove	5847	Draft	О	05/03/2018	\$	45.00	RESEARCH		
Add Remove	5847	Draft	О	06/04/2018	\$	45.00	DIGITAL SERVICES		
☐ Add ☐ Remove	1399	Draft	О	06/11/2018		13.96	SERVICE FEE		
Add Remove	5847	Draft	О	05/10/2018	\$	32.86	MOBILE PHONE		
Add Remove	5847	Draft	О	06/11/2018	\$	\$ 32.86 MOBILE PHONE			
Add Remove	5847	Draft	О	06/08/2018	\$	\$ 3.00 BANK FEE			
4. Total only this Page					\$	\$ 314.70			
(This line m		f Detailed Summary Pa			\$		314.70		
6. Purpos	e Codes (List o	letailed expenditur	e code in (d) a	bove)					
E - Salar I - Posta	ies F*	- Printing - Equipment Penalties	C* - Fundraising G - Political Party K* - Office Expenses Q* - Donations to Legal Expense I				lic Office Expenses		
O* - Otl		Charles	The Camer						
		led explanation is	n required ren	narks field (g)			December 2009		

CRO-1315

NC State Board of Elections

December 2009

MAIL JUL 1 1 2018

Out	stan	ding	Loans
~		8	

				Amendment			
Pg .	1	of	1	☐ Yes	X	No	

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Commit	tee Full Name (and Fund if applica	ble)			2. ID Number		
	AD FOR DURHAM COUNTY	00000000000000000000000000000000000000					
2 Y 1	1 6		ld 🔲 Rem	ove			
	Information ne, Mailing Address & Phone	Charles and the second	Job Title/Prof		d. Comments	3	
	city, state, & zip)						
an account the construction of	CE BIRKHEAD				e. Start Date	(mm/dd/yyyy)	
PO BOX	13384 A, NC 27709	c. I	c. Employer's Name/Specific Field			14/2017	
DOMIAN	n, NC 2770)				f. End Date (1	m m /dd/syyyy)	
		ľ			I. End Date (1	nm/dd/yyyy)	
g. Rate	h. Security Pledged		i. Original I	oan Amount	j. Remaining	Loan Balance	
%			\$	12,000.00	\$	12,000.00	
k. Full Nan	ne of Lending Institution				I. Loan Number		
	Information	☐ Ad	ld Remo	The second secon	d. Comments		
	ne, Mailing Address & Phone city, state, & zip)	D	JOB IIIIE/Froi	ession	u. Comments		
	CE BIRKHEAD						
PO BOX					e. Start Date	(mm/dd/yyyy)	
	1, NC 27709	c. F	c. Employer's Name/Specific Field			03/16/2018	
					f. End Date (r	nm/dd/yyyy)	
g. Rate	h. Security Pledged		i. Original I	oan Amount	j. Remaining	Loan Balance	
%			\$	5,000.00	\$	5,000.00	
k. Full Name of Lending Institution					I. Loan Numl	per	
4. Total	only this Page				\$	17,000.00	
	of ALL CRO-1430 Pages	B	00)		\$	17,000.00	
(This line	must be on line 21 of Detailed Summar	y Page CKO-11	00)				

CRO-1430

NC State Board of Elections

December 2007

MAIL JUL 1 1 2018

			tee Page 1 of ository or credit accounts		No No
	ee Full Name (and Fund	2. ID Number			
BIRKHEA	D FOR DURHAM CO	UNTY			
3. Transfer	Information				
a. Amend	b. Account Code Transferred From	c. Account Code Transferred To	d. Date (mm/dd/yyyy)	e. Amount	
Add Remove	1399	5847	04/30/2018	\$	2,000.00
☐ Add ☐ Remove	5847	1399	05/01/2018	\$	25.00
☐ Add☐ Remove	1399	5847	05/07/2018	\$	1,000.00
Add Remove	5847	1399	06/01/2018	\$	25.00
☐ Add☐ Remove	1399	5847	06/01/2018	\$	200.00
4. Total only this Page					3,250.00
5. Total of ALL CRO-1720 Pages (This line must be on line 24 of Detailed Summary Page CRO-1100)				\$	3,250.00

CRO-1720

NC State Board of Elections

December 2007

MAIL JUL 1 1 2018