

# Disclosure Report Cover

Amendment  
 Yes  No

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

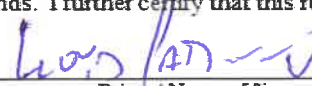
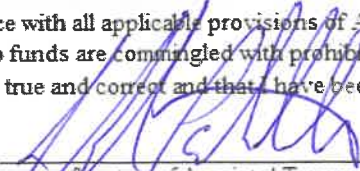
<b>1. Committee Information</b>	
<b>a. Full Name</b> CLARENCE BIRKHEAD FOR DURHAM COUNTY	<b>c. ID Number</b>
<b>b. Mailing Address (include City, State and Zip Code)</b> PO BOX 12387 DURHAM, NC 27707	<b>d. Date Filed</b> 12/09/2021
	<b>e. Phone Number</b>

<b>2. Report Year</b> 2019	<b>3. Period Start Date (mm/dd/yy)</b> 07/01/2019	<b>4. Period End Date (mm/dd/yy)</b> 12/31/2019	<b>5. Treasurer Full Name</b> LLOYD PATILLO
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<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>		
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Referendum <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Legal Expense Fund <b>Municipal</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special <b>State/County</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special <b>Referendum</b> <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special		
<b>7. Type of Fund (if applicable, check one)</b>		<b>10. Special Report Name</b>		
<input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Referendum <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:				
<b>8. Number of Fundraisers this Report</b> 0				

<b>3. Account Information</b>		<b>3. Account Information</b>	
<b>a. Financial Institution Full Name</b>		<b>a. Financial Institution Full Name</b>	
<b>b. Purpose</b>	<b>c. Account Code</b>	<b>b. Purpose</b>	<b>c. Account Code</b>
	<b>d. Period Begin Balance</b> \$		<b>d. Period Begin Balance</b> \$

**CERTIFICATION**  
 I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board

Printed Name of Signer: Lloyd Patillo  
 Signature of Appointed Treasurer: [Signature]  
 Date: 12/09/2021

**FOR OFFICE USE ONLY**

Date Received: 12/10/2021  
 Date Postmarked: \_\_\_\_\_  
 Date Scanned: \_\_\_\_\_  
 Date Data Entered: \_\_\_\_\_

Employee: 1882  
**IN PERSON**  
 Employee: \_\_\_\_\_  
 Employee: DEC 10 2021  
 Employee: DURHAM BOE

**Delivery Method**  
 Normal Mail  
 Registered Mail  
 Hand Delivered  
 Electronically Filed  
 Signer has not received mandatory training

**Please Note:** This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.  
 You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

# Detailed Summary

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

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

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number	
CLARENCE BIRKHEAD FOR DURHAM COUNTY	2019 Year End Semi-Annual		
Start of Election Cycle: January 1, <u>2019</u>		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1,796.40	\$ 1,006.72
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 0.00	\$ 25.00	
6) Contributions from Individuals (CRO-1210)	\$ 0.00	\$ 1,700.00	
7) Contributions from Political Party Committees (CRO-1220)	\$ 0.00	\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)	\$ 0.00	\$ 0.00	
9) Loan Proceeds (CRO-1410)	\$ 0.00	\$ 0.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$ 0.00	\$ 0.00	
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)	\$ 0.00	\$ 0.00	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$ 0.00	\$ 0.00	
11c) Outside Sources of Income (CRO-1250)	\$ 0.18	\$ 0.32	
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$ 0.00	\$ 0.00	
11e) Exempt Purchase Price Sales (CRO-1265)	\$ 0.00	\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)	\$ 0.18	\$ 1,725.32	
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 197.46	\$ 1,062.92	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$ 0.00	\$ 0.00	
13c) Coordinated Party Expenditures (CRO-1310)	\$ 0.00	\$ 0.00	
14) Aggregated Non-Media Expenditures (CRO-1315)	\$ 30.00	\$ 100.00	
15) Loan Repayments (CRO-1420)	\$ 0.00	\$ 0.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$ 0.00	\$ 0.00	
17) In-Kind Contributions (CRO-1510)	\$ 0.00	\$ 0.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 227.46	\$ 1,162.92	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 1,569.12	\$ 1,569.12	
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$ 0.00		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$ 0.00		
22) Debts and Obligations owed by the Committee (CRO-1610)	\$ 16,407.14		
23) Debts and Obligations owed to the Committee (CRO-1620)	\$ 0.00		
24) Account Transfers Within the Committee (CRO-1720)	\$ 200.00		
25) Administrative Support (CRO-1710)	\$ 0.00	\$ 0.00	
26) Forgiven Loans (CRO-1440)	\$ 0.00	\$ 0.00	
27) 48-Hour Notice Reports Sum (CRO-2220)	\$ 0.00	\$ 0.00	
28) Contributions to be Refunded (CRO-1215)	\$ 0.00	\$ 0.00	

# Other Receipt Sources

Pg 1 of 1

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>			<b>2. ID Number</b>	
CLARENCE BIRKHEAD FOR DURHAM COUNTY				
<b>3. Type of Receipt Source</b> <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i>				
<input type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input checked="" type="checkbox"/> Outside Sources of Income				
<b>4. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove				
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Not-for-Profit Federal ID #</b>	<b>d. Comments</b>	
WELLS FARGO NC				
		<b>c. Outside Source Explanation</b>		
			<b>e. Election Sum to Date</b>	
			\$ 0.32	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. In-Kind Description</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>
1399	Draft		12/31/2019	\$ 0.18
				\$
<b>5. Total only this Page</b>			\$ 0.18	
<b>6. Total of ALL CRO-1250 Pages</b>			\$ 0.18	
<i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i> <i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i> <i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>				

# Disbursements

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
CLARENCE BIRKHEAD FOR DURHAM COUNTY							
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
VERIZON WIRELESS NC							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 394.92	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
5847	Draft	O	12/31/2019	\$ 197.46	MOBILE		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
CLARENCE BIRKHEAD PO BOX12387 DURHAM, NC 27709							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 592.86	
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>		
5847	Cash	O	12/31/2019	\$ 92.86	DEBT PAYMENT		
				\$			
<b>5. Total only this Page</b>						\$ 290.32	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 290.32	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>							
<b>7. Purpose Codes</b> <i>(List detailed expenditure code in (h) above)</i>							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

# Aggregated Non-Media Expenditures

Page 1 of 1

Amendment  
 Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b> CLARENCE BIRKHEAD FOR DURHAM COUNTY					<b>2. ID Number</b>	
<b>3. Payee Information</b>						
<b>a. Amend</b>	<b>b. Account Code</b>	<b>c. Form of Payment</b>	<b>d. Purpose Code</b>	<b>e. Date (mm/dd/yyyy)</b>	<b>f. Amount</b>	<b>g. Required Remarks</b>
<input type="checkbox"/> Add <input type="checkbox"/> Remove	5847	Draft	O	12/31/2019	\$ 30.00	BANK FEE
<b>4. Total only this Page</b>					\$	30.00
<b>5. Total of ALL CRO-1315 Pages</b> <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$	30.00
<b>6. Purpose Codes (List detailed expenditure code in (d) above)</b>						
	<b>B* - Printing</b>	<b>C* - Fundraising</b>	<b>D - To Another Candidate</b>			
<b>E - Salaries</b>	<b>F* - Equipment</b>	<b>G - Political Party</b>		<b>H* - Holding Public Office Expenses</b>		
<b>I - Postage</b>	<b>J - Penalties</b>	<b>K* - Office Expenses</b>		<b>Q* - Donations to Legal Expense Fund</b>		
<b>O* - Other</b>						
<b>* Codes require detailed explanation in required remarks field (g)</b>						

# Debts and Obligations Owed By the Committee

Pg 1 of 2

Amendment  
 Yes  No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

<b>1. Committee Full Name (and Fund if applicable)</b> CLARENCE BIRKHEAD FOR DURHAM COUNTY	<b>2. ID Number</b>
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**3. Creditor Information**  Add  Remove

<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip) CLARENCE BIRKHEAD PO BOX 12387 DURHAM, NC 27709	Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.  <b>b. Description of Creditor</b> LOAN		
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 5,000.00	\$ 0.00	\$ 0.00	\$ 5,000.00

**g. Incurred Debts (what the committee received this period)**

<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
		\$
	<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
		\$
	<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
		\$
	<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
		\$
	<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
		\$
	<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>

<b>4. Total only this Page</b> (This should be the sum of all items 'g3.' from this page)	\$ 5,000.00
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<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)	\$ 16,407.14
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<b>6. Purpose Codes (List detailed expenditure code in (g4.))</b>			
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	O* - Other
* Codes require detailed explanation in required remarks field (g5.)			

# Debts and Obligations Owed By the Committee

Page 2 of 2

Amendment

Yes  No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
CLARENCE BIRKHEAD FOR DURHAM COUNTY			
<b>3. Creditor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
CLARENCE BIRKHEAD PO BOX12387 DURHAM, NC 27709		<b>b. Description of Creditor</b> LOAN	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 11,500.00	\$ 92.86	\$ 0.00	\$ 11,407.14
<b>g. Incurred Debts (what the committee received this period)</b>			
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>4. Total only this Page</b> (This should be the sum of all items 'g3.' from this page)		\$	11,407.14
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)		\$	16,407.14
<b>6. Purpose Codes (List detailed expenditure code in (g4.))</b>			
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	O* - Other
* Codes require detailed explanation in required remarks field (g5.)			

**Account Transfers Within the Committee** Page 1 of 1

Amendment  
 Yes  No

Use this form to transfer money between multiple bank, depository or credit accounts.

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
CLARENCE BIRKHEAD FOR DURHAM COUNTY					
<b>3. Transfer Information</b>					
<b>a. Amend</b>	<b>b. Account Code Transferred From</b>	<b>c. Account Code Transferred To</b>	<b>d. Date (mm/dd/yyyy)</b>	<b>e. Amount</b>	
<input type="checkbox"/> Add	5847	1399	12/02/2019	\$	25.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	5847	1399	12/31/2019	\$	175.00
<input type="checkbox"/> Remove					
<b>4. Total only this Page</b>				\$	200.00
<b>5. Total of ALL CRO-1720 Pages</b>				\$	200.00
<i>(This line must be on line 24 of Detailed Summary Page CRO-1100)</i>					