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Į	d. Period Begi	n Balar	rce				d. Period B	egin Balance
	\$		1,267.98		1		\$	187.59
NC General ertify that the T	al Statutes and his report is co	that no	o funds are , true and c	onect:	ingled with pro and that river	hibited or o been train	other non-di ned by the No 12/ elivery Meth	sclosed C State Board 09/2021 Date
40	NC Gener rtify that t カーレッ Name of S	d. Period Begins  d. Period Begins  sommittee or Fund is in control  NC General Statutes and tiffy that this report is control  Name of Signer	sommittee or Fund is in compliant NC General Statutes and that notify that this report is completed Name of Signer	d. Period Begin Balance \$ 1,267.98  committee or Fund is in compliance with all a NC General Statutes and that no funds are raify that this report is complete, true and complete of Signer	c. Account Code  1399  d. Period Begin Balance  \$ 1,267.98  committee or Fund is in compliance with all applications and that no funds are committee that this report is complete, true and confect that the compliance with all applications are committed to the complete of Signer  NLY	d. Period Begin Balance \$ 1,267.98  committee or Fund is in compliance with all applicable provisions NC General Statutes and that no funds are commingled with provisions this report is complete, true and correct and that I have the same of Signer  NLY  Signature of Appointed Tree  NLY	c. Account Code  1399  d. Period Begin Balance \$ 1,267.98  committee or Fund is in compliance with all applicable provisions of Article NC General Statutes and that no funds are comminded with prohibited or trify that this report is complete, true and conject and that I have been training the superior of Signer  Name of Signer    Name of Signer	c. Account Code  1399  d. Period Begin Balance  \$ 1,267.98  Demmittee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 2 NC General Statutes and that no funds are commingled with provibited or other non-directly that this report is complete, true and conject and that it have been trained by the Normal Signer    Name of Signer   New Years are a provided Treasurer   NLY   Name of Signer   New Years are a provided Treasurer   NLY   Name of Signer   NLY   NLY   Name of Signer   NLY   N

Hand Delivered DEC 1 0 2021 Employee ☐ Electronically Filed Date Scanned: ☐ Signer has not received DURHAM BOE Date Data Entered: 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.

Amendment ☐ Yes ☑ No

**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 Rep	ort	3. I	D Numl	er	
CLARENCE BIRKHEAD FOR DURHAM COUNTY	2020 Mid Yea	r Semi-Annual				
Start of Election Cycle: January 1,	_	Total this Reporting Per	riod	Total this Election Cycle		
4) Cash on Hand at Start		\$ 1,4	76.26	S	1,006.72	
RECEIPTS						
5) Aggregated Contributions from Individuals	(CRO-1205)	S	0.00	S	25.00	
6) Contributions from Individuals	(CRO-1210)	S	0.00	S	1,700.00	
7) Contributions from Political Party Committees	(CRO-1220)	S	0.00	S	0.00	
8) Contributions from Other Political Committees	(CRO-1230)	S	0.00	\$	0.00	
9) Loan Proceeds	(CRO-1410)	S	0.00	S	0.00	
10) Refunds/Reimbursements to the Committee	(CRO-1240)	S	0.00	S	0.00	
11) Other Receipt Sources				1	75. 55.75	
11a) Interest on Bank Accounts	(CRO-1250)	S	0.00	S	0.00	
11b) Contributions from Not-For-Profit Organization	ons (CRO-1250)	S	0.00	S	0.00	
11c) Outside Sources of Income	(CRO-1250)	S	0.11	S	0.43	
11d) Legal Expense Fund - Other Sources	(CRO-1270)	S	0.00	S	0.00	
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	0.00	s	0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b	,11c,11d and 11e)	S	0.11	S	1,725.43	
EXPENDITURES						
13) Disbursements					Su (4-1/5-16	
13a) Operating Expenditures	(CRO-1310)	S 2	57.46	S	1,413.24	
13b) Contributions to Candidates/Political Committ	ees (CRO-1310)	S	0.00	S	0.00	
13c) Coordinated Party Expenditures	(CRO-1310)	S	0.00	S	0.00	
14) Aggregated Non-Media Expenditures	(CRO-1315)	S	0.00	S	100.00	
15) Loan Repayments	(CRO-1420)	S	0.00	S	0.00	
16) Refunds/Reimbursements from the Committee	(CRO-1320)	S	0.00	s	0.00	
17) In-Kind Contributions	(CRO-1510)	S	0.00	s	0.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 1	4, 15, 16 and 17)	\$ 2	257.46	S	1,513.24	
19) Cash on Hand at End (Add lines 4 and 12 together, the	n subtract line 18)		18.91	S	1,218.91	
ADDITIONAL INFORMATION						
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00			
21) Outstanding Loans (incl. ones from other campaig	ms) (CRO-1430)	\$	0.00			
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 16,4	107.14	100	C. P. C.	
23) Debts and Obligations owed to the Committee	(CRO-1620)	S	0.00			
24) Account Transfers Within the Committee	(CRO-1720)	\$ 6	525.00	1	35 25	
25) Administrative Support	(CRO-1710)	\$	0.00	S	0.00	
26) Forgiven Loans	(CRO-1440)	S	0.00	S	0.00	
27) 48-Hour Notice Reports Sum	(CRO-2220)	S	0.00	S	0.00	
28) Contributions to be Refunded	(CRO-1215)	S	0.00	S	0.00	

Other Dec	eipt Sources		_	. 1	_ 1	ı	Amendme	
	-				of		☐ Yes	X No
	report income not rep		om. i.e. intere	st inco	me, not for	profi	t contribut	ions etc.
1. Committee Fu	ıll Name (and Fund if	applicable)				2.1	D Number	**************
CLARENCE BIR	KHEAD FOR DURHA	M COUNTY						
3. Type of Recei		se separate CRO-1						
☐ Interest	☐ Contri	butions from Not-for	-Profit Organiz	ations	C Outside S	ource	s of Income	
4. Contributor I	nformation		Add R	emove		W.	1	
a. Full Name, Ma	iling Address & Phon	2	b. Not-for-P	ofit Fe	leral ID#	d. 4	Comments	
(include city, a	state, & zip)					1	***************************************	
WELLS FARGO								
NC			c. Outside S	ource E	xplanation			
						e. I	lection Su	m to Date
						s		0.43
f. Account Code	g. Form of Payment	h. In-Kind Descri	ption	i. Da	te (mm/dd/y	yyy)	j. Amount	
1399	Draft				06/30/2020		s	0.11
							s	
5. Total only	this Page					S		0.11
	LL CRO-1250 Pa	The same and the same and						
(This line goes i	n line 11a of Detailed Su n line 11b of Detailed Su	mmary Page CRO-11	00 if Not-for-P	_		S		0.11
	n line 11c of Detailed Su				Income)			
CRO-1250		NC State Bo	oard of Election	IS.			De	cember 2007

Disbursem	ents				Pe	1 of	1	Amendmen	t No
	report expenditures coordinated party ex		e for o	perating expen	_				tical
	ıll Name (and Fund i		145			89	0.1	2. ID Number	
	RKHEAD FOR DURH				**********		***************************************	on an execution of the same of	manimum of mi
3. Type of Disbu	rsement (Please	use separate CRO	-1310	forms for each	typ	e of Disbu	rseme	nt.)	
Operating Exp		ibutions to Candidat	es/Polit	ical Committees		☐ Coo	rdinat	ed Party Expendit	ures
4. Pavee Inform	ation	NEWSTERN SE		Add 🗆	Ren	ove			
a. Full Name, Ma	ailing Address & Pho	one		b. Coordinates	d Co	mmittee Na	ıme	d. Comments	
(include city, sta	_				••••••	***************************************			
VERIZON WIRE	LESS								
NC				c. Level Regist	terec	A.A.A.A.			
				☐ Federal		County:		378 45 C	4 Th 4
				☐ State		L Municip	ангу:	e. Election Sun	to Date
								S	592.38
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/vvvv)	i. Aı	mount	k. Re	quired Remark	<b></b>
5847	Draft	F		6/30/2020	S	197.46		***************************************	
3047	Dian		-	0/30/2020	-	157.10	11101	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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	ailing Address & Pho	one		b. Coordinated	d Co	mmittee Na	ıme	d. Comments	***************************************
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WELLS FARGO				c. Level Regist	tanad	(Enosife)		-	
NC				Federal	rerec	County:			
				State				e. Election Sun	to Date
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								S	125.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. A	mount	k. Re	quired Remark	3
5847	Draft	0	0	6/30/2020	S	60.00	MON	NTHLY SER FEE	3
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5. Total only thi	s Page				LL.			S	257.46
	CRO-1310 Pages								
(This line goes t	n line 13a of Detailed S in line 13b of Detailed S in line 13c of Detailed S	Summary Page CRO	-1100 if	Contrib to Cand	lidate		отт)	S	257.46
7. Purpose Co	odes (List detailed	expenditure code	in (h.)	above)				THE STATE	Elve III
A* - Media	B* - Printin			undraising		D - To	Anot	her Candidate	
E - Salaries I - Postage	F* - Equipm J - Penaltie			litical Party Office Expense:	S		•	g Public Office ! on to Legal Expo	-

O\* Other

\* Codes require detailed explanation in required remarks field (k)

CRO-1310

NC State Board of Elec NC State Board of Elections

December 2009

Debts and Obligati	•				_		Yes Ves	X No
Use this form to report any u		owed!	by the committ	ee, to in	clud	le camp	24	
1. Committee Full Name (and	(*************************************	*************				***********	2. D Numb	er
CLARENCE BIRKHEAD FOR	R DURHAM COUNTY							
3. Creditor Information			Add 🔲	Remov	e			
a. Full Name, Mailing Address	s & Phone			-			d debts shoul ee listed as tl	ld be listed on
(include city, state, & zip) CLARENCE BIRKHEAD			b. Description			care pag	e corea as a	als treation
PO BOX 12387 DURHAM, NC 27709			LOAN			••••••		
c. Beginning Balance	d. Total Amount Paid	_	e. Total Amou	nt Incur	red		f. Remainin	g Balance
\$ 5,000.00	S	0.00	s		••••••	0.00	S	5,000.00
g. Incurred Debts (what the co	mmittee received this perio	od)			_			
gl. Purchase Place Full Name			g2. Date (mm/	dd/yyyy)		g3. Am	ount	
(include city, state, & zip)						S		
			g4. Purpose C	ode	g5.	Require	d Remarks	
gl. Purchase Place Full Name	, Mailing Address & Phone		g2. Date (mm/	dd/yyyy)		g3. Am	ount	
(include city, state, & zip)						\$		
			g4. Purpose C	ode	g5.	Require	ed Remarks	
gl. Purchase Place Full Name	, Mailing Address & Phone		g2. Date (mm/	dd/yyyy)		g3. Am	ount	
(include city, state, & zip)			,			S		
			g4. Purpose C	ode	g5.	Require	ed Remarks	
gl. Purchase Place Full Name	, Mailing Address & Phone		g2. Date (mm/	dd/yyyy)		g3. Am	ount	
(include city, state, & zip)		***************************************				S		
			g4. Purpose C	ode	g5.	Requir	ed Remarks	
gl. Purchase Place Full Name	, Mailing Address & Phone		g2. Date (mm/	dd/yyyy)		g3. Am	ount	
(include city, state, & zip)						S		
			g4. Purpose C	ode	g5.	Requir	ed Remarka	
4. Total only this Page		1 17				d d		£ 000 00
(This should be the sum of a	Il items 'g3.' from this page)	)				\$		5,000.00
5. Total of ALL CRO-		ma i	100			\$		16,407.14
(This line must be on line 22								
6. Pupose Codes (List of A* - Media B*			n (g4.) undraising		D-	To An	other Candid	ate
	_		itical Party					ffice Expenses
			ffice Expenses		0*	- Othe	r	
* Codes require detailed expl	100		(g5.) ard of Elections					Pak 2011
CRO-1610	INC SI	ars D0.	and Or Elections					February 2011

Amendment

g.l. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)  gl. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)  gl. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)  gl. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)  gl. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)  gl. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)  gl. Purpose Code  gl. Purpose Code  gl. Purpose Code  gl. Required Remarks  gl. Purpose Code  gl. Required Remarks  gl. Purpose Code  gl. Purpose Code  gl. Required Remarks  gl. Purpose Code  gl. Purpose Code  gl. Required Remarks  gl. Purpose Code  gl. Required Remark	Debts and Obligati	*				_		_	2 <b>U</b> Ye	
CLARENCE BIRKHEAD FOR DURHAM COUNTY  3. Creditor Information  a. Full Name, Mailing Address & Phone (include city, state, & zip)  CLARENCE BIRKHEAD  FOR DENTISM  DERHAM, NC 27799  C. Beginning Balance  A. Total Amount Paid  S. Total Amount Incurred  S. 11,407.14  S. O.00  S. D. 0.00  S. 11,407.14  S. O.00  S. D. O.00  S. 11,407.14  S. Double County of the County o			wed	by the	comm	ittee, t	o mclu	de camp	V	
3. Creditor Information  a. Full Name, Mailing Address & Phone (include city, state, & zip)  D. Borription of Creditor  Cinclude city, state, & zip)  D. Borription of Creditor  LOAN  Description of Creditor  LOAN  D. Borription of Creditor  LOAN  D. Description of Creditor  LOAN  D. Do. D. D. Description of Creditor  LOAN  D. Do. D. D. Description of Creditor  LOAN  D. Do. D. D. D. Description of Creditor  LOAN  D. Do. D. D. D. D. D. D. Description of Creditor  D. Do. D.	ing the property of the contract of the contra		**********	**************		************			Z. ID Nui	wer
a. Full Name, Mailing Address & Phone (finelude city, state, & zip)  Description of Creditor  Dorna CRO-1310 with the payee listed as this creditor.  Dorna CRO-1400 paye	CLARENCE BRIGHTER D'I OF	C DOMININ COOK!								
form CRO-1310 with the payee listed as this creditor.  CARENCE BRISHEAD PO BRAIZESS  DURHAM.NC 27789  8. Description of Creditor  LOAN  LOAN  1.000  8. Remaining Balance  8. Total Amount Incurred  9. Remaining Balance  9. Incurred Debts (what the committee received this period)  9. Purchase Place Full Name, Mailing Addreas & Phone (Include city, state, & zip)  9. Purchase Place Full Name, Mailing Addreas & Phone (Include city, state, & zip)  9. Purchase Place Full Name, Mailing Addreas & Phone (Include city, state, & zip)  9. Purchase Place Full Name, Mailing Addreas & Phone (Include city, state, & zip)  9. Purchase Place Full Name, Mailing Addreas & Phone (Include city, state, & zip)  9. Purchase Place Full Name, Mailing Addreas & Phone (Include city, state, & zip)  9. Purchase Place Full Name, Mailing Addreas & Phone (Include city, state, & zip)  9. Purchase Place Full Name, Mailing Addreas & Phone (Include city, state, & zip)  9. Purpose Code  9. Required Remarks	3. Creditor Information			Add		Ren	nove			
S. Description of Creditor   Don's	a. Full Name, Mailing Addres	s & Phone		Not	e: All	рауше	nts ma	de towai	d debts sho	uld be listed on
DORNIAM, NC 27799   DORN		***************************************		-					ee listed as	this creditor.
c. Beginning Balance c. Boginning Balance d. Total Amount Paid c. Total Amount Incurred c. Beginning Balance s. 11,407.14 c. 10,000 c. 11,407.15 c					criptic	on of C	redito	r		
S 11,407.14 S 0.00 S 0.00 S 11,407.1  g. Incurred Debta (what the committee received this period) g. P. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)  g. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)  g. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)  g. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)  g. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)  g. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)  g. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)  g. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)  g. Purpose Code  g. Required Remarks  g. Purpose Code  g. Require	DURHAM, NC 27709			LOAN						
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CLARENCE	E BIRKHEAD FOR DURI	HAM COUNTY			
3. Transfer	Information				
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Add Remove	5847	1399	01/02/2020	s	25.00
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☐ Add ☐ Remove	1399	5847	S	500.00	
☐ Add ☐ Remove	5847	1399	04/01/2020	S	25.00
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CRO-1720

NC State Board of Elections

December 2007