Disclosure Re	eport Cover neral report and committee	informat	ion, must be s	igned and su	bmitted along with	Amendment Yes No other detailed forms.
	to update information					
1. Committee Infor	mation					
a. Full Name Birkhead for Durha						c. ID Number
Birkilead for Duffia	III					
b. Mailing Address (inc	lude City, State and Zip Code)	e i la			2000 A 400 A	d. Date Filed
4 Bobby Park Place						01/25/2018
Durham, NC 27703						e. Phone Number
						919-423-6179
2. Report Year	3. Period Start Date (mm/c	ld/yy)	4. Period En (mm/dd/yy)	nd Date	5. Treasurer F	ull Name
2017	07/01/2017		12/31	/2017	Lloyd Patillo	
6. Type of Committ		-	e of Report			ort from one category)
Candidate Campa		Municip		State/0	County	Referendum
PAC Independent	Referendum		Organizational		Organizational	Organizational Pre-referendum
Expenditure	Joint Fundraiser		Thirty-five day		Quarterly	Pre-referendam
Legal Expense Fu 7. Type of Fund	(if applicable, check one)		Pre-primary		First	Final
Booster Fund"			Pre-election		Second	Supplemental Final
Building Fund			Pre-runoff		Third	Annual
			Semi-annual Mid Year		Fourth Semi-annual	Special
Other:		H	Year End		Mid Year	10. Special Report Name
			Final		Year End	
8. Number of Fund	raisers this Report		Special		Final	
					Special	
11. Account Inform			A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		Information	
a. Financial Institution I	Full Name		8	. Financial Ins	titution Full Name	
Wells Fargo b. Purpose	c. Account Code			o. Purpose		c. Account Code
Operating		0			PERSON	
	139	9		114	LINOON	
	d. Period Begin Balance				IAN 2 5 2018	d. Period Begin Balance
	\$ 382.93			DU	RHAM BOE	\$
CERTIFICATION			A LICIA CAMBOOK		I TITALINI BUE	
I certify that the Com the NC General Statu	ites and that no funds are co correct and that I have been	mmingle	ed with prohib	iled or other	non-disclosed fund	B, & 22D-22M of Chapter 163 of Is. I further certify that this report 01/25/2018
	Printed Name of Signer		Sign	ature of Appoin	ted Treasurer	Date
FOR OFFICE USE O						Dollyon, Mathad
Date Received:	1/25/18		Employee:	GE	M	Delivery Method Normal Mail
Date Postmarked	l:		Employee:	-		Registered Mail Hand Delivered
Date Scanned:			Employee:			☐ Electronically Filed ☐ Signer has not received
Date Data Entere	ed:		Employee:			mandatory training
Please Note: This		n of boo	ks information	n, or account	information.	lress, treasurer, assistant treasurer, ttee changes.

Amendment

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 Report		3. ID Number
	Year		
Start of Election Cycle: January 1,	2017	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 382.93	\$ 528.45
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 175	\$ 175
6) Contributions from Individuals	(CRO-1210)	\$	\$
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$ 17500	\$ 17500
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.02	\$ 0.10
11b) Contributions from Not-for-Profit Organization	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c,	11d and 11e)	\$	\$
EXPENDITURES			
13) Disbursements		5.	
13a) Operating Expenditures	(CRO-1310)	\$ 6852.65	\$ 6998.25
13b) Contributions to Candidates/Political Committe	es (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,	16 and 17)	\$	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtra	ct line 18)	\$ 11205.30	\$ 11205.30
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	
24) Account Transfers Within the Committee	(CRO-1720)	\$	
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

Amendment

No

Aggregated Contributions from Individuals

Page

1 of

Amendment Yes

No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable) Birkhead for Durham 2. ID Number							
3. Con	tributor Infor	mation			10 to 1.15		
a. Amen	d	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
\boxtimes	Add	1399	via Square		09/20/2017	\$ 50	
	Remove	1377	The Square				
\boxtimes	Add	1399	via Square		11/21/2017	\$ 25	
	Remove						
	Add Remove	1399	via Square		11/22/2017	\$ 100	
	Add				MARCO 191	\$	
	Remove						
	Add					\$	
	Remove						
	Add					\$	
	Remove						
	Add	-				\$	
\exists	Remove						
<u> </u>	Add Remove					\$	
\vdash	Add						
\Box	Remove					\$	
H	Add						
Ħ	Remove	-				\$	
n	Add					· ·	
	Remove					\$	
	Add					\$	
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	Add					\$	
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Ц	Add	4				\$	
	Remove						
\vdash	Add	4				\$	
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	Remove	-				\$	
	Add	1					
一	Remove					\$	
Ħ	Add					•	
	Remove					\$	
	Add					\$	
	Remove					Ψ	
	Add					\$	
	Remove						
	Add					\$	
	Remove						
	Add Remove					\$	
4. Tota	al only this	Page			\$	3 175	
		RO-1205 P	ages		\$	S 175	
(This line must be on line 5 of Detailed Summary Page CRO-1100)						175	

Other Receipt Source	Other	Receipt	Sources
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1

of

Amendment Yes

No

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

	Full Name (and Fund	if applicable)		2. 1	D Number		
Birkhead for D	Jurham						
3. Type of Rec	eipt Source	(Please use separate CRO-	1250 form	s for each type of Re	ceipt Source.)		
Interest		Contributions from Not-fo	Contributions from Not-for-Profit Organizations Ou				
4. Contributor		☐ Add		Remove			
	ling Address & Phone		b. Not-f	or-Profit Federal ID #	d. Comments		
(include city, sta	ate, & zip)		ALE				
3415 Westgate	Dr Ste 109		c. Outsi	de Source Explanation			
Durham, NC 2							
(919) 489-894:	5				e. Election Sum to Date		
					\$ 0.10		
f. Account Code	g. Form of Payment	h. In-Kind Description		i, Date (mm/dd/yyyy)	j. Amount		
1399	Deposit			12/31/2017	\$ 0.01		
1399	Deposit			07/31/2017	\$ 0.01		
4. Contributor	Information	Add		Remove			
	ling Address & Phone		b. Not-fe	or-Profit Federal ID #	d. Comments		
(include city, sta	ite, & zip)		E.				
			c. Outsid	le Source Explanation	e. Election Sum to Date		
					\$		
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyyy)	j. Amount		
					\$		
					\$		
4. Contributor	Information	Add		Remove			
	ing Address & Phone		b. Not-fo	r-Profit Federal ID#	d. Comments		
(include city, sta	te, & zip)		1				
			c. Outsid	le Source Explanation	_		
					e. Election Sum to Date		
					\$		
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date (mm/dd/yyyy)	j. Amount		
					\$		
					\$		
5. Total only	this Page				\$ 0.02		
(This line goes in (This line goes in	line 11b of Detailed Summa	tes Ty Page CRO-1100 if Interest) Try Page CRO-1100 if Not-for-Profit Co Try Page CRO-1100 if Outside Sources o			\$ 0.02		

Disbursements Pg 1 of 1

of 1 Amendment No

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

Birkhead for Durham 3. Type of Disbursement (Please use separate			1	
	te CRO-1310 forms for eac	h type of Disburse	ment.)	
Operating Expenses Contributions to	Candidates/Political Committees		Coordinated Party Expenditures	
	Add	Remove		
a. Full Name, Mailing Address & Phone	b. Coordinated Committee	e Name	d. Comments	
(include city, state, & zip)			Financial Servi	
ActBlue			_	
PO Box 441146	c. Level Registered (Specif			
Somerville, MA 02144	Federal \(\sum \)			
	State	Municipality:	e. Election Sum to Date	
			\$ 1.88	
f. Account Code g. Form of Payment h. Purpose Cod	le i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1399 Draft O	Multi	\$6.43	ActBlue	
		6		
		\$		
4. Payee Information		Remove	La Commonte	
a. Full Name, Mailing Address & Phone	b. Coordinated Committee	e Name	d. Comments Committee Mgt	
(include city, state, & zip)			Committee Mgt	
Applebees Store #3840	c. Level Registered (Specif	÷/		
Raleigh, NC	Federal			
Raicign, NC	State	Municipality:	e. Election Sum to Date	
			\$ 269.27	
f. Account Code g. Form of Payment h. Purpose Cod	le : Data (mm/dd/mm)	j. Amount	k. Required Remarks	
			k. Required Remarks	
1399 Debit Card	Multi	\$183.37		
		\$		
4. Payee Information	Add	Remove		
a. Full Name, Mailing Address & Phone	b. Coordinated Committee	Name	d. Comments	
(include city, state, & zip)			Banking Fees	
Wells Fargo				
Main St	c. Level Registered (Specify			
Durham, NC	Federal State	County: Municipality:	e. Election Sum to Date	
	State	Municipanty.	e, Election Sum to Date	
			\$ 16	
f. Account Code g. Form of Payment h. Purpose Code	e i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1399 Draft O	07/31/2017	\$10	Bank fee	
		\$		
		Ψ		
			¢ 100.00	
		A)	\$ 199.80	
6. Total of ALL CRO-1310 Pages	1100 if Operating Fynenses)			
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-		itical Comm)	\$ 199.80 \$ 6852.65	
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1 (This line goes in line 13b of Detailed Summary Page CRO-1	1100 if Contrib to Candidates/Poli			
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-ITHIS line goes in line 13b of Detailed Summary Page CRO-ITHIS line goes in line 13c of Detailed Summary Page CRO-ITHIS line goes in	1100 if Contrib to Candidates/Poli 1100 if Coordinated Party Expend			
(This line goes in line 13b of Detailed Summary Page CRO- (This line goes in line 13c of Detailed Summary Page CRO- 7. Purpose Codes (List detailed expenditure code A*- Media B*- Printing C*- Fo	1100 if Contrib to Candidates/Poli 1100 if Coordinated Party Expend in (h.) above) undraising	D - To Anotl	\$ 6852.65 her Candidate	
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1 (This line goes in line 13b of Detailed Summary Page CRO-1 (This line goes in line 13c of Detailed Summary Page CRO-1 7. Purpose Codes (List detailed expenditure code A* - Media B* - Printing C* - Fix E - Salaries F* - Equipment G - Pol	1100 if Contrib to Candidates/Poli 1100 if Coordinated Party Expend in (h.) above) undraising litical Party	D - To Anoth H* - Holdin	\$ 6852.65 her Candidate g Public Office Expenses	
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1 (This line goes in line 13b of Detailed Summary Page CRO-1 (This line goes in line 13c of Detailed Summary Page CRO-1 7. Purpose Codes (List detailed expenditure code A* - Media B* - Printing C* - For E - Salaries F* - Equipment G - Pol	1100 if Contrib to Candidates/Poli 1100 if Coordinated Party Expend in (h.) above) undraising	D - To Anoth H* - Holdin	\$ 6852.65	

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n	ic	h	11	MC	en	10	ni	te
v	13	u	u	13	CII		11 (LO .

Amendment

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

	Full Name (and Fun	id if applicable)			2. ID Number
Birkhead for D			and 1210 Complete	C Dishuwa	
3. Type of Dish		The state of the s	CRO-1310 forms for each andidates/Political Committees		Coordinated Party Expenditures
		Contributions to Ca	Add	Remove	obtainated raity Expenditures
4. Payee Inform			b. Coordinated Committee !		d. Comments
(include city, state,	ling Address & Phone		b. Coordinated Committee !	vanic	u, comments
Best Buy	, & zip)		-		
New Hope Con	nmons		c. Level Registered (Specify)		50
Durham NC 27			Federal 🖂	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 193.48
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
					Office Supplies
1399	Debit Card	K	10/12/2017	\$193.48	••
				\$	
4. Payee Inform	nation		Add	Remove	
	ling Address & Phone		b. Coordinated Committee N		d. Comments
(include city, state,					Consulting Firm
Cardnial Consu		200000000000000000000000000000000000000			
			c. Level Registered (Specify)		
			Federal 🖂	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 4510
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1200	Chaole		Multi	\$4510	Consulting Firm
1399	Check	0	Multi	\$4310	
				\$	
4. Payee Inform	nation		Add	Remove	
a. Full Name, Maili	ing Address & Phone		b. Coordinated Committee N	lame	d. Comments
(include city, state,	& zip)				
Denim and Diar	mond				
			c. Level Registered (Specify)		
801-413-7200			Federal 🖂	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 74.84
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1399	Debit Card	0	10/31/2017	\$74.84	
				\$	
5 Total only th	ia Pogo				\$ 4778.32
5. Total only thi	CRO-1310 Pages				4170.32
	line 13a of Detailed Sum	ımarv Page CRO-1100	0 if Operating Expenses)	AD ALLESO ESSENTE CONTROL VIRGINIA	6050.65
20.			0 if Contrib to Candidates/Politic	cal Comm)	\$ 6852.65
37		5.0) if Coordinated Party Expenditu		
	es (List detailed exp				
A* - Media	B* - Printing	C* - Fund		D - To Anoth	er Candidate
E - Salaries	F* - Equipment	G - Politic			g Public Office Expenses
I - Postage O* - Other	J - Penalties	K* - Offic	ce Expenses	Q* - Donatio	on to Legal Expense Fund
	e detailed explanation	on in required re	marks field (k)		

Dis	hii	MGO	m	on.	10
DIS	DU	rse	m	en	LS

Pg <u>1</u>

of <u>3</u>

Amendment Yes

1

No

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

	Full Name (and Fun	d if applicable)			2. ID Number	
Birkhead for D						
3. Type of Disb			CRO-1310 forms for each			
Operating I	Expenses		ndidates/Political Committees		oordinated Party Expenditures	
4. Payee Inform	nation		Add	Remove		
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committee	Name	d. Comments	
(include city, state,	& zip)					
FRO II						
3415 Wake For	est Rd		c. Level Registered (Specify)		
Raleigh, NC 27	609		Federal 🖂	County:		
1-919-719-492	7		State	Municipality:	e. Election Sum to Date	
					\$ 218.18	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1399	Debit Card	0	10/02/2017	\$218.18	Campaign Mgt	
				0		
			A.11	\$		
4. Payee Inform			Add	Remove	1.6	
	ing Address & Phone		b. Coordinated Committee	Name	d. Comments	
(include city, state,						
Greater Durhan						
300 W Morgan			c. Level Registered (Specify			
Durham, NC 27	7701		Federal 🖂	County:		
(919) 328-8700)		State	Municipality:	e. Election Sum to Date	
					\$ 208.96	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1399	Debit Card	0	12/18/2017	\$208.96	Membership	
				\$		
		M	2.11			
4. Payee Inform		\boxtimes	Add	Remove	d. Comments	
	ng Address & Phone		b. Coordinated Committee	Name		
(include city, state,	& zip)				In home meeting	
Harris Teeter						
Store #034			c. Level Registered (Specify)			
Raleigh, NC			Federal 🖂	County:		
			State	Municipality:	e. Election Sum to Date	
					\$ 64.92	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	I鎌Č曽 vÕ	k. Required Remarks	
1399	Debit Card	O	09/29/2017	\$64.92	Snacks	
				\$		
5. Total only thi	s Dogo				\$ 492.06	
The state of the s	CRO-1310 Pages					
	line 13a of Detailed Sum	mary Page CRO-1100	if Onerating Expenses)	KANDA SANATAYANA KA		
) if Contrib to Candidates/Politi	ical Comm)	\$ 6852.65	
) if Coordinated Party Expendit			
	es (List detailed exp					
A* - Media	B* - Printing	C* - Fund		D - To Anoth	er Candidate	
E - Salaries	F* - Equipment	G - Politic			Public Office Expenses	
I - Postage	J - Penalties		e Expenses		on to Legal Expense Fund	
O* - Other						
* Codes require	e detailed explanati	on in required re	marks field (k)			

Die	hu	rsem	on	ta
DIS	Du	rsem	en	LS

Pg 1

of 4

Amendment
Yes

 \boxtimes

	report expenditures		tee for; operating ex	penses,	, contributions to	candidate/political	
committees and coordinated party expenditures. 1. Committee Full Name (and Fund if applicable) 2. ID Number							
Birkhead for D		a in a ppineasie)					
3. Type of Dish	oursement (Plea	ase use separate (CRO-1310 forms for	each i	type of Disburser	ment.)	
Operating l			andidates/Political Comm			oordinated Party Expenditures	
4. Payee Inform	nation		Add		Remove		
a. Full Name, Mail	ling Address & Phone		b. Coordinated Com	mittee N	ame	d. Comments	
(include city, state							
Longhorn Steal			THE STATE OF THE S				
8121 Brier Cre			c. Level Registered (S		Country		
Raleigh, NC 27617			State	Federal County: State Municipality:		e. Election Sum to Date	
(919) 484-7669	,		State		within cipality.		
						\$ 48.02	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	уу)	j. Amount	k. Required Remarks	
1399	Debit Card	О	10/02/2017		\$48.02	Campaign Mgt	
					\$		
4. Payee Inform	nation		Add		Remove		
	ing Address & Phone		b. Coordinated Com	mittee N		d. Comments	
(include city, state,							
Verizon Wirele			1				
888-294-6804			c. Level Registered (S	Specify)			
			Federal	\boxtimes	County:		
			State		Municipality:	e. Election Sum to Date	
						\$ 98.58	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	уу)	j. Amount	k. Required Remarks	
1399	Debit Card	0	Multi		\$98.58	Mobile Service	
					\$		
4. Payee Inform	 nation		Add		Remove		
	ing Address & Phone		b. Coordinated Committee Name			d. Comments	
(include city, state,							
PF Chang							
6801 Fayettevil	le Rd		c. Level Registered (S				
Durham, NC 27			Federal	\boxtimes	County:		
(919) 294-3131			State		Municipality:	e. Election Sum to Date	
						\$ 59.34	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	yy)	j. Amount	k. Required Remarks	
1399	Debit Card	0	08/30/2017		\$59.54	Committee Weetin	
					\$		
5. Total only th	is Page					\$ 206.14	
	CRO-1310 Pages						
	line 13a of Detailed Sum					\$ 6852.65	
	line 13b of Detailed Sum						
	line 13c of Detailed Sum	A STATE OF THE PERSON NAMED IN COLUMN 2	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	хрепани	res)		
7. Purpose Code A* - Media	es (List detailed exp B* - Printing	c* - Fund			D - To Anoth	er Candidate	
E - Salaries	F* - Equipment	G - Politic				Public Office Expenses	
I - Postage	J - Penalties		ce Expenses			n to Legal Expense Fund	
O* - Other							

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

Amendment **Disbursements**

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

1. Committee I Birkhead for D	Full Name (and Fun	d if applicable)			2. ID Number		
3. Type of Dish		asa usa sanarata (CRO-1310 forms for eac	h type of Dishurse	ment)		
Operating	The second secon		ndidates/Political Committees		Coordinated Party Expenditures		
4. Payee Inform			Add	Remove			
a. Full Name, Mailing Address & Phone			b. Coordinated Committee		d. Comments		
(include city, state	[19] [2] [1] [1] [2] [1] [1] [1] [1] [1] [1] [1] [1] [1] [1						
Staples Office			1				
8041 Brier Cre	ek Parkway		c. Level Registered (Specia	fy)			
Raleigh, NC 27	617		Federal ×	County:			
(919) 484-2482			State	Municipality:	e. Election Sum to Date		
					\$ 813.25		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy) j. Amount		k. Required Remarks		
1399	Debit Card	О	Multi	\$813.25	Handouts		
				\$			
4. Payee Inform	nation		Add	Remove			
	ing Address & Phone		b. Coordinated Committee		d. Comments		
(include city, state,							
The Flying Pig							
Mobile Food T	ruck		c. Level Registered (Specif				
			Federal X	County:			
			State	Municipality:	e. Election Sum to Date		
					\$ 79.77		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1399	Debit Card	0	09/26/2017	\$79.77	committee mgt		
				\$			
4. Payee Inform	 nation		Add	Remove			
	ing Address & Phone		b. Coordinated Committee		d. Comments		
(include city, state,							
TMG				*			
6911 Fayetteville Rd #102			c. Level Registered (Specif	y)			
Durham, NC 27713		Federal X					
(919) 572-1210			State	Municipality:	e. Election Sum to Date		
					\$ 84.31		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1399	Debit Card	О	08/21/2017	\$84.31	committee Meetin		
		***************************************	1	\$			
5. Total only th	is Page	1.5			\$ 977.33		
	CRO-1310 Pages						
miner for the major of the mineral and replace and reservation of the reservation of the second section of the section of the second section of the section of the second section of the sectio	line 13a of Detailed Sum	mary Page CRO-1100	0 if Operating Expenses)		\$ 6852.65		
(This line goes in	line 13b of Detailed Sum	mary Page CRO-1100) if Contrib to Candidates/Political Comm)		\$ 0832.03		
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
	es (List detailed exp						
71 Michig					ner Candidate		
E - Salaries	F* - Equipment J - Penalties	G - Politic	al Party e Expenses		g Public Office Expenses on to Legal Expense Fund		
I - Postage O* - Other	J - renatties	K" - Offic	e Expenses	Q - Dollatio	on to negat napense i and		
Common description for elimentatives a temperature of the control	e detailed explanati	on in required re	marks field (k)				

No

T .				
Dis	burs	sem	en	ts

Amendment

Yes

No

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

Birkhead for D 3. Type of Dist Operating	bursement (Plea	ise use separate C	PO-1310 forms for each	CDLI.			
			MO-1310 Julius Jul Cuci	i type of Disbursei	ment.)		
	Expenses	TAKE TO SERVICE THE PROPERTY OF THE PROPERTY O	ndidates/Political Committees		oordinated Party Expenditures		
4. Payee Information			Add	Remove			
a. Full Name, Mai (include city, state USPS	ling Address & Phone e, & zip)		b. Coordinated Committee	Name	d. Comments		
			c. Level Registered (Specif				
			Federal State	County: Municipality:	e. Election Sum to Date		
					\$ 49		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy) j. Amount		k. Required Remarks		
1399	Debit Card	I	07/24/2017	\$49	100 Stamps		
				\$			
4. Payee Inform	mation		Add Remove				
a. Full Name, Mail	ling Address & Phone		b. Coordinated Committee	Name	d. Comments		
(include city, state							
Missing Receip	ot		1 10 11 16 16	Visa in a contraction	<u> </u>		
			c. Level Registered (Specify) Federal County:		<u> </u>		
			State	Municipality:	e. Election Sum to Date		
			State	. Tumo panty.	\$ 150		
f. Account Code	g. Form of Payment	h, Purpose Code	i. Date (mm/dd/yyyy) j. Amount		k. Required Remarks		
1399	Withdrawal	0	08/16/2017	\$150	Researching		
				\$			
4. Payee Inform	nation		Add	Remove			
	ing Address & Phone		b. Coordinated Committee	Name	d. Comments		
(include city, state,							
			c. Level Registered (Specify				
			Federal County: State Municipality:		e. Election Sum to Date		
			State	Wumerpanty.	\$		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1399	Debit Card			\$			
				\$			
5. Total only th	is Page				\$ 199		
6. Total of ALL (This line goes in (This line goes in	CRO-1310 Pages line 13a of Detailed Sum line 13b of Detailed Sum	mary Page CRO-1100	if Operating Expenses) if Contrib to Candidates/Polit if Coordinated Party Expendi		\$ 6852.65		
	es (List detailed exp						
A* - Media E - Salaries I - Postage O* - Other	B* - Printing F* - Equipment J - Penalties e detailed explanation	C* - Fund G - Politica K* - Office	raising al Party e Expenses		er Candidate g Public Office Expenses on to Legal Expense Fund		

Loan Proceeds	Pg	1	of	1	Amen	dment Yes	No	
Use this form to report proceeds from a loan and loan endorser's in	nformati	on						
A loan proceeds statement must accompany each loan that is from	an indiv	idual						

	lame (and Fund if applicable)		2.	ID Numb	per		
Birkhead for Durhan	n						
3. Lender Informati	on 🗵	Add			Remove		
a. Full Name, Mailing Ad	ldress & Phone	b. Job Title/Profe	ession		d. Comments		
(include city, state, & 2	zip)	Retired					
Clarence Birkhead							
4 Bobby Park Place		5 1 1 7	(6 - 'C - E'-14		e. Start Date (mm/dd/yyyy)		
Durham, NC 27703		c. Employer's Na	me/Specific Field		08/04/2017		
		i			f. End Date (mm/dd/yyyy)		
g. Rate	h. Security Pledged	i. Account Code	j. Form of Paymer	nt	k, Amount		
0 %		1399	Check		\$ 17500		
I. Full Name of Lending I	nstitution			m. Loan	Number		
Personal Loan							
	(III. a see Leville a suggestion	Octory)					
4. Endorsers/Makers a. Full Name, Mailing Ad		b. Job Title/Pr	ofession	c Emplo	mployer's Name/Specific Field		
(include city, state, & z		b. 30b Title/TT	oresaion	c. Emplo	yer s rumer specific x reid		
(merade city) state; et 2		W 100000000					
		d. Percentage		e. Amour	1 t 1888		
			%	\$			
a. Full Name, Mailing Ad	dress & Phone	b. Job Title/Pr	ofession	c. Emplo	yer's Name/Specific Field		
(include city, state, & z	ip)						
		d. Percentage		e. Amour	nt		
			%	\$			
a. Full Name, Mailing Ad	dress & Phone	b. Job Title/Pro	ofession	c. Employ	yer's Name/Specific Field		
(include city, state, & zi	ip)						
		d. Percentage		e. Amoun	t is		
			%	\$			
a. Full Name, Mailing Add	dress & Phone	b. Job Title/Pro	ofession	c. Employ	yer's Name/Specific Field		
(include city, state, & zi		D. GOD THIC/TH	7.031011	er zanpro.			
	· · · · · · · · · · · · · · · · · · ·						
		d. Percentage		e. Amoun	t is a second of the second of		
			%	\$			
5. Total of ALL C				\$	17500		
(This line must be on lin	e 9 of Detailed Summary Page CRO-110	0)					