

# 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>	
a. Full Name <i>Committee to Elect Clarence F. Birkhead Sheriff</i>	c. ID Number <i>6HDC94</i>
b. Mailing Address (include City, State and Zip Code) <i>P.O. Box 1591 Hillsborough, NC 27278</i>	d. Date Filed <i>12-16-10</i>
	e. Phone Number <i>9196440202</i>

2. Report Year <i>2010</i>	3. Period Start Date (mm/dd/yy) <i>02/18/2010</i>	4. Period End Date (mm/dd/yy) <i>04/17/2010</i>	5. Treasurer Full Name <i>Jim R Dooley</i>
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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"/> Party	<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input checked="" type="checkbox"/> First	<input type="checkbox"/> Final
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

**7. Type of Fund (if applicable, check one)**

Booster Fund

Building Fund

Other:

**8. Number of Fundraisers this Report**

**10. Special Report Name**

<b>11. Account Information</b>		<b>11. Account Information</b>	
a. Financial Institution Full Name <i>Cardinal State Bank</i>	a. Financial Institution Full Name	b. Purpose <i>Checking Account</i>	c. Account Code <i>CFBI</i>
b. Purpose	b. Purpose	d. Period Begin Balance <i>\$ 200.00</i>	d. Period Begin Balance

**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 of Elections.

*Jim R Dooley* \_\_\_\_\_ *[Signature]* \_\_\_\_\_ *12-16-10* \_\_\_\_\_  
 Printed Name of Signer Signature of Appointed Treasurer Date

**FOR OFFICE USE ONLY**

Date Received: *12-16-10* Employee: \_\_\_\_\_ Delivery Method  
 Normal Mail  
 Registered Mail  
 Hand Delivered  
 Electronically Filed

Date Postmarked: \_\_\_\_\_ Employee: \_\_\_\_\_  
 Date Scanned: \_\_\_\_\_ Employee: \_\_\_\_\_  
 Date Data Entered: \_\_\_\_\_ Employee: \_\_\_\_\_

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.

DEC 16 2010  
 Orange Co. Bd. of Elections

# Detailed Summary

Amendment

Yes  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	
Comm: Hec to Elect Bishopal Singh	1 <sup>st</sup> Quarter	6HD C94	
Start of Election Cycle: January 1, <u>2007</u>	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 200	\$	
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$ 441.19	\$ 441.19	
6) Contributions from Individuals (CRO-1210)	\$ 2924.00	\$ 3934.00	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$	\$	
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$	\$	
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)	\$	\$	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$	\$	
11c) Outside Sources of Income (CRO-1250)	\$	\$	
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$	\$	
11e) Exempt Purchase Price Sales (CRO-1265)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 365.19	\$ 475.19	
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 681.30	\$ 1491.30	
13b) Contributions to Candidates/Political Committees (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)	\$ 681.30	\$ 681.30	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 2883.89	\$ 2883.89	
<b>ADDITIONAL INFORMATION</b>			
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)	\$ 10,280.58		
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)	\$	\$	

# Aggregated Contributions from Individuals

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

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Elect Birkhead Sheriff				6HDC94	
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input checked="" type="checkbox"/> Add					
<input type="checkbox"/> Remove	CFB1	CASH		02/23/2010	\$ 50.00
<input checked="" type="checkbox"/> Add					
<input type="checkbox"/> Remove	CFB1	CASH		02/23/2010	\$ 50.00
<input checked="" type="checkbox"/> Add					
<input type="checkbox"/> Remove	CFB1	CASH		03/01/2010	\$ 1.00
<input checked="" type="checkbox"/> Add					
<input type="checkbox"/> Remove	CFB1	CASH		03/02/2010	\$ 10.00
<input checked="" type="checkbox"/> Add					
<input type="checkbox"/> Remove	CFB1	CASH		03/03/2010	\$ .16
<input checked="" type="checkbox"/> Add					
<input type="checkbox"/> Remove	CFB1	CASH		03/03/2010	\$ .03
<input checked="" type="checkbox"/> Add					
<input type="checkbox"/> Remove	CFB1	CASH		03/24/2010	\$ 50.00
<input checked="" type="checkbox"/> Add					
<input type="checkbox"/> Remove	CFB1	CASH		03/30/2010	\$ 25.00
<input checked="" type="checkbox"/> Add					
<input type="checkbox"/> Remove	CFB1	CASH		04/09/2010	\$ 25.00
<input checked="" type="checkbox"/> Add					
<input type="checkbox"/> Remove	CFB1	CHECK		04/12/2010	\$ 50.00
<input checked="" type="checkbox"/> Add					
<input type="checkbox"/> Remove	CFB1	CHECK		04/12/2010	\$ 50.00
<input checked="" type="checkbox"/> Add					
<input type="checkbox"/> Remove	CFB1	CASH		04/12/2010	\$ 50.00
<input checked="" type="checkbox"/> Add					
<input type="checkbox"/> Remove	CFB1	CASH		04/12/2010	\$ 50.00
<input checked="" type="checkbox"/> Add					
<input type="checkbox"/> Remove	CFB1	CASH		04/12/2010	\$ 20.00
<input checked="" type="checkbox"/> Add					
<input type="checkbox"/> Remove	CFB1	CASH		04/12/2010	\$ 10.00
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
4. Total only this Page					\$ 441.19
5. Total of ALL CRO-1205 Pages					\$ 441.19
<small>(This line must be on line 5 of Detailed Summary Page CRO-1100)</small>					

CRO-1205

NC State Board of Elections

Received

April 2007

DEC 16 2010  
Orange Co. Bd. of Elections

**Contributions from Individuals**

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

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Committee to Elect Birkhead, Sheriff				640C94	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
Livingston, Richard 1615 Mc Guire Dr High Point, NC 27265			Teacher		
			c. Employer's Name/Specific Field	e. Election Sum to Date	
			Retired	\$ 99.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CFB1	CASH		03/02/2010	\$ 99.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
Birkhead, Thelma 615 Tucker St Asheboro, NC 27203			Teacher		
			c. Employer's Name/Specific Field	e. Election Sum to Date	
			Retired	\$ 300.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CFB1	Check		03/05/2010	\$ 300.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession	d. Comments	
Brady, Matthew 1818 MLK Jr. Blvd. #339 Chapel Hill, NC 27514			Professor		
			c. Employer's Name/Specific Field	e. Election Sum to Date	
			UNC, NC	\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	CFB1	CASH		03/08/2010	\$ 250.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>				\$ 649.00	
<b>5. Total of ALL CRO-1210 Pages</b>				Received \$ 2,924.00	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Committee to Elect Birkhead, Sheriff						6HDC94	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Greene, Shirley B. 1656 Plantation Circle Asheboro, NC 27205				Teacher			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				Retired		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	CFB1	check		03/10/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Chavious, Barbara 401 N. Nash St. Hillsborough, NC 27278				Teacher			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				Retired		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	CFB1	CHECK		03/16/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Skodnek, Joyce 10 west st., Apt. 156 New York, N.Y. 10004				Teacher			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				Retired		\$ 500.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	CFB1	CHECK			\$ 500.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 700.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 2924.00	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

Received  
DEC 16 2010  
Orange Co. Bd. of Elections

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Committee to Elect Birkhead, Sheriff						6HDC94	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Betman, Rennie 2910 Symphony Woods Dr Charlotte NC 28269				Medical Doctor			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				Self Employed		\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	CFBI	CHECT		03/23/2010	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Spencer, James 425 Watkins St Asheboro, NC 27203				Engineer			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				Retired		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	CFBI	CASH		04/07/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
M. Mann, Lawrence 104 Brannon Ct Chapel Hill, NC 27516				Financial			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				VP Team Wealth Planning		\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	CFBI	CHECT		04/09/2010	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 500.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 2,924.00	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

Received  
DEC 16 2010

# Contributions from Individuals

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

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Committee to Elect Birkhead Sheriff					6HDC94	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Hatteraway, Geoffrey L 5016 Pleasant View Rd Durham, NC <del>27705</del>			Probation + Parole			
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
			Orange Co., NC		\$ 75.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	CFB1	Check		04/10/2010	\$ 75.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Hunt, Elizabeth 423 Joyce Rd Hillsborough, NC 27278			Teacher			
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
			Retired		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	CFB1	Check		04/12/2010	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Trimmer, Davis 3613 Acorn Dr Hillsborough, NC 27278			Policeman			
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
			Hillsborough, NC		\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	CFB1	Check			\$ 200.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 375.00	
<b>5. Total of ALL CRO-1210 Pages</b> <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$ 2,924.00	

Received  
DEC 16 2010  
Orange Co. Bd. of Elections

**Contributions from Individuals**

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Committee to Elect Birkhead Sheriff						6HDC94	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Wilkinson, Michael				Police			
907 N. Mangum St, Apt D				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
Durham, NC 27701				Durham, NC		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	CFB1	check		04/10/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
McCormick, Trinita				Finance			
3522 Marshlane Way				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
Raleigh, NC 27610				Fidelity Investments		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	CFB1	check		04/10/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Cooley, Gail				Teacher			
424 Stone Service Rd				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
Hillsborough, NC 27278				Retired		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	CFB1	check		04/10/2010	\$ 100.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 300.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 2,924.00	
<small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>							

**Contributions from Individuals**

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

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Committee to Elect Birkhead, Sheriff						6HDC94	
<b>3. Contributor Information</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Brody, Matthew				Professor			
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
				UNC, NC		\$ 450.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>	CFBI	Check		04/17/2010	\$ 200.00		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. 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. Job Title/Profession</b>		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
						\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>3. 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. Job Title/Profession</b>		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
						\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<b>4. Total only this Page</b>						\$ 200.00	
<b>5. Total of ALL CRO-1210 Pages</b>						\$ 2,924.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</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>	
Committee to Elect Birkhead Sheriff						6 HDC 94	
<b>3. Type of Disbursement</b> (Please use separate CRO-1310 forms for each type of Disbursement.)							
<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 checked="" 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>	
WTE Solutions 169 Boone Sq. St. #230 Hillsborough, NC 27278							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 30.00	
<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>		
	Check	A	03/09/2010	\$ 30.00	Web Site		
				\$			
<b>4. Payee Information</b> <input checked="" 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>	
Hillsborough Sign & Trophy 103 Smallwood Ct. Hillsborough, NC 27278 919-644-2004							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 428.85	
<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>		
	Check	A	04/07/2010	\$ 428.85	Posters, etc		
				\$			
<b>4. Payee Information</b> <input checked="" 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>	
Meadowmont Village Hwy 54 Chapel Hill, NC 27514							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 180.00	
<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>		
	Check	C	04/07/2010	\$ 180.00	Rental Space		
				\$			
<b>5. Total only this Page</b>						\$ 638.85	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 681.30	
<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> (List detailed expenditure code in (h.) above)							
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						Received	
* Codes require detailed explanation in required remarks field (k)							

# 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>	
Committee to Elect Birkhead Sheriff						6 HDC 94	
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees			<input type="checkbox"/> Coordinated Party Expenditures		
<b>4. Payee Information</b> <input checked="" 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>	
PAYPAL							
				<b>c. Level Registered (Specify)</b>		<b>e. Election Sum to Date</b>	
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County:			
				<input type="checkbox"/> State <input type="checkbox"/> Municipality:			
						\$ 42.45	
<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>		
	check	0	3-1 to 4-17	\$ 42.45	online pay expense		
				\$			
<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>	
				<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:			
						\$	
<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>		
				\$			
				\$			
<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>	
				<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:			
						\$	
<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>		
				\$			
				\$			
<b>5. Total only this Page</b>						\$ 42.45	
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 681.30	
<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> (List detailed expenditure code in (h.) above)							
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)							

Received  
DEC 16 2010  
Orange Co. Bd. of Elections

**Debts and Obligations Owed By the Committee**

Pg 1 of 7 Amendment  Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Birkhead Sheriff		6HD094	
<b>3. Creditor Information</b> <input checked="" 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.	
Birkhead, Clarence 515 Joyce Rd Hillsborough, NC 27278 919 452 9511		<b>b. Description of Creditor</b> Candidate, Individual	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 26.40	\$ 0	\$ 26.40	\$ 26.40
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
02/22/2010	\$ 26.40		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
Fliers			
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
Fed Ex Kinko's 919 402 8160 5319 New Hope Commons Durham, NC 27707			
<b>3. Creditor Information</b> <input checked="" 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.	
Birkhead, Clarence 919 452 9511 515 Joyce Rd Hillsborough, NC 27278		<b>b. Description of Creditor</b> Candidate, Individual	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ <del>26.40</del> 500.00	\$ 0	\$ 500.00	\$ <del>26.40</del> 526.40
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
02/23/2010	\$ 500.00		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
Web Site			
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
WTE Solutions 169 Boone Sq St #230 Hillsborough, NC 27278			
<b>4. Total only this Page</b> (This should be the sum of all item '3f' from this page)			\$ 526.40
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)			RECEIVED \$ 10,280.58

# Debts and Obligations Owed By the Committee

Pg 2 of 7 Amendment  Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Birkhead Sheriff		6 HD 94	
<b>3. Creditor Information</b> <input checked="" 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.	
Birkhead, Clarence 919 452 9511 515 Joyce Rd Hillsborough, NC 27278			
<b>b. Description of Creditor</b>		Candidate, Individual	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ <del>10.00</del> 526.40	\$ 0	\$ 10.00	\$ <del>10.00</del> 536.40
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
03/05/2010	\$ 10.00		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
CD			
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
Orange County Board of Elections 208 S. Cameron St. Hillsborough, NC 27278			
<b>3. Creditor Information</b> <input checked="" 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.	
Birkhead, Clarence 919 452 9511 515 Joyce Rd Hillsborough, NC 27278			
<b>b. Description of Creditor</b>		Candidate, Individual	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ <del>30.00</del> 536.40	\$ 0	\$ 30.00	\$ <del>30.00</del> 566.40
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
03/09/2010	\$ 30.00		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
Web site update			
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
WTE Solutions 169 Boone Sq ST# 230 Hillsborough, NC 27278			
<b>4. Total only this Page</b> (This should be the sum of all item '3f' from this page)			\$ 40.00
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)			Received \$ 10,280.58

DEC 16 2010  
Orange Co. Bd. of Elections

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Birkhead Sheriff		6 HD C 94	
<b>3. Creditor Information</b> <input checked="" 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.	
Birkhead, Clarence 9194529511 515 Joyce Rd Hillsborough, NC 27278		<b>b. Description of Creditor</b> Candidate, Individual	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ <del>31.52</del> <sup>566.40</sup>	\$ 0	\$ 31.52	\$ <del>31.52</del> <sup>597.92</sup>
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
03/13/2010	\$ 31.52		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
Fliers			
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
Postal Connections 169 Boone Sq 9196440019 Hillsborough, NC 27278			
<b>3. Creditor Information</b> <input checked="" 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.	
Birkhead, Clarence 9194529511 515 Joyce Rd Hillsborough, NC 27278		<b>b. Description of Creditor</b> Candidate, Individual	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ <del>8247.81</del> <sup>597.92</sup>	\$ 0	\$ 8247.81	\$ <del>8247.81</del> <sup>8845.73</sup>
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
03/16/2010	\$ 8247.81		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
Signs & Posters			
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
Cuphart Marketing PO Box 669 9197329886 Hillsborough, NC 27278			
<b>4. Total only this Page</b> (This should be the sum of all item '3f' from this page)		\$ 8,279.33	
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)		\$ 10,280.58	

RECORDED  
DEC 16 2010  
Orange Co. Bd. of Elections

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Birkhead Sheriff		6HD094	
<b>3. Creditor Information</b> <input checked="" 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.	
Birkhead Clarence 919 452 9511 515 Joyce Rd Hillsborough, NC 27278		<b>b. Description of Creditor</b> Candidate, Individual	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 8845.73 <del>20.00</del>	\$ 0	\$ 20.00	\$ 8865.73 <del>20.00</del>
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
03/24/2010	\$ 20.00		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
Meal with Kent RANey			
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
Weaver Street Cafe 919-929-0010 101 E. MAIN ST Carrboro, NC 27510			
<b>3. Creditor Information</b> <input checked="" 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.	
Birkhead, Clarence 919 452 9511 515 Joyce Rd Hillsborough, NC 27278		<b>b. Description of Creditor</b> Candidate, Individual	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 15865.73 <del>15.90</del>	\$ 0	\$ 15.90	\$ 8881.63 <del>15.90</del>
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
03/26/2010	\$ 15.90		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
Fliers			
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
Fed Ex Kinko's 919-402-8160 5319 New Hope Commons Durham NC 27707			
<b>4. Total only this Page</b> (This should be the sum of all item '3f' from this page)			\$ 35.90
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)			\$ 10,280.58

Received  
DEC 16 2010  
Orange Co. Bd. of Elections

**Debts and Obligations Owed By the Committee** Pg 5 of 7 Amendment  Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Birkhead Sheriff		6HD094	
<b>3. Creditor Information</b> <input checked="" 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.	
Birkhead, Clarence 919 452 9511 505 Joyce Rd Hillsborough, NC 27278		<b>b. Description of Creditor</b> Candidate, Individual	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ <del>99.95</del> 8881.63	\$ 0	\$ 99.95	\$ <del>99.95</del> 8981.58
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
03/30/2010	\$ 99.95		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
Sign Post			
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
Home Depot 919-245-0132 625 Hampton Point Hillsborough, NC 27278			
<b>3. Creditor Information</b> <input checked="" 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.	
Birkhead, Clarence 919 452 9511 515 Joyce Rd Hillsborough, NC 27278		<b>b. Description of Creditor</b> Candidate, Individual	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ <del>44.00</del> 8981.58	\$ 0	\$ 44.00	\$ <del>44.00</del> 9025.58
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
04/06/2010	\$ 44.00		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
Postage			
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
Hillsborough Post Office Hillsborough, NC 27278 Hillsborough, NC 27278			
<b>4. Total only this Page</b> (This should be the sum of all item '3f' from this page)		\$ 143.95	
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)		\$ 10,280.58	

Received  
DEC 16 2010  
Orange Co. Bd. of Elections

**Debts and Obligations Owed By the Committee** Pg 6 of 7 Amendment  Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Birkhead Sheriff		6HD094	
<b>3. Creditor Information</b> <input checked="" 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.	
Birkhead, Clarence 919 452 9511 515 Joyce Rd Hillsborough, NC 27278		<b>b. Description of Creditor</b> Candidate, Individual	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ <del>447.99</del> 9025.58	\$ 0	\$ 447.99	\$ <del>447.99</del> 9473.57
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
04/09/2010	\$ 447.99		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
Fundraiser- Food/Supplies			
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
Costco 919 220 2770 1510 N. Pointe Dr Durham, NC 27705			
<b>3. Creditor Information</b> <input checked="" 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.	
Birkhead, Clarence 919 452 9511 515 Joyce Rd Hillsborough, NC 27278		<b>b. Description of Creditor</b> Candidate, Individual	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ <del>217.51</del> 9473.57	\$ 0	\$ 217.51	\$ <del>217.51</del> 9691.08
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
04/09/2010	\$ 217.51		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
Fundraiser Food/Supplies			
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
Kroger 919 220 5761 1502 N. Pointe Dr Durham, NC 27705			
<b>4. Total only this Page</b> (This should be the sum of all item '3f' from this page)		\$ 665.50	
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)		\$ 10,280.58	

Received  
DEC 15 2010  
Orange Co. Bd. of Elections

**Debts and Obligations Owed By the Committee** Pg 7 of 7 Amendment  Yes  No

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

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Birkhead Sheriff		6HD094	
<b>3. Creditor Information</b> <input checked="" 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.	
Birkhead, Clarence 919 452 9511 515 Joyce Rd Hillsborough, NC 27278		<b>b. Description of Creditor</b> Candidate, Individual	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ <del>2,500</del> 9691.08	\$ 0	\$ 2.50	\$ <del>2,500</del> 9693.58
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
04/13/2010	\$ 2.50		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
FAX			
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
Postal Connections 919 644 0019 169 Boone Sq Hillsborough, NC 27278			
<b>3. Creditor Information</b> <input checked="" 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.	
Birkhead, Clarence 919 452 9511 515 Joyce Rd Hillsborough, NC 27278		<b>b. Description of Creditor</b> Candidate, Individual	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ <del>5,877.00</del> 9693.58	\$ 0	\$ 587.00	\$ <del>5,877.00</del> 10,280.58
<b>g. Incurred Debts (what the committee received)</b>			
<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>	<b>g1. Date (mm/dd/yyyy)</b>	<b>g2. Amount</b>
04/14/2010	\$ 587.00		\$
<b>g3. Item Description</b>		<b>g3. Item Description</b>	
Advertising			
<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g4. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	
Independent 919 286 1972 PO Box 2690 Durham, NC 27715		Received DEC 16 2010	
<b>4. Total only this Page</b> (This should be the sum of all item '3f' from this page)		\$ 589.50	
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)		\$ 10,280.58	

Orange Co. Bd. of Elections