COPY I AS

## Disclosure Report Cover

Amendment

Yes No

Di core not a that this cover sheet cannot be i	ised toame nd co	nmittee information su	ch as the com	mittee address, treasurer,			
Pl ease not e that this cover sheet cannot be used toame nd committee information such as the committee address, treasurer, assistant treasurer, cust odi an of books information, or account information							
You must amend the Statement of Org	anization (CRO-2	2100A-E) to make the	ose kinds of	committee changes.			
Us e the Addendumform CRO-1010) if more entries are needed.							
1. Committee Information				TD Number			
a. Full Name			c.	HD Number			
Chark for Alde	man Co	ommittee		Date Filed			
b. Mailing Address (include City, State and Zip Code	<u> </u>		a	. Date Filed			
2815 Country Club Road 2-4-04 Winston-Salem, N.C. 27104 e. Phone Number							
Winston-Salem, NC	. 27104		e	. Phone Number			
				336-765-1777			
2. Report Year 3. Period Start Date (mm/dd/yyy)	() 4. Period End	Date (mm/dd/yyyy)	5. Treasurer Fu	ll Name			
7-01-03	12-3	1-03	Willia				
6. Type of Committee (Check one)	8. Type of Report	(check only one typ					
Candidate Campaign Party	Municipal	State/County		Referendum			
Joint Fundraiser PAC	Organizational	I	1:	Organizational Pre-referendum			
Referendum	Thirty-five day	1		Final			
7. Type of Fund (if applicable, check one)	Pre-primary	Seco	Plus	Supplemental Final			
Soft Money Account	Pre-election		d Plus	Annual			
"Booster Fund"	Pre-runoff Semi-annual	H Fou	- 1	Special S			
Building Fund	Mid Year	<b></b>	wal				
NC Political Party Financing Fund Presidential Election Year Candidates Fund	Year End	1	Year	9. Special Report Name			
NC Public Campaign Financing Fund	Final	, <del>-</del>	r End				
Other:	Special	Final		weeken			
Oute.	<b></b>	Special		.05			
10. Account Information		10. Account Infor					
a. Financial Institution Full Name		a. Financial Institution	Full Name	<u></u> υ			
Lexington State Ba	nk			56			
b. Purpose c. Code		b. Purpose		c. Code			
Campaign receipts LSB							
and expenses d. Period Be	gin Balance			d. Period Begin Balance			
	76.88	<u> </u>		S			
CERTIFICATION			· ·				
To a 45 that the Committee is in complian	nce with all provis	sions of Article 22A	, including tha	at no funds are commingled			
with funds for a federal or out-of-state PA	C. I further say t	hat this report is cor	mplete, true ar	nd correct.			
With Inner for a foreign of our of same 11		0.0.0/D	/)				
D1 + 0 01 . V	1/	JAH U	1/	2-4-04			
hobert C. Care		gnature of Appointed Tr	easurer	Date			
Printed Name of Signer Signature of Appointed Treasurer							
FOR OFFICE USE ONLY	ı	0 0	P. Da	elivery Method			
Date Received: 2-4-04	Emplo	oyee: Judy (	peas E	Normal Mail			
	T1	O V		Registered Mail			
Date Postmarked: Employee: Hand Delivered							
1	T 1	oyee:	L	Electronically Filed			

2 45

Amendment Yes

Committee Full Name (and Fund if applicable) 2	2. Type of Repo	ort	3. ID Number
Committee Full Manie (and Fund it appreciate)			
COPY TO NOW INCH SOME	20051	Total this	Total this
tart of Election Cycle: January 1, 2002		Reporting Perio	
4) Cash on Hand at Start		\$ 1376,88	\$ 1811.79
RECEIPTS	processor and share specialists than 1 years are a		00
	(CRO-1205)	<u>\$</u>	s 150.00
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)	<u> </u>	\$
(0) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
1) Other Receipt Sources	(CRO-1250)		
112) Interest on Bank Accounts	(CRO-1250)	\$ 2.29	\$ 9.67
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
12) "Goods and Services" Contributions	(CRO-1260)	\$	\$
13) TOTAL RECEIPTS		\$ 2.29	\$ 159.67
(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)		·	1~ (.
<u>EXPENDITURES</u>			
14) Disbursements	(CRO-1310)		5 5 7 29
14a) Operating Expenditures	(CRO-1310)	-	3 36 1
14b) Contributions to Candidates/Political Committee		i	3.75.
14c) Coordinated Party Expenditures	(CRO-1310)		\$
15) Loan Repayments	(CRO-1420)		\$
16) Refunds/Reimbursements From the Committee	(CRO-1320)		\$
17) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES		\$ 350.0	0 \$ 942.29
(Add lines 14a, 14b, 14c, 15, 16, and 17)		<del>_</del>	7 \$ 102917
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ 1029.1	7   \$ 1029.17
ADDITIONAL INFORMATION	water and the second se		
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	» s	
21) Out s taning Loans (incl. ones fromot her campai gns)	(CRO-1430	9) \$	هد وارتفد است دران دو او دران او دران دو او دران و دران دو او دران دو او دران دو دران
22) Debts and Obligations owed By the Committee	(CRO-1610	o) \$	And the second s
23) Debts and Obligations owed To the Committee	(CRO-1626	0) \$	and the second of the second o
24) Account Transfers Within the Committee	(CRO-1720	0) \$	
25) Administrative Support	(CRO-171)	(O) \$	\$
26) Forgiven Loans	(CRO-144)	(0) \$	\$
27) 48-Hour Notice Reports Sum	THE PERSON OF PROPERTY AND ADDRESS OF THE PERSON OF THE PE	\$	S
27) 48-mour nonce reports out	Board of Election	ons	March 2

Other Receipt Sources	Pg 3 of 5 Amendment No
1. Committee Full Name (and Fund if applicable)	2. ID Number

1. Committee Full	Name (and Fund if applicable	₽)				2. II	) Number
Clark for Alderman Committee							
3. Type of Receipt Source (Please use separate CRO-1250 forms for each type of Receipt Source.)							
Interest		tions from Not-for-Profit	Organizati	ons	Outside S	ource	s of Income
4. Contributor			Add	Ren	nove		
	ing Address & Phone		b. Not-fo	r-Profit F	ederal ID #	d. C	omments
(include city, sta	te, & zip)						
Lexington State Bank c. Outside Source Explan						-	
161 S.	Stratford R	load				e E	ection Cycle Sum to Date
Winston	-Salem, M	27104				\$	9.67
f. Account Code	g. Form of Payment	h. In-Kind Description	· ·		i. Date (mm/dd/yyy	ry)	j. Amount
LSBI	Draft			•	12-31-03	3	\$ 2.29
							\$
4. Contributor	Information		Add	Ren	nove		
a. Full Name, Mail	ing Address & Phone		b. Not-fo	r-Profit F	ederal ID #	d. C	omments
(include city, sta							
						]	
			c. Outsid	le Source	Explanation	]	
			]			L	
					e. Election Cycle Sum to Date		
						\$	
f. Account Code	g. Form of Payment	h. In-Kind Description	<u> </u>		i. Date (mm/dd/yyy		: 4—t
i. Account Code	д. гогш од гнумена	n, in-Kina Description			I. Date (min/do/yy)	( <del>y</del> )	j. Amount
							\$
							\$
4. Contributor	Information		Add	☐ Ren	nove		
a. Fuli Name, Mail	ing Address & Phone		b. Not-fo	r-Profit F	ederal ID #	d. C	omments
(include city, sta	te, & zip)		]				
			c. Outsid	le Source	Explanation	1	
							action Crude Same to Date
						e. El	ection Cycle Sum to Date
		· · · · · · · · · · · · · · · · · · ·				\$	
f. Account Code	g. Form of Payment	h. In-Kind Description			i. Date (mm/dd/yyy	/y)	j. Amount
							\$
			-				\$
5. Total only this Page					\$	2.29	
6. Total of A	LL CRO-1250 Page	es ————					-
(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest) (This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)					\$	2.29	
	(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)						
CRO-1250 NC State Board of Elections March 2003							

\* Interest Paides follows?
7-30-03 \$
8-29-03
9-30-03

\$.45

10-30-03 11-28-03

**5**.34

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12-30-03

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Disbursem	ents		Pg	<u>4</u> of <u>5</u>	ĺ	Amendment Yes No	
1. Committee Full !	Name (and Fund if applicable	)			2. ID	Number	
Clark	for Alderm		ttee				
3. Type of Disbu		parate CRO-1310 forms	for each type of Disb				
Operating Expe	nses Contribut	ions to Candidates/Politic	al Committees	Coordinate	ed Par	ty Expenditures	
4. Payee Inform	nation		Add Rem	nove			
a. Full Name, Maili	ng Address & Phone		b. Coordinated Co	mmittee Name	d. Co	mments	
(include city, stat	e, & zip)						
Children	s Meseum of V	Viu-Salem	c. Level Registered	(Specify)			
301 S. L	iberty St.		Federal County:			office Couls Supply to Date	
Winston-	Salem, N.C. =	27101	State Municipality: e. Election Cycle Sum to				
			<u> </u>		\$ 300.00		
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yyy	y)	j. Amount	
LSBI	Check	Dinner		8-29-03	3	\$ 300.00	
						\$	
4. Payee Inforn	ation		Add Ren	nove			
	ing Address & Phone		b. Coordinated Co	mmittee Name	d. Co	mments	
(include city, stat	te, & zip)						
			c. Level Registered				
			Federal	County:			
			State	Municipality:	e. Election Cycle Sum to Date		
		_			\$		
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yyy	y)	j. Amount	
						\$	
						\$	
4. Payee Inform	nation		Add 🔲 Rer	nove			
a. Full Name, Mail	ing Address & Phone		b. Coordinated Co	mmittee Name	d. C	omments	
(include city, sta	te, & zip)						
			c. Level Registere	d (Specify)		· · · · · · · · · · · · · · · · · · ·	
			Federal State	County:  Municipality:	e. El	ection Cycle Sum to Date	
					\$		
f. Account Code	g. Form of Payment	h. Purpose	<u>l</u>	i. Date (mm/dd/yy)	) (yy)	j. Amount	
						\$	
						\$	
5. Total only	this Page				\$	300.00	
6. Total of ALL CRO-1310 Pages					1		
(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)  (This line goes in line 14h of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)					\$	300.00 350.00	

(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)

## **Disbursements**

				Amendment	
Pg	<u>5</u>	of	5_	Yes	☐ No

1. Committee Full Name (and Fund if applicable)					2. ID Number		
Clark for Alderman Committee							
3. Type of Disbu		parate CRO-1310 forms	for each type of Dish	ursement.)			
Operating Expe		ions to Candidates/Politic	al Committees	Coordinate	d Par	ty Expenditures	
4. Payee Inform	ation		Add Rem	iove			
	ng Address & Phone		b. Coordinated Co	mmittee Name	d. Co	mments	
(include city, stat							
	ounty Republi overdale Ave. -Salem, N.C.	can Party	c. Level Registered	(Specify) County:			
9-110 CC	vordale Ave.		State	Municipality:	e. Ele	ction Cycle Sum to Date	
Winston	- Salem, N.C.	27103			\$	375.80	
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yyy	y) j	. Amount	
4SB)	Check	Dinner		9-5-0	3	\$ 50. <sup>88</sup>	
-001						\$	
4. Payee Inforn	ration		Add Ren	nove			
	ing Address & Phone		b. Coordinated Co	mmittee Name	d. Co	mments	
(include city, stat	•						
(include city, state	е, се дру	<del></del>	1				
			c. Level Registered	(Specify)	i		
			Federal	County:			
			State		e. Ele	ection Cycle Sum to Date	
		•	State				
					\$		
	L. E of Dormont	h. Purpose	<u>!</u>	i. Date (mm/dd/yyy	(v)	j, Amount	
f. Account Code	g. Form of Payment	n. rurpose		22.0 (	<del>"</del>	-	
,	1					\$	
						\$	
4. Payee Inform	nation	<u> </u>	Add Re	nove			
	ing Address & Phone		b. Coordinated Co	ommittee Name	e d. Comments		
(include city, sta	-						
(include city, sta	ш, ш шр)		1		ŀ		
	•		c. Level Registere	d (Specify)	1	!	
			Federal	County:	1		
			State	Municipality:	e. El	ection Cycle Sum to Date	
					\$		
f. Account Code	g. Form of Payment	h. Purpose		i. Date (mm/dd/yy	уу)	j. Amount	
						\$	
						\$	
5. Total only	this Page	<u> </u>			\$	50,20	
6. Total of ALL CRO-1310 Pages							
(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)  \$ 350.00					50.00 350.00		
(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Cumulaties I office Commit							
(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							