

# Disclosure Report Cover

# COPY

Amendment

☐ Yes ☒ No

Please note that this cover sheet 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 those kinds of committee changes.  
 Use the Addendum form (CRO-1010) if more entries are needed.

## I. Committee Information

a. Full Name	c. ID Number
Clark for Alderman Committee	
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
2815 Country Club Road	8-22-05
Winston-Salem, NC 27104	e. Phone Number
	336-765-1777

2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Treasurer Full Name
2005	7-1-05	8-22-05	William L. Orr

6. Type of Committee (Check one)		8. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Municipal	<input type="checkbox"/> State/County	<input type="checkbox"/> Referendum
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum		<input checked="" type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final
<input type="checkbox"/> Soft Money Account		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	9. Special Report Name
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
<input type="checkbox"/> Other:		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

10. Account Information		10. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
Lexington State Bank			
b. Purpose	c. Code	b. Purpose	c. Code
checking account	LSB1		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 17,418.25		\$

## CERTIFICATION

I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.

Robert C. Clark  
 Printed Name of Signer

[Signature]  
 Signature of Appointed Treasurer

8-22-05  
 Date

## FOR OFFICE USE ONLY

Date Received: 8-22-05 Employee: Judy Spears  
 Date Postmarked: \_\_\_\_\_ Employee: \_\_\_\_\_  
 Date Scanned: 8-23-05 3:43 PM Employee: Judy Spears

## Delivery Method

☐ Normal Mail  
☐ Registered Mail  
☒ Hand Delivered  
☐ Electronically Filed

CRO-1000

NC State Board of Elections

March 2003

# Detailed Summary

Amendment

☐ Yes

☒ No

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Clark for Alderman Com.		35 Day			
Start of Election Cycle: January 1, 2002		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 17,418.25		\$ 1811.79	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 1,000.00		\$ 6,380.00	
6) Contributions from Individuals (CRO-1210)		\$ 250.00		\$ 13,500.00	
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 (CRO-1250)					
11a) Interest on Bank Accounts (CRO-1250)		\$ 9.45		\$ 27.27	
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 (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)		\$ 1,259.45		\$ 19,907.27	
<b>EXPENDITURES</b>					
14) Disbursements (CRO-1310)					
14a) Operating Expenditures (CRO-1310)		\$ 5.00		\$ 2,021.36	
14b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
14c) Coordinated Party Expenditures (CRO-1310)		\$		\$ 1,025.00	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)		\$ 5.00		\$ 3046.36	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)		\$ 18,672.70		\$ 18,672.70	
<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)		\$			
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		\$		\$	

# Aggregated Contributions from Individuals

Page 1 of 1

Amendment  
☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable) <u>Clark for Alderman Committee</u>					2. ID Number	
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add	<u>LSB1</u>	<u>Check</u>		<u>07/15/05</u>	\$ <u>50.00</u>	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	<u>LSB1</u>	<u>Check</u>		<u>07/15/05</u>	\$ <u>50.00</u>	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	<u>LSB1</u>	<u>Check</u>		<u>07/15/05</u>	\$ <u>50.00</u>	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	<u>LSB1</u>	<u>Check</u>		<u>07/15/05</u>	\$ <u>50.00</u>	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	<u>LSB1</u>	<u>Check</u>		<u>07/15/05</u>	\$ <u>100.00</u>	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	<u>LSB1</u>	<u>Check</u>		<u>07/28/05</u>	\$ <u>100.00</u>	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	<u>LSB1</u>	<u>Check</u>		<u>08/05/05</u>	\$ <u>100.00</u>	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	<u>LSB1</u>	<u>Check</u>		<u>08/05/05</u>	\$ <u>100.00</u>	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	<u>LSB1</u>	<u>Check</u>		<u>08/05/05</u>	\$ <u>100.00</u>	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	<u>LSB1</u>	<u>Check</u>		<u>08/05/05</u>	\$ <u>50.00</u>	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	<u>LSB1</u>	<u>Check</u>		<u>08/22/05</u>	\$ <u>100.00</u>	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	<u>LSB1</u>	<u>Check</u>		<u>08/22/05</u>	\$ <u>50.00</u>	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	<u>LSB1</u>	<u>Check</u>		<u>08/17/05</u>	\$ <u>100.00</u>	
<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					\$	
<input type="checkbox"/> Add					\$	
<input type="checkbox"/> Remove					\$	
4. Total only this Page					\$ <u>1000.00</u>	
5. Total of ALL CRO-1205 Pages					\$ <u>1000.00</u>	
(This line must be on line 5 of Detailed Summary Page CRO-1100)						

## Contributions from Individuals

Pg 1 of 1

Amendment

☐ Yes☒ No

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Clark for Alderman Committee						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
John A. Cocklorece 2308 Robinhood Road Winston-Salem, NC 27104			ATTORNEY			
			c. Employer's Name/Specific Field			
			BELL, Davis, + Pitt		e. Election Cycle Sum to Date	
					\$ 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"/>	LSBI	Check		7/28/05	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Cycle Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Cycle Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 250.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 250.00	

## Other Receipt Sources

Pg 1 of 1

Amendment  
☐ Yes ☒ No

1. Committee Full Name (and Fund if applicable) <b>Clark for Alderman Committee</b>				2. ID Number	
3. Type of Receipt Source <i>(Please use separate CRO-1250 forms for each type of Receipt Source.)</i> <input checked="" type="checkbox"/> Interest <input type="checkbox"/> Contributions from Not-for-Profit Organizations <input type="checkbox"/> Outside Sources of Income					
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Not-for-Profit Federal ID #		d. Comments	
Lexington State Bank 161 S. Stratford Road Winston-Salem, NC 27104		c. Outside Source Explanation		e. Election Cycle Sum to Date	
				\$ 27.27	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
LSB1	Draft		7/30/05	\$ 9.45	
				\$	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Not-for-Profit Federal ID #		d. Comments	
		c. Outside Source Explanation		e. Election Cycle Sum to Date	
				\$	
f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
4. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Not-for-Profit Federal ID #		d. Comments	
		c. Outside Source Explanation		e. Election Cycle 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				\$ 9.45	
6. Total of ALL CRO-1250 Pages <i>(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)</i> <i>(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution)</i> <i>(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)</i>				\$ 9.45	

# Disbursements

Pg 1 of 1

Amendment

☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable) <b>Clark for Alderman Committee</b>				2. ID Number	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Forsyth County Board of Election 201 N. Chestnut St. Winston-Salem, NC 27101		c. Level Registered (Specify)		e. Election Cycle Sum to Date \$ 5.00	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
LSB01	check	filings fee	7-1-05	\$ 5.00	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify)		e. Election Cycle Sum to Date \$	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify)		e. Election Cycle Sum to Date \$	
		<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
5. Total only this Page				\$ 5.00	
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>				\$ 5.00	

**CAMPAIGN REPORT DISCREPANCIES  
REPLY REQUIRED**

TO:           Treasurer     Robert C. Clark  
              Committee    Clark for Alderman Committee  
              Address      2815 Country Club Road  
                              Winston-Salem, NC 27104

FROM:       Campaign Finance Office

REPORT IN QUESTION:  
35-Day Report

DATE:       08/23/2005

A recent preliminary audit of reports filed revealed the following discrepancies. Please supply this office with the missing or corrected information in order to complete the reports. A more detailed audit of the reports listed will be conducted after the following information is provided.

This is your first notice. You must respond within thirty days of receipt of this notice.

Failure to respond will result in noncompliance. In order to comply with the required information, the forms to amend are provided for completion. Amend only the forms required.

- ☐ The depository information was not listed on the Political Committee Disclosure Report.
- ☐ Addresses were either missing or incomplete. Contributions received without the contributor's complete name and mailing address that remain incomplete for forty-five (45) days are considered anonymous and must be paid over to the State Board of Elections for deposit to the general fund of the State. All disbursements must be listed by name and complete mailing address of the payee.
- ☐ Joint contributions, which are prohibited, were listed on the Report of Contributions. You must determine the individual amount of contribution for each contributor.
- ☐ Some or no dates were shown on the reports. A date is required for each entry.
- ☐ Details were not provided for the sums listed on the Detailed Summary Page
- ☐ Method of payment not provided
- ☐ Contributions over \$100 are listed with "cash" being the method of payment.
- ☐ Contributions over \$100 are listed as "aggregated individual contribution" (AIC).
- ☐ The ending balance is negative. The Committee cannot operate on a negative balance.

- ☐ Some of the occupation information was incomplete or incorrect on the Itemized Receipts page(s).

Name of contributor(s):


- ☐ A contribution from a business entity/non-registered committee was listed. The contribution must be paid to the Civil Penalty and Forfeiture Fund and reported as a disbursement on the next report.
- ☐ The purpose of expenditure was not listed on the Itemized Disbursements page.
- ☐ Disbursements for media expenses are paid with cash.
- ☐ Disbursements over \$50 that are not for postage are paid with cash.
- ☐ "Sum to date" information not provided.
- ☐ We are in receipt of a Final Report, but are unable to close the Committee because there is a remaining balance of \$\_\_\_\_\_.
- ☐ No matching "In Kind" entry. "InKind" contributions must be disclosed in the Itemized Receipts and Disbursements pages. You will also need to amend your "Detailed Summary Page" to reflect these changes.
- ☐ Contributions from the following contributors exceed the \$4,000 per election limit:

\_\_\_\_\_ on \_\_\_\_\_

\_\_\_\_\_ on \_\_\_\_\_

\_\_\_\_\_ on \_\_\_\_\_

\_\_\_\_\_ on \_\_\_\_\_

The contribution amount exceeding \$4,000 must be returned to the contributor, a copy of the refund check sent to this office, and the refund reported on the next scheduled report. If the contributor is the spouse, sibling, or parent of the candidate, please advise in writing.

- ☒ OTHER CRO-1000 - Report Period dates should be 7/1/2005 to 8/16/2005 as set out in the reporting schedule. CRO-1205 - last three entries should be removed and reported in the Pre-Primary report; computations would change on the CRO-1100. The Pre-Primary report is due on 9/19/2005 with period dates 8/17/2005 to 9/12/2005. Thank you for an amendment as soon as possible.

Please send your reply to : Judy J. Speas 201 N. Chestnut St. Winston-Salem, NC 27101

If you have any questions please refer to the Campaign Finance section on the SBOE website, [www.sboe.state.nc.us](http://www.sboe.state.nc.us), or call (919)733-7173.

FOR THE CAMPAIGN FINANCE OFFICE:

ICR-001