Disclosure Report Cover



No 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

1. Committee Infor	mation		a second the second		
a. Full Name					c. ID Number
Clark for Alderman	Committee		<u> </u>		HCQ681
	ude City, State and Zip Code)				d. Date Filed
2815 Country Club Winston-Salem, NC					10-20-09
					e. Phone Number
					336-765-1777
2. Report Year	3. Period Start Date (mm/	ld/yy) 4. Period (mm/dd/yy	End Date	5 Treasurer R	ullName
2009	09/02/09		/19/09	Robert C Clark	c
6. Type of Committe	ee (Check One)	9. Type of Repor	check on	ly one type of rep	ort from one category)
Candidate Campaign	Party	Municipal	State/C	승규는 이 가는 지수가 가지? 사람을 많으면	Referendum
Joint Fundraiser	PAC	Organizationa		Organizational	Organizational
Referendum	Legal Expense Fund	Thirty-five da	y I m	Quarterly	Pre-referendum
"Booster Fund"	(Jupplicable check one)	Pre-primary Pre-election		First	Final
Building Fund		Pre-runoff		Second Third	Supplemental Final
	on Year Candidates Fund	Semi-annual		Fourth	Special
<u> </u>	ign Financing Fund	Mid Yea	r	Semi-annual	
Other:		Year End		Mid Year	10. Special Report Name
8. Number of Fundr	oisamethic Donort	Final Second	닏,	Year End	
Southern of a winder	AISCIS LIIS ACHUIT	Special		Final	
	0			Special	
11-Account Informa a. Financial Institution Fu		<u></u>	11: Account 1		
NewBridge Bank	414 1 1 8 11 C		a. Financial Inst	tution Full Name	<u>e</u>
b. Purpose	c. Account Code		b. Parpose		c. Account Code
checking account	NBB	C1	na se anna ann an	<u>ing an a bha an 18 an 18 an 18 an 1</u>	k po l'ino
	d. Period Begin Balance				d. Period Begin Balance
	\$ 12,841.12				s
CERTIFICATION					8
NC General Statutes a	nittee or Fund is in complia nd that no funds are commi- rect and that I have been tra	ingled with prohibite	ed ox other non-	disclosed fands. I	B, & 22D-22M of Chapter 163 if the further certify that this report is $O_{10} = O_{10} = O_$
Robert C Cla	rk	D(, fat U	A	10-20-09
	Printed Name of Signer	Si	gnature of Appointe	d Treasurer	Date
FOR OFFICE USE (DNLY				
Date Received:	<u>10-22-09</u>	Employée:	Jup	y Spias	Delivery Method Delivery Method Image: Normal Mail
Date Postmarked:		Employee:			Registered Mail
Date Scanned:		Employee:			Electronically Filed Signer has not received
Date Data Entered	1 1	Employee:			mandatory training
Please Note: This	form cannot be used to am	end committee info	mation such as	the committee ad	ldress, treasurer, assistant treasurer,

custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary Use this form to summarize all disclosure reporting forms and to total monetary information.

Amendment Yes 🔀

No	

12150mmittee Full Name (and Kund if applicable)	2. Type of Report		D Number	
Clark for Alderman Committee	1	HCQ681		
Start of Election Cycle: January 1,	2006	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$ 12841.12	\$ 17,805.93	
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$	
6) Contributions from Individuals	(CRO-1210)	\$	\$	
7) Contributions from Political Party Committees	(CRO-1220)	\$	s	
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$	
9) Loan Proceeds	(CRQ-1410)	\$	\$	
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$	
11) Other Receipt Sources				
11a) Interest on Bank Accounts	(CRO-1250)	\$.35	\$ 1452.49	
11b) Contributions from Not-for-Profit Organizatio	ns <i>(CRO-1250</i>)	\$	\$	
11c) Outside Sources of Income	(CRQ-1250)	\$	\$	
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c	and IId)	\$.35	\$ 1452.49	
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$ 110.00	\$ 4921.95	
13b) Contributions to Candidates/Political Committee	ees (CRO-1310)	\$	\$ 650.00	
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 50.00	\$ 1005.00	
14) Aggregated Non-Media Expenditures	(CRO-1315)	§	Ş	
15) Loan Repayments	(CRO-1420)	\$	\$	
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$	
17) In-Kind Contributions	(CRQ-1510)	\$	\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15,		\$ 160.00	\$ 6576.95	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtra	act line 18)	\$ 12,681.47	\$ 12,681.47	
20) Non-Monetary Gifts Given to Other Committees	(770 1220)	<u>م</u>		
21) Outstanding Loans (incl. ones from other campaigns		\$		
22) Debts and Obligations owed By the Committee		\$		
23) Debts and Obligations owed By the Committee 23) Debts and Obligations owed To the Committee		\$	-	
24) Account Transfers Within the Committee		\$		
25) Administrative Support		<u>\$</u>	¢	
26) Forgivên Loans		\$	\$	
27) 48-Hour Notice Reports Sum	. ⊢	\$ \$	\$	
7) Contributions to be refunded	· · ·	· · · · · · · · · · · · · · · · · · ·	\$	
	(CRO-1215)	\$	\$	

Other De	noint Common					1	Amendmen	t		
	ceipt Sources	attad on another forms in its	Pg	1	of	1	Ye Ye	\$	\boxtimes	No
1 Committee	Full Name (and Kund)	orted on another form. i.e. interes	t incom	e, not	for profit co				-	
Clark for Alde	erman Committee	Tappicable)				21	DNumbe H	r ICQ68	<u>s</u> 1	
3. Type of Re	eipt Source	en (Please use separate CRO)1/	250 607	ns for	anch topad	100	2			
Interest		Contributions from Not-for-	Profit Org	anizati	ons		utside Sourc		ome	<u></u>
	r Information 3.	A SAdd			Ren	and the second second				
a. Full Name, Ma (include city, st	iling Address & Phone		b. Not-	for-Pr	ofit Federal II)#	d. Com	aents		NATIONAL SEC
NewBridge Ba										
161 S Stratfor			c. Qutside Source Explanation							
Winston-Saler	n, NC 27104		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1				5- 			
			1				e. Electio	on Sum 1	to Date	
							\$ 1	452	49	
f. Account Code	g. Form of Payment	h. In-Kind Description		i. D	ate (mm/dd/y	vvv)	j. Amour		an Qura	elg Maring
NBBC1	draft					531			<u>. .</u>	<u> - 12 - 12 - 12 - 12 - 12 - 12 - 12 - 1</u>
					08/30/09		ļ	\$.35		
								\$		
4. Contributor		Aud Market	.		Remo	ive				
	ing Address & Phone		b. Not-f	or-Pro	fit Federal ID	6 - C - C - C - C - C - C - C - C - C -	d. Comm	ents		
(include city, sta	ue, « zp)									
			c. Ontsi	de Son	rce Explanatio	m	ł			
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							c. Election	n Sum to	Date	
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f. Account Code	g. Form of Payment	h. In-Kind Description		i. Da	te (mm/dd/yy	vv)	j. Amount	1. a. C. S.		N345-7
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42Contributor	and the second				 Reno	ve				
a. Full Name, Maili (include city, stat	ng Address & Phone		b. Not-fo	r-Prof	it Federal ID (#	d. Comme	nts		
(Include City, Star	ς, « μp)					ĺ				1
			c. Outsid	e Sour	ce Explanatio					
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Disbursements

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Amendment Yes

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Pg of <u>2</u> Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures

	Full Name (and Fu	nduli applicable)		a se	2: ID Number
	rman Committee				
Operating		Contributions to Ca	RO-1310 forms for each t ndidates/Political Committees		cent.) ordinated Party Expenditures
4. Pavee Infor			Add		ordinated Party Experiantires
a second and a second	lling Address & Phone		b. Coordinated Committee N	and the second se	d. Comments
(include city, state	<u>, & zip)</u>				
Senior Service					
2895 Shorefair			c. Level Registered (Specify)		
Winston-Salen	a, NC 27106		Federal	County:	
			State 🖄	Municipality:	e. Election Sum to Date
					\$ 216.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
NBBC1	check	0	09-15-09	\$110.00	
					contribution
				\$	
d Payee Infor	nation		Addies	Remove	
a. Full Name, Mail	ing Address & Phone		b. Coordinated Committee Na		d. Comments
(include city, state,	. <u>& zip)</u>				
				· · · · · · · · · · · · · · · · · · ·	
			c. Level Registered (Specify)		
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					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	L. Required Remarks
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				\$	
As Bay a dinio m	nation - Coast Street		-Add	Remove	
a. Full Name, Maili	ing Address & Phone	Chip a Dan Station and	b. Coordinated Committee Na		d. Comments
(include city, state,	& zip)			<u></u>	
		-	c. Level Registered (Specify)		
			State	County: Municipality:	c. Election Sum to Date
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	line 13a of Detailed Sum				\$ 160.00
			if Contrib to Candidates/Politica if Coordinated Party Expenditur		+ 100,00
	Sectors for the states			esy	
A* - Media	B* - Printing	C* - Func		D - To Anoth	er Candidate
E - Salaries	F* - Equipmen			المربب الوالمريين والمحاصرة المراجع والارداء والمرداء والرواب أتشاعه أ	Public Office Expenses
- Postage	J - Penalties	K* - Offic	e Expenses	O* - Other	a a che anale e constante en l'alla de la constante de la constante de la constante de la constante de la const
acoutes require	<u>kienikisamini</u>	onsin-required re	marks field (k)		

Disbursements

<u>1</u>

Amendment Yes

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No

Pg \Box of <u>2</u> Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures

	Full Name (and Fu rman Committee	nd if applicable)			2: ID Number
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Operating	Expenses	Contributions to Ca	ndidates/Political Committees		ordinated Party Expenditures
4. Payee Infor		\mathbb{N}	Add		ordinated 1 arty Experiments
	ling Address & Phone		b. Coordinated Committee N	a service and the second of the second s	
(include city, state	문제 의견에서 위한 것 같은 것 같은 것 같은 것 같이 같이 했다.		D. Coordinated Committee I	(amc	d. Comments
Forsyth Repub					
2110 Cloverda	•				ł
Winston-Salen			c. Level Registered (Specify)	•	
w inston-Salen	a, NC 2/103		Federal	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 1425.00
		L D			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
NBBC1	check	0	09-15-09	\$50.00	Candidates
					dinner
				s	
4: Payee Inform			Add	Remove	
	ling Address & Phone		b. Coordinated Committee N	аше	d. Comments
(include city, state	, & zīp)				
			c. Level Registered (Specify)		
			Federal	County:	
			State	Municipality:	e. Election Sum to Date
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4 Pavee Inform	ation 2		Add	Remove	
	ing Address & Phone		b. Coordinated Committee N		d. Comments
include city, state,					G. COMMENS
	<u>чч дру</u>				
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-				\$	· · ·
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	line 13a of Detailed Sum			i i i i i i i i i i i i i i i i i i i	\$ 160.00
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			if Coordinated Party Expenditu	res)	
	s (Dist defauled exp				
* - Media	B* - Printing	C* - Fun		D - To Anoth	The second se
E - Salaries	F* - Equipmen			H* - Holding	Public Office Expenses
- Postage	J - Penalties	K* - Offi	ce Expenses	O* - Other	a da sera da se
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