

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
Clarke for Congress

ADDRESS (number and street) 11136 200th Street
 Check if different than previously reported. (ACC) Hollis NY 11412

2. **FEC IDENTIFICATION NUMBER** C C00415331 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
NY 11

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 06 / 24 / 2014 in the State of NY
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 04 / 01 / 2014 through 06 / 04 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Ray L. Trotman
Signature of Treasurer Ray L. Trotman *[Electronically Filed]* Date 06 / 12 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Clarke for Congress

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	28105.00	412745.50
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	28105.00	412745.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	39098.03	325503.93
(b) Total Offsets to Operating Expenditures (from Line 14).....	100.00	2301.89
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	38998.03	323202.04
8. Cash on Hand at Close of Reporting Period (from Line 27).....	86632.50	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	13500.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Clarke for Congress

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3675.00	136440.00
(ii) Unitemized	1680.00	39155.50
(iii) TOTAL of contributions from individuals	5355.00	171745.50
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	22750.00	241000.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	28105.00	412745.50
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	100.00	2301.89
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	28205.00	415047.39

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	39098.03	325503.93
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	12500.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	2000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	39098.03	340003.93

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	97525.53
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	28205.00
25. SUBTOTAL (add Line 23 and Line 24).....	125730.53
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	39098.03
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	86632.50

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 33
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Clarke for Congress

A. Full Name (Last, First, Middle Initial)
Barbara Austin-Lucas

Mailing Address 2152 Ralph Ave

City State Zip Code
Brooklyn NY 11234-5406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Alliance Theological Seminary Minister/Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
950.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 30 2014

Transaction ID : C9886885

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Isiris Isela Isaac

Mailing Address 2917 Fort Hamilton Pkwy

City State Zip Code
Brooklyn NY 11218-1605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NYS Courts Court Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 28 2014

Transaction ID : C9884771

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Kidert N. Jean-Mary

Mailing Address 122 York Ave

City State Zip Code
Staten Island NY 10301-1330

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
retired retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 30 2014

Transaction ID : C9886918

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Clarke for Congress

A. Full Name (Last, First, Middle Initial)
Jean Joseph

Mailing Address 1208 E 49th St

City State Zip Code
Brooklyn NY 11234-1513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Joseph Tax and Consulting Services CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
690.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : C9886920

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Yolande T Nicholson Esq.

Mailing Address 125 Court St

City State Zip Code
Brooklyn NY 11201-5663

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 02 / 2014

Transaction ID : C9711228

Amount of Each Receipt this Period
900.00

C. Full Name (Last, First, Middle Initial)
Lucia J. Nixon

Mailing Address 199-02 111th Avenue

City State Zip Code
St. Albans NY 11412

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Schulman & Schachne Institute Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : C9886926

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Clarke for Congress

A. Full Name (Last, First, Middle Initial)
Kimberly Peeler-Allen

Mailing Address 521 Decatur Street
Apt. 4

City State Zip Code
Brooklyn NY 11233

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Peeler Allen Consulting, LLC Fundraiser

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 01 / 2014

Transaction ID : C9664835

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Desmond Anthony West

Mailing Address 839 Troy Ave

City State Zip Code
BROOKLYN NY 11203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROYAL ROSE TRANSPORTATION ENTREPRENEUR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 19 / 2014

Transaction ID : C9872132

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Working Families Party - Federal Account

Mailing Address 2 Nevins St 3rd. floor

City State Zip Code
Brooklyn NY 11217-1010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1575.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 11 / 2014

Transaction ID : C9900280

Amount of Each Receipt this Period
1575.00

* In-Kind: Paid Petition Workers

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1925.00

3675.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 33
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Clarke for Congress

A. Full Name (Last, First, Middle Initial)
AFGE Political Action Committee

Mailing Address 80 F St NW
attn:Derrick Thomas, National Vice

City Washington State DC Zip Code 20001-1528

FEC ID number of contributing federal political committee. **C C00009936**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2014

Transaction ID : C9872220

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
American Academy of Pediatric Dentistry PAC

Mailing Address 211 E Chicago Ave
Treasurer: John S. Rutkauskas

City Chicago State IL Zip Code 60611-2637

FEC ID number of contributing federal political committee. **C C00365965**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : C9711206

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
Citigroup

Mailing Address 1101 Pennsylvania Ave NW
Ste 1000

City Washington State DC Zip Code 20004-2524

FEC ID number of contributing federal political committee. **C C00008474**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2014

Transaction ID : C9703229

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 33
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Clarke for Congress

A. Full Name (Last, First, Middle Initial)
DRIVE Committee

Mailing Address 25 Louisiana Ave NW

City Washington State DC Zip Code 20001-2130

FEC ID number of contributing federal political committee. **C C00032979**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : C9696975

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17th St NW
Attn: Christopher Hanley, Treasur

City Washington State DC Zip Code 20036-4709

FEC ID number of contributing federal political committee. **C C70001037**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 12 / 2014

Transaction ID : C9887035

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
MOTOROLA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 1455 Pennsylvania Ave NW
Ste 900

City Washington State DC Zip Code 20004-1016

FEC ID number of contributing federal political committee. **C C00075341**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 07 / 2014

Transaction ID : C9672605

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 33
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Clarke for Congress

A. Full Name (Last, First, Middle Initial)
New York Life Political Action Committee

Mailing Address 51 Madison Ave

City State Zip Code
New York NY 10010-1603

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 30 / 2014

Transaction ID : C9887027

Amount of Each Receipt this Period
4000.00

B. Full Name (Last, First, Middle Initial)
PricewaterhouseCoopers PAC

Mailing Address 1301 K St NW
att: Roslyn Sullivan Brooks

City State Zip Code
Washington DC 20005-3317

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : C9703228

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Raytheon Political Action Committee

Mailing Address 1100 Wilson Blvd
Ste 1500

City State Zip Code
Arlington VA 22209-3900

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 16 / 2014

Transaction ID : C9887491

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 33
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Clarke for Congress

A. Full Name (Last, First, Middle Initial)
Raytheon Political Action Committee

Mailing Address 1100 Wilson Blvd
Ste 1500

City State Zip Code
Arlington VA 22209-3900

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 16 / 2014

Transaction ID : C9887018

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Retail Wholesale & Dept. Store Union COPE

Mailing Address 30 E 29th St
attn: Stuart Appelbaum, Treasurer

City State Zip Code
New York NY 10016-7925

FEC ID number of contributing federal political committee. **C C00174011**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 28 / 2014

Transaction ID : C9709467

Amount of Each Receipt this Period
750.00

C. Full Name (Last, First, Middle Initial)
Treasury Employees Political Action Committee

Mailing Address 1750 H St NW

City State Zip Code
Washington DC 20006-4600

FEC ID number of contributing federal political committee. **C C00107128**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : C9887037

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4250.00

22750.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 33			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 20002 N 19th Ave # A-17		Amount of Each Disbursement this Period 7.95 Transaction ID : D527515
City Phoenix State AZ Zip Code 85027-4250	Purpose of Disbursement Credit Card Processing Fees 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 20002 N 19th Ave # A-17		Amount of Each Disbursement this Period 26.00 Transaction ID : D527516
City Phoenix State AZ Zip Code 85027-4250	Purpose of Disbursement Credit Card Processing Fees 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 20002 N 19th Ave # A-17		Amount of Each Disbursement this Period 7.95 Transaction ID : D527532
City Phoenix State AZ Zip Code 85027-4250	Purpose of Disbursement Credit Card Processing Fees 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	41.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 33			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 20002 N 19th Ave # A-17		Amount of Each Disbursement this Period 13.65 Transaction ID : D527534
City Phoenix	State AZ Zip Code 85027-4250	
Purpose of Disbursement Credit Card Processing Fees	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Anderson Photo Inc.,		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 318 Greene Ave		Amount of Each Disbursement this Period 300.00 Transaction ID : D523120
City Brooklyn	State NY Zip Code 11238-1410	
Purpose of Disbursement professional services	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2014
Mailing Address 499 South Capitol Street SW		Amount of Each Disbursement this Period 4000.00 Transaction ID : D523909
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Fundraising Consultant	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4313.65
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2014	
Mailing Address 499 South Capitol Street SW			Amount of Each Disbursement this Period 47.76	
City Washington	State DC	Zip Code 20003	Transaction ID : D523910	
Purpose of Disbursement fundraising expenses		Category/ Type 003		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014	
Mailing Address 499 South Capitol Street SW			Amount of Each Disbursement this Period 4000.00	
City Washington	State DC	Zip Code 20003	Transaction ID : D527354	
Purpose of Disbursement Fundraising Consultant		Category/ Type 003		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014	
Mailing Address 499 South Capitol Street SW			Amount of Each Disbursement this Period 84.32	
City Washington	State DC	Zip Code 20003	Transaction ID : D527355	
Purpose of Disbursement fundraising expenses		Category/ Type 003		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	4132.08
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 499 South Capitol Street SW		Amount of Each Disbursement this Period 4000.00 Transaction ID : D527472
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising Consultant Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 47.59 Transaction ID : D527473
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 499 South Capitol Street SW		Amount of Each Disbursement this Period 47.59 Transaction ID : D527473
City Washington State DC Zip Code 20003	Purpose of Disbursement fundraising expenses Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 100.00 Transaction ID : D527533
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. James Bryan		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 228 Lexington Ave		Amount of Each Disbursement this Period 100.00 Transaction ID : D527533
City Brooklyn State NY Zip Code 11216-1113	Purpose of Disbursement computer/equipment repairs Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 4147.59
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4147.59
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 33		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. Central Brooklyn Independent Democrats		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address 476 10th. Street		Amount of Each Disbursement this Period 250.00 Transaction ID : D527481
City Brooklyn	State NY	
Zip Code 11215	Purpose of Disbursement Journal Ad	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Cultural Academy of Excellence		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 11305 Chantilly Lane		Amount of Each Disbursement this Period 300.00 Transaction ID : D527475
City Mitchellville	State MD	
Zip Code 20721	Purpose of Disbursement Entertainment Group	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Delta Sigma Theta Sorority, Inc.,		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address Restoration Corporataion P.O.Box 470913		Amount of Each Disbursement this Period 300.00 Transaction ID : D527484
City Brooklyn	State NY	
Zip Code 11247	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 33		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. Fedex Kinko's		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 747 3rd Ave		Amount of Each Disbursement this Period 153.89
City New York	State NY	
Zip Code 10017-2803	Purpose of Disbursement Printing	Transaction ID : D527524
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Fedex Kinko's		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 747 3rd Ave		Amount of Each Disbursement this Period 48.90
City New York	State NY	
Zip Code 10017-2803	Purpose of Disbursement Printing	Transaction ID : D527525
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 900 North hangar Road		Amount of Each Disbursement this Period 12.16
City Jamaica	State NY	
Zip Code 11430	Purpose of Disbursement Express Package	Transaction ID : D527512
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	214.95
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 33			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. Harris Beach, PLLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 333 Earle Ovington Blvd Ste 901		Amount of Each Disbursement this Period 1000.00 Transaction ID : D523121
City Uniondale State NY Zip Code 11553-3622	Purpose of Disbursement Legal Legal	
Candidate Name	Category/Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jacque's Catering, Inc.,		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 138-22 242nd. Street		Amount of Each Disbursement this Period 313.93 Transaction ID : D527499
City Rosedale State NY Zip Code 11422	Purpose of Disbursement catering services catering services	
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Jane United Methodist Church		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 660 Monroe Street		Amount of Each Disbursement this Period 300.00 Transaction ID : D527505
City Brooklyn State NY Zip Code 11221	Purpose of Disbursement Journal Ad Journal Ad	
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1613.93
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 33			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. Marine Park Golf Course		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 2800 Flatbush Ave		Amount of Each Disbursement this Period 720.00 Transaction ID : D527477
City Brooklyn	State NY	
Purpose of Disbursement Catering Deposit		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MEMJ Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 292 Halsey St		Amount of Each Disbursement this Period 27.00 Transaction ID : D527360
City Brooklyn	State NY	
Purpose of Disbursement fundraising expenses		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. MEMJ Consulting		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 292 Halsey St		Amount of Each Disbursement this Period 2500.00 Transaction ID : D527507
City Brooklyn	State NY	
Purpose of Disbursement Fundraising Consultant		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3247.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. MEMJ Consulting		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 292 Halsey St		Amount of Each Disbursement this Period 91.00 Transaction ID : D527508
City Brooklyn	State NY	
Zip Code 11216-2404	Purpose of Disbursement fundraising expenses	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MEMJ Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2014
Mailing Address 292 Halsey St		Amount of Each Disbursement this Period 203.32 Transaction ID : D523911
City Brooklyn	State NY	
Zip Code 11216-2404	Purpose of Disbursement fundraising expenses	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MEMJ Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2014
Mailing Address 292 Halsey St		Amount of Each Disbursement this Period 2500.00 Transaction ID : D523912
City Brooklyn	State NY	
Zip Code 11216-2404	Purpose of Disbursement Fundraising Consultant	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2794.32
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 33		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. Micro Center		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 655 Merrick Ave		Amount of Each Disbursement this Period 412.78 Transaction ID : D527523
City Westbury	State NY	
Purpose of Disbursement Office Computer	Category/ Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Micro Center		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 655 Merrick Ave		Amount of Each Disbursement this Period 239.51 Transaction ID : D527529
City Westbury	State NY	
Purpose of Disbursement Office Equipment Part	Category/ Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Micro Center		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 655 Merrick Ave		Amount of Each Disbursement this Period 85.76 Transaction ID : D527612
City Westbury	State NY	
Purpose of Disbursement computer/equipment repairs	Category/ Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	738.05
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. Ms. Maritza E Myers		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 292 Halsey Street		Amount of Each Disbursement this Period 558.00 Transaction ID : D527353
City Brooklyn	State NY	
Zip Code 11216-2404	Purpose of Disbursement fundraising expenses	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 30 Ivy St SE		Amount of Each Disbursement this Period 424.00 Transaction ID : D527359
City Washington	State DC	
Zip Code 20003-4006	Purpose of Disbursement Meeting & Dues Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 30 Ivy St SE		Amount of Each Disbursement this Period 50.00 Transaction ID : D527356
City Washington	State DC	
Zip Code 20003-4006	Purpose of Disbursement Meeting & Dues Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1032.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. NGP		Date of Disbursement MM / DD / YYYY 04 / 06 / 2014
Mailing Address 1101 15th. Street Ste 500		Amount of Each Disbursement this Period 1950.00 Transaction ID : D527526
City Washington	State DC Zip Code 20005-5918	
Purpose of Disbursement Office Administration -software Rental	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NYC Board of Elections		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address 32 Broadway Fl 7		Amount of Each Disbursement this Period 300.00 Transaction ID : D527358
City New York	State NY Zip Code 10004-1662	
Purpose of Disbursement Election Material	Category/Type 005	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Mr. Wayne Ragguette		Date of Disbursement MM / DD / YYYY 05 / 30 / 2014
Mailing Address 1155 Lincoln Pl		Amount of Each Disbursement this Period 1000.00 Transaction ID : D527509
City Brooklyn	State NY Zip Code 11213-3527	
Purpose of Disbursement Petition Work	Category/Type 005	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 33		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. Sherene James		Date of Disbursement MM / DD / YYYY 05 / 30 / 2014
Mailing Address 1913 Rosemary Hill Drive		Amount of Each Disbursement this Period 900.00 Transaction ID : D527476
City Silver Spring	State MD	
Zip Code 20910	Purpose of Disbursement Catering Services	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Staples Direct		Date of Disbursement MM / DD / YYYY 04 / 18 / 2014
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period 229.04 Transaction ID : D527530
City Framingham	State MA	
Zip Code 01702-4478	Purpose of Disbursement office supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement MM / DD / YYYY 06 / 04 / 2014
Mailing Address 20934 Northern Blvd		Amount of Each Disbursement this Period 225.35 Transaction ID : D527614
City Bayside	State NY	
Zip Code 11361-3149	Purpose of Disbursement Office Equipment	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1354.39
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 20934 Northern Blvd		Amount of Each Disbursement this Period 5.43 Transaction ID : D527528
City Bayside State NY Zip Code 11361-3149	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 20934 Northern Blvd		Amount of Each Disbursement this Period 200.31 Transaction ID : D523058
City Bayside State NY Zip Code 11361-3149	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Stonewall Democratic Club Of New York City		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address PO Box 514		Amount of Each Disbursement this Period 250.00 Transaction ID : D527486
City New York State NY Zip Code 10113-0514	Purpose of Disbursement Donation Candidate Name Category/Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	455.74
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 33		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. Stonewall Veteran's Association		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address 70A Greenwich Ave Ste 120		Amount of Each Disbursement this Period 250.00 Transaction ID : D527485
City New York State NY Zip Code 10011-8398	Purpose of Disbursement Donation 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Strategic Health Care		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 1120 G Street N.W. suite 1000		Amount of Each Disbursement this Period 250.00 Transaction ID : D527474
City Washington State DC Zip Code 20005	Purpose of Disbursement Space Rental 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sun Trust Merchant		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 4000 Coral Ridge Dr		Amount of Each Disbursement this Period 213.21 Transaction ID : D524265
City Coral Springs State FL Zip Code 33065-7614	Purpose of Disbursement Credit Card Processing Fees 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	713.21
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. Sun Trust Merchant		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 4000 Coral Ridge Dr		Amount of Each Disbursement this Period 222.42 Transaction ID : D527517
City Coral Springs	State FL	
Zip Code 33065-7614	Purpose of Disbursement Credit Card Processing Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Sun Trust Merchant		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 4000 Coral Ridge Dr		Amount of Each Disbursement this Period 213.21 Transaction ID : D527535
City Coral Springs	State FL	
Zip Code 33065-7614	Purpose of Disbursement Credit Card Processing Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Symantha Rhodes		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 9010 Kings Highway		Amount of Each Disbursement this Period 680.00 Transaction ID : D527352
City Brooklyn	State NY	
Zip Code 11212	Purpose of Disbursement clerical	Category/ Type 005
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1115.63
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. The Black Institute		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 39 Broadway Suite 1740		Amount of Each Disbursement this Period 300.00 Transaction ID : D527518
City New York State NY Zip Code 10006	Purpose of Disbursement Tkts Community Event Candidate Name 012 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. The Recognition Source		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 1451 Empire Central Dr		Amount of Each Disbursement this Period 26.00 Transaction ID : D527510
City Dallas State TX Zip Code 75247-4028	Purpose of Disbursement Trophies, Plaques Candidate Name 003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Ray Trotman		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address 11136 200th St		Amount of Each Disbursement this Period 2250.00 Transaction ID : D527482
City Saint Albans State NY Zip Code 11412-2138	Purpose of Disbursement Professional Services Candidate Name 001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2576.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. Ray Trotman		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address 11136 200th St		Amount of Each Disbursement this Period 80.00
City Saint Albans	State NY	
Zip Code 11412-2138	Purpose of Disbursement Travel - Metro Cards	Transaction ID : D527483
Candidate Name	Category/Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2014
Mailing Address Jamaica MPO 163th. Street		Amount of Each Disbursement this Period 189.25
City Jamaica	State NY	
Zip Code 11432-4049	Purpose of Disbursement postage	Transaction ID : D527514
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Verizon		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 309.41
City Albany	State NY	
Zip Code 12212-5124	Purpose of Disbursement Telephone Service	Transaction ID : D527527
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	578.66
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 33			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 307.45 Transaction ID : D527511
City Albany State NY Zip Code 12212-5124	Purpose of Disbursement Telephone Service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Latrice Walker		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 409 Saratoga Ave # 3		Amount of Each Disbursement this Period 2100.00 Transaction ID : D527506
City Brooklyn State NY Zip Code 11233-4750	Purpose of Disbursement Petition Work Candidate Name Category/Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Horace D. Williams		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 185 Hall St Apt 317		Amount of Each Disbursement this Period 500.00 Transaction ID : D527480
City Brooklyn State NY Zip Code 11205-5095	Purpose of Disbursement Catering Deposit Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2907.45
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Working Families Party - Federal Account		M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 2 Nevins St 3rd. floor		Amount of Each Disbursement this Period
City State Zip Code Brooklyn NY 11217-1010		1575.00
Purpose of Disbursement Paid Petition Workers		Transaction ID : D527478
Candidate Name		Category/Type
Office Sought:	Disbursement For: 2014	* In-Kind Received
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Working Families Party - Federal Account		M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 2 Nevins St 3rd. floor		Amount of Each Disbursement this Period
City State Zip Code Brooklyn NY 11217-1010		875.00
Purpose of Disbursement Petition Canvassing		Transaction ID : D527357
Candidate Name		Category/Type
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C.		M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code		
Purpose of Disbursement		
Candidate Name		Category/Type
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2450.00
TOTAL This Period (last page this line number only).....	38526.55

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Clarke for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Knickerbocker SKD		Nature of Debt (Purpose): Professional Services
Mailing Address 594 Broadway Rm 610		
City State	Zip Code	
New York	NY 10012-3257	

Outstanding Balance Beginning This Period	Transaction ID : D119749	
<input type="text" value="10000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="10000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Knickerbocker SKD		Nature of Debt (Purpose): Professional Services
Mailing Address 594 Broadway Rm 610		
City State	Zip Code	
New York	NY 10012-3257	

Outstanding Balance Beginning This Period	Transaction ID : D124540	
<input type="text" value="1500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tollin Associates & Liberty Legal, PPLC		Nature of Debt (Purpose): Legal Services
Mailing Address 365 Bridge St Apt 9E		
City State	Zip Code	
Brooklyn	NY 11201-3808	

Outstanding Balance Beginning This Period	Transaction ID : D391550	
<input type="text" value="2000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2000.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="13500.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="13500.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="13500.00"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : D119749

Debt has been in dispute since January 2007 as a verbal addition which was considered unwarranted by the campaign's treasurer. There has not been any correspondences , or attempts from the vendor to collect this disputed debt. The statute of limitations on debt in New York as codified under Section 2-213 of the New York code- (Six (6) years) has expired.

Form/Schedule: SD10

Transaction ID: D124540

Debt has been in dispute since the inception of billing 9/14/2006 as vendor billed for rejected printing material. At this stage - the statute of limitations on debt in New York as codified under Section 2-213 of the New York code - (Six (6) years) has expired. There have not been any correspondences , or attempts from the vendor to collect this disputed debt.