

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

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

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

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Clarke for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2014 To: M M / D D / Y Y Y Y 03 / 31 / 2014

	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))....	71070.00	384640.50
(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)).....	71070.00	384640.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	65252.34	286405.90
(b) Total Offsets to Operating Expenditures (from Line 14).....	2063.21	3701.89
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	63189.13	282704.01
8. Cash on Hand at Close of Reporting Period (from Line 27).....	97525.53	
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).....	20220.00	129090.00
(ii) Unitemized.....	5100.00	35800.50
(iii) TOTAL of contributions from individuals ▶	25320.00	164890.50
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	45750.00	219750.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	71070.00	384640.50
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.)	2063.21	3701.89
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)..... ▶	73133.21	388342.39

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	65252.34	286405.90
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	2500.00	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	2000.00	2000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	69752.34	300905.90

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	94144.66
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	73133.21
25. SUBTOTAL (add Line 23 and Line 24).....	167277.87
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	69752.34
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	97525.53

**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 5 OF 70
	<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	

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)
Roger V. Archibald Esq.

Mailing Address 26 Court St
Ste 711

City Brooklyn State NY Zip Code 11242-1107

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

Name of Employer Self Occupation Attorney & Counselor at Law

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
460.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 11 / 2014

Transaction ID : C9543316

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Roger V. Archibald Esq.

Mailing Address 26 Court St
Ste 711

City Brooklyn State NY Zip Code 11242-1107

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

Name of Employer Self Occupation Attorney & Counselor at Law

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
460.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 11 / 2014

Transaction ID : C9543336

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Roger V. Archibald Esq.

Mailing Address 26 Court St
Ste 711

City Brooklyn State NY Zip Code 11242-1107

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

Name of Employer Self Occupation Attorney & Counselor at Law

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
460.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9667004

Amount of Each Receipt this Period
150.00

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

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

360.00

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

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

FOR LINE NUMBER: PAGE 6 OF 70
(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)
Jose Francisco Avila

Mailing Address 1510 Unionport Rd Apt 12H

City State Zip Code
Bronx NY 10462

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

Name of Employer Occupation
New Horizon Investment Club Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9663297

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Faith Bernal

Mailing Address 4024 Hubbard Pl

City State Zip Code
Brooklyn NY 11210-4953

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

Name of Employer Occupation
F.A.B. LLC Registered Nurse

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
830.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 11 / 2014

Transaction ID : C9543340

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Faith Bernal

Mailing Address 4024 Hubbard Pl

City State Zip Code
Brooklyn NY 11210-4953

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

Name of Employer Occupation
F.A.B. LLC Registered Nurse

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
830.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : C9651871

Amount of Each Receipt this Period
80.00

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

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

430.00

**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 70
	<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)
Zulema T Blair PhD

Mailing Address 149 Sterling Street
3C

City State Zip Code
Brooklyn NY 11225-3496

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

Name of Employer Occupation
John Jay College Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C9663465

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Keneca Boyce PhD

Mailing Address 657 East 26th Street

City State Zip Code
Brooklyn NY 11210-2159

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

Name of Employer Occupation
Inwood House Executive Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
720.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 21 / 2014

Transaction ID : C9652613

Amount of Each Receipt this Period
160.00

C. Full Name (Last, First, Middle Initial)
Michena Brooks DPM

Mailing Address 61 Demille Ave

City State Zip Code
Elmont NY 11003-4511

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

Name of Employer Occupation
Family Medical Podiatrist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
535.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C9666999

Amount of Each Receipt this Period
250.00

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

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

660.00

**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 70
	<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)
Andre L Brown

Mailing Address 2212 8th Ave 3B

City State Zip Code
New York NY 10026

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

Name of Employer Occupation
NYC DCAS Assistant Commissioner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9663172

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
kendall S. Christiansen

Mailing Address 151 Maple Street

City State Zip Code
Brooklyn NY 11225

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

Name of Employer Occupation
Gaia Strategies environmental affairs specialist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 11 / 2014

Transaction ID : C9543339

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Jacques Andre DeGraff

Mailing Address 725 River Road

City State Zip Code
Edgewater NJ 07024

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

Name of Employer Occupation
Self Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : C9654939

Amount of Each Receipt this Period
250.00

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

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

600.00

**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 70
	<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)
Lloyd Douglas

Mailing Address 165 W 127th St
2J

City New York State NY Zip Code 10027-3720

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

Name of Employer Self Occupation Minority Business Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2014

Transaction ID : C9654922

Amount of Each Receipt this Period
 300.00

600.00

B. Full Name (Last, First, Middle Initial)
Rodney T. Doyle

Mailing Address 572A Flatbush Ave

City Brooklyn State NY Zip Code 11225-4931

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9667028

Amount of Each Receipt this Period
 100.00

325.00

C. Full Name (Last, First, Middle Initial)
George Fontas

Mailing Address 23 1st PL.
apt 1

City Brooklyn State NY Zip Code 11231

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

Name of Employer Capalino+Company Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9662463

Amount of Each Receipt this Period
 250.00

250.00

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

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

650.00

**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 10 OF 70
	<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)
Barbara Monica Foster

Mailing Address 11A S Portland Ave
F&R: 63 Flushing Avenue, Unit 270.

City Brooklyn State NY Zip Code 11217-1301

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

Name of Employer F & R Installers Occupation Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2014

Transaction ID : C9654957

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Irvin Mitchell Gipson Esq

Mailing Address 176 Midwood St

City Brooklyn State NY Zip Code 11225-5010

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

Name of Employer NYC Occupation Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9667007

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Adam J Goldfine

Mailing Address 29259 N 49th Ave

City Cave Creek State AZ Zip Code 85331

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

Name of Employer Excel Builders & Renovators Occupation Director of Operations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
320.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2014

Transaction ID : C9651667

Amount of Each Receipt this Period
320.00

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

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

2070.00

**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 70
	<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)
Roy Hastick

Mailing Address 212 Rutland Rd

City State Zip Code
Brooklyn NY 11225-5374

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

Name of Employer Occupation
CACCI CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C9667000

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Dan Henry

Mailing Address 701 Brazos

City State Zip Code
Austin TX 78701

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

Name of Employer Occupation
Netspend CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C9663135

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Albert Hinds

Mailing Address 369 Linden Blvd

City State Zip Code
Brooklyn NY 11203-2750

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C9672651

Amount of Each Receipt this Period
100.00

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

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

1300.00

**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 12 OF 70
	<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)
Amaziah Howell

Mailing Address 317A Halsey Street

City State Zip Code
Brooklyn NY 11216

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

Name of Employer Occupation
Howell Petroleum Products, Inc. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2014

Transaction ID : C9654958

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
George Hulse

Mailing Address 474 W. 158th Street # 24

City State Zip Code
New York NY 10032-5344

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

Name of Employer Occupation
Healthfirst Vice President External Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C9666998

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Christian Hylton

Mailing Address 670 E. 22nd Street

City State Zip Code
Brooklyn NY 11210

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

Name of Employer Occupation
New York City Council Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C9667027

Amount of Each Receipt this Period
100.00

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

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

800.00

**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 13 OF 70
	<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)
Laura E. Imperiale

Mailing Address 195 Maple St

City State Zip Code
Brooklyn NY 11225-5007

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

Name of Employer Occupation
Tully Construction Director of Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9667001

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Kevin Johnson

Mailing Address 8317 Glenwood Road

City State Zip Code
Brooklyn NY 11236-3433

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

Name of Employer Occupation
Crystal Manor President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : C9651700

Amount of Each Receipt this Period
 160.00

C. Full Name (Last, First, Middle Initial)
Kevin Johnson

Mailing Address 8317 Glenwood Road

City State Zip Code
Brooklyn NY 11236-3433

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

Name of Employer Occupation
Crystal Manor President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9667043

Amount of Each Receipt this Period
 60.00

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

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

520.00

**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 14 OF 70
	<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)
Voni B Johyn

Mailing Address 8604 105th St

City Richmond Hill State NY Zip Code 11418-1528

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

Name of Employer Isaiah's Temple Occupation Clergy

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **775.00**

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 11 / 2014

Transaction ID : C9543342

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Dennis O Jones

Mailing Address 11 Circle Drive

City Hempstead State NY Zip Code 11550-6609

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

Name of Employer N/A Occupation Retirede

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : C9652361

Amount of Each Receipt this Period
250.00

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

Mailing Address 1208 E 49th St

City Brooklyn State NY Zip Code 11234-1513

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

Name of Employer Joseph Tax and Consulting Services Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **640.00**

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 11 / 2014

Transaction ID : C9543341

Amount of Each Receipt this Period
40.00

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

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

330.00

**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 15 OF 70
	<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)
KO41 Lofts LLC

Mailing Address 162 Manhattan Ave

City State Zip Code
Brooklyn NY 11206-2048

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

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
 03 / 31 / 2014

Transaction ID : C9670694

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Fetije Lata

Mailing Address 50 Hillcrest St

City State Zip Code
Staten Island NY 10308-2730

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

Name of Employer Occupation
Armstrong Roofing Corp Construction

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : C9654941

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Michael B Levy

Mailing Address 230 8th St SE

City State Zip Code
Washington DC 20003-2107

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9672579

Amount of Each Receipt this Period
 500.00

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

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

4100.00

**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 16 OF 70
	<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)
Jose Maldonado Esq.

Mailing Address 85 Rugby Road

City State Zip Code
Brooklyn NY 11226

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

Name of Employer Occupation
NYC FDNY Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
305.00

Date of Receipt
 M M / D D / Y Y Y Y
01 / 06 / 2014

Transaction ID : C9534730

Amount of Each Receipt this Period
80.00

B. Full Name (Last, First, Middle Initial)
Donald J. Matheson

Mailing Address 175 Saint Marks Ave
Apt 1

City State Zip Code
Brooklyn NY 11238-3441

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

Name of Employer Occupation
Almat Group Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C9667026

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
Marcia Maxwell

Mailing Address 60 Sterling St

City State Zip Code
Brooklyn NY 11225-3319

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

Name of Employer Occupation
Global Strategies Public Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C9667045

Amount of Each Receipt this Period
50.00

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

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

480.00

**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 17 OF 70
	<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

Full Name (Last, First, Middle Initial) Waldo McMillan		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 720 Ardonia Terrace		Transaction ID : C9661002	
City Upper Marlboro	State MD	Zip Code 20774	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Capstone Counsel Group	Occupation Lawyer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) Gbubemi Okotieuro		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 75 hanson place apt 1A		Transaction ID : C9667051	
City brooklyn	State NY	Zip Code 11217	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Berkeley	Occupation College Administrator		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 220.00		

Full Name (Last, First, Middle Initial) Nayan Parikh		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2014	
Mailing Address 58-09 28th Avenue		Transaction ID : C9654961	
City Woodside	State NY	Zip Code 11377	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer ASHNU International Inc	Occupation Engineer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1350.00
TOTAL This Period (last page this line number only).....	_____

**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 18 OF 70
	<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

Full Name (Last, First, Middle Initial) A. Mihir B Patel		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 215 Circle Road		Transaction ID : C9656051
City Muttontown	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Monpat Construction	Occupation Civil Engineer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. Sanjivkumar B Patel		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 65 Tennyson Dr		Transaction ID : C9697298
City Nanuet	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. Pamela Ransom		Date of Receipt M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 260 Ocean Parkway #3M		Transaction ID : C9534681
City Brooklyn	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer Metropolitan College	Occupation Professor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional).....	2120.00
TOTAL This Period (last page this line number only).....	

**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 19 OF 70
	<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)
Tiffany Raspberry

Mailing Address 893 Myrtle Ave
Apt 23

City Brooklyn State NY Zip Code 11206-6654

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

Name of Employer York Group Associates Occupation Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9666993

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Xamayla Rose-Persaud

Mailing Address 573 East 22nd street 2D

City brooklyn State NY Zip Code 11226

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

Name of Employer City of New york Occupation Policy Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1650.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9667014

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
Dwayne C Sampson

Mailing Address 1684 Bergen Street

City Brooklyn State NY Zip Code 11213

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

Name of Employer Metropolitan Transportation Authority Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
460.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9667016

Amount of Each Receipt this Period
200.00

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

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

2200.00

**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 20 OF 70
	<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)
William Wallace IV

Mailing Address **The Continuum Company LLC**
30 W. 21st Street, 11th floor

City **New York** State **NY** Zip Code **10010**

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

Name of Employer **The Continuum Company** Occupation **Senior Finance and Acquisitions Office**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 20 / 2014

Transaction ID : C9654921

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Carmencita Natasia Whonder

Mailing Address **1935 12th Street, NW TH1**

City **Washington** State **DC** Zip Code **20009**

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

Name of Employer **Brownstein Hyatt Farber Schreck LLP** Occupation **Government Relations**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C9663287

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Dolly Williams

Mailing Address **7 Plaza St W**

City **Brooklyn** State **NY** Zip Code **11217-3706**

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

Name of Employer **A Williams Construction** Occupation **Information Requested**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C9667036

Amount of Each Receipt this Period
250.00

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

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

2250.00

20220.00

**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 21 OF 70
	<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)
AMERICAN FEDERATION OF TEACHERS COPE

Mailing Address 555 New Jersey Ave NW

City Washington State DC Zip Code 20001-2029

FEC ID number of contributing federal political committee. **C** C00157545

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
 03 / 31 / 2014

Transaction ID : C9672609

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Boeing Political Action Committee

Mailing Address 1200 Wilson Blvd

City Arlington State VA Zip Code 22209-2300

FEC ID number of contributing federal political committee. **C** C00142711

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
 02 / 24 / 2014

Transaction ID : C9697292

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
Bricklayers and Allied Craftworkers

Mailing Address 3750 Monroe Ave Ste 17A

City Pittsford State NY Zip Code 14534-1302

FEC ID number of contributing federal political committee. **C** C00373423

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
 01 / 29 / 2014

Transaction ID : C9556243

Amount of Each Receipt this Period
2500.00

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: (check only one)	PAGE 22 OF 70
	<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)
Bricklayers and Allied Craftworkers

Mailing Address 3750 Monroe Ave
Ste 17A

City State Zip Code
Pittsford NY 14534-1302

FEC ID number of contributing federal political committee. **C** C00373423

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
03 / 21 / 2014

Transaction ID : C9697299

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Brownstein, Hyatt, Farber, Schreck LLP

Mailing Address 410 17th St
Ste 2200

City State Zip Code
Denver CO 80202-4432

FEC ID number of contributing federal political committee. **C** C00390583

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
03 / 31 / 2014

Transaction ID : C9672583

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CSA COPE/PAC

Mailing Address 16 Court St
Fl 4

City State Zip Code
Brooklyn NY 11241-0400

FEC ID number of contributing federal political committee. **C** C00355818

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2350.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 25 / 2014

Transaction ID : C9654786

Amount of Each Receipt this Period
1000.00

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

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

4000.00

**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 23 OF 70
	<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)
CSX Corp. Good Government Fund

Mailing Address 1331 Pennsylvania Ave NW
Suite 560

City Washington State DC Zip Code 20004-1745

FEC ID number of contributing federal political committee. **C C00163832**

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
 03 / 31 / 2014

Transaction ID : C9672584

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
CTIA

Mailing Address 1400 16th St NW
Ste 600

City Washington State DC Zip Code 20036-2225

FEC ID number of contributing federal political committee. **C C00262295**

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
 03 / 10 / 2014

Transaction ID : C9641942

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Donald M. Payne Jr. For Congress

Mailing Address P.O.Box 2406

City Newark State NJ Zip Code 07114

FEC ID number of contributing federal political committee. **C C00519355**

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
 03 / 31 / 2014

Transaction ID : C9672576

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 24 OF 70
	<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)
ELI LILLY AND COMPANY

Mailing Address **LILLY CORPORATE CENTER**

City **INDIANAPOLIS** State **IN** Zip Code **46285**

FEC ID number of contributing federal political committee. **C C00082792**

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
02 / 19 / 2014

Transaction ID : C9576020

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
General Electric Political Action Committee

Mailing Address **1299 Pennsylvania Ave NW Ste 900W**

City **Washington** State **DC** Zip Code **20004-2400**

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C9672586

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
GOLDMAN SACHS GROUP, INC. POLITICAL ACTION COMMITT

Mailing Address **101 Constitution Ave NW Ste 1000E**

City **Washington** State **DC** Zip Code **20001-2171**

FEC ID number of contributing federal political committee. **C C00350744**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C9672607

Amount of Each Receipt this Period
500.00

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

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

2500.00

**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 25 OF 70
	<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)
Honeywell

Mailing Address 101 Constitution Ave NW
Suite 500 West

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00096156

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
 03 / 26 / 2014

Transaction ID : C9661379

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Human Rights Campaign PAC

Mailing Address 1640 Rhode Island Ave NW

City Washington State DC Zip Code 20036-3200

FEC ID number of contributing federal political committee. **C** C00235853

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
 03 / 10 / 2014

Transaction ID : C9641928

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Independent Community Bankers PAC

Mailing Address 1615 L St NW
Ste 900

City Washington State DC Zip Code 20036-5623

FEC ID number of contributing federal political committee. **C** C00032698

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
 03 / 10 / 2014

Transaction ID : C9641921

Amount of Each Receipt this Period
1000.00

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

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

3000.00

**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 26 OF 70
	<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)
LOCKHEED MARTIN EMPLOYEES' POLITICAL ACTION COMMIT

Mailing Address 1550 Crystal Dr
Ste 300

City Arlington State VA Zip Code 22202-4110

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2014

Transaction ID : C9659271

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
McDonald's Political Action Committee

Mailing Address 2111 McDonalds Dr

City Oak Brook State IL Zip Code 60523-5500

FEC ID number of contributing federal political committee. **C** C00063164

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2014

Transaction ID : C9576001

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
McDonald's Political Action Committee

Mailing Address 2111 McDonalds Dr

City Oak Brook State IL Zip Code 60523-5500

FEC ID number of contributing federal political committee. **C** C00063164

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9672587

Amount of Each Receipt this Period
1500.00

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

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

4000.00

**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 27 OF 70
<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. McGraw Hill Companies, Inc PAC
McGraw Hill Financial, Inc. PAC

Mailing Address 1221 Avenue of the Americas

City New York State NY Zip Code 10020-1001

FEC ID number of contributing federal political committee. **C C00494682**

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
03 / 31 / 2014

Transaction ID : C9672591

Amount of Each Receipt this Period
500.00

B. Microsoft Corporation Political Action Committee

Mailing Address 16011 NE 36th Way # 97017

City Redmond State WA Zip Code 98052-6301

FEC ID number of contributing federal political committee. **C C00227546**

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
03 / 31 / 2014

Transaction ID : C9672593

Amount of Each Receipt this Period
1000.00

C. National Association of Broadcasters

Mailing Address 1771 N St NW

City Washington State DC Zip Code 20036-2800

FEC ID number of contributing federal political committee. **C C00009985**

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
03 / 31 / 2014

Transaction ID : C9672597

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 28 OF 70
(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)
Off the Sidelines PAC

Mailing Address 124 Washington St

City State Zip Code
Foxboro MA 02035-1368

FEC ID number of contributing federal political committee. **C** C00525600

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
 01 / 22 / 2014

Transaction ID : C9548063

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Off the Sidelines PAC

Mailing Address 124 Washington St

City State Zip Code
Foxboro MA 02035-1368

FEC ID number of contributing federal political committee. **C** C00525600

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
 01 / 22 / 2014

Transaction ID : C9548064

Amount of Each Receipt this Period
5000.00

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
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : C9659254

Amount of Each Receipt this Period
1000.00

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

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

11000.00

**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 29 OF 70
	<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)
Realtors Political Action Committee

Mailing Address 430 N Michigan Ave

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

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
 03 / 31 / 2014

Transaction ID : C9672601

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Small Business Investor Alliance PAC

Mailing Address 1100 H STREET, NW SUITE 610

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00109991

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
 03 / 31 / 2014

Transaction ID : C9672581

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
The American Federation of State, County and Munic

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036-5665

FEC ID number of contributing federal political committee. **C** C70000120

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
 03 / 19 / 2014

Transaction ID : C9697295

Amount of Each Receipt this Period
 1500.00

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

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

3500.00

**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 30 OF 70
<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)
Transport Workers Union of America, AFL-CIO

Mailing Address 1700 Broadway

City State Zip Code
New York NY 10019-5905

FEC ID number of contributing federal political committee. **C C00008268**

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
03 / 10 / 2014

Transaction ID : C9659253

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Turkish Coalition New Jersey PAC

Mailing Address 279 GORGE ROAD STE 203

City State Zip Code
CLIFFSIDE PARK NJ 07010

FEC ID number of contributing federal political committee. **C C00487181**

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
03 / 21 / 2014

Transaction ID : C9651874

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Verizon Communications, Inc. Good Govt. Club

Mailing Address 771 Parkway Ave

City State Zip Code
Ewing NJ 08618-2729

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C9666517

Amount of Each Receipt this Period
1500.00

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: PAGE 31 OF 70
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Clarke for Congress

A. Full Name (Last, First, Middle Initial)
Viverito NY

Mailing Address 211 E 11th St

City State Zip Code
New York NY 10003-7321

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

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
 01 / 18 / 2014

Transaction ID : C9548120

Amount of Each Receipt this Period
 250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

250.00

45750.00

**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 32 OF 70
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) NGP		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 27 / 2014
Mailing Address 1225 I St NW Ste 1225		Transaction ID : C9697306
City Washington	State DC	
Zip Code 20005-5918		Amount of Each Receipt this Period 1950.00
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1950.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
Zip Code		
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
Zip Code		
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	1950.00
TOTAL This Period (last page this line number only).....	1950.00

**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 33 OF 70	
	<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. A-Z Party Rental		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 115 32nd. Street		Amount of Each Disbursement this Period 375.00 Transaction ID : D522473
City Brooklyn	State NY	
Zip Code 11232	Purpose of Disbursement Equipment Rental	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. American Express		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 20002 N 19th Ave # A-17		Amount of Each Disbursement this Period 7.95 Transaction ID : D523968
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) C. American Express		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 20002 N 19th Ave # A-17		Amount of Each Disbursement this Period 57.86 Transaction ID : D523969
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:	

SUBTOTAL of Disbursements This Page (optional).....	440.81
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 34 OF 70			
	<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 02 / 05 / 2014
Mailing Address 20002 N 19th Ave # A-17		Amount of Each Disbursement this Period 7.80
City Phoenix State AZ Zip Code 85027-4250	Purpose of Disbursement Credit Card Processing Fees 003 Category/Type	
Candidate Name		Transaction ID : D523975
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 02 / 03 / 2014
Mailing Address 20002 N 19th Ave # A-17		Amount of Each Disbursement this Period 7.95
City Phoenix State AZ Zip Code 85027-4250	Purpose of Disbursement Credit Card Processing Fees 003 Category/Type	
Candidate Name		Transaction ID : D523976
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 01 / 12 / 2014
Mailing Address 499 South Capitol Street SW		Amount of Each Disbursement this Period 4000.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising Consultant 003 Category/Type	
Candidate Name		Transaction ID : D523970
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).....	4015.75
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 35 OF 70	
	<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 02 / 01 / 2014
Mailing Address 499 South Capitol Street SW		Amount of Each Disbursement this Period 4000.00 Transaction ID : D522439
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising Consultant 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) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014
Mailing Address 499 South Capitol Street SW		Amount of Each Disbursement this Period 48.16 Transaction ID : D522440
City Washington State DC Zip Code 20003	Purpose of Disbursement fundraising expenses 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. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 499 South Capitol Street SW		Amount of Each Disbursement this Period 4000.00 Transaction ID : D522451
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising Consultant 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).....	8048.16
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 36 OF 70		
	<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 03 / 03 / 2014
Mailing Address 499 South Capitol Street SW		Amount of Each Disbursement this Period 25.46 Transaction ID : D522452
City Washington State DC Zip Code 20003	Purpose of Disbursement fundraising expenses 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) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 499 South Capitol Street SW		Amount of Each Disbursement this Period 30.05 Transaction ID : D522453
City Washington State DC Zip Code 20003	Purpose of Disbursement fundraising expenses 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. James Bryan		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 228 Lexington Ave		Amount of Each Disbursement this Period 300.00 Transaction ID : D522636
City Brooklyn State NY Zip Code 11216-1113	Purpose of Disbursement computer/equipment repairs 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).....	355.51
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 37 OF 70			
	<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. Cambridge & Leach		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 660 Nostrand Ave		Amount of Each Disbursement this Period 175.99 Transaction ID : D522486
City Brooklyn	State NY	
Purpose of Disbursement Addtl.insured Insurance		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. Central Brooklyn Independent Democrats		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 476 10th. Street		Amount of Each Disbursement this Period 300.00 Transaction ID : D522433
City Brooklyn	State NY	
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) c. Crowne Plaza Albany- City Center		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address State and Lodge Streets		Amount of Each Disbursement this Period 557.46 Transaction ID : D524093
City Albany	State NY	
Purpose of Disbursement Hotel/travel		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).....	1033.46
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 38 OF 70	
	<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. Davel Middleton		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 374 Van Sicklen St		Amount of Each Disbursement this Period 280.00 Transaction ID : D523063
City Brooklyn State NY Zip Code 11223-3848	Purpose of Disbursement Petition Canvassing 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) B. Davel Middleton		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 374 Van Sicklen St		Amount of Each Disbursement this Period 40.00 Transaction ID : D523886
City Brooklyn State NY Zip Code 11223-3848	Purpose of Disbursement Petition Canvassing 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. Davel Middleton		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 374 Van Sicklen St		Amount of Each Disbursement this Period 3.00 Transaction ID : D523896
City Brooklyn State NY Zip Code 11223-3848	Purpose of Disbursement Travel 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).....	323.00
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 39 OF 70	
	<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. Davel Middleton		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 374 Van Sicklen St		Amount of Each Disbursement this Period 220.00 Transaction ID : D523897
City Brooklyn	State NY	
Zip Code 11223-3848	Purpose of Disbursement Petition Canvassing	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) B. Davel Middleton		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 374 Van Sicklen St		Amount of Each Disbursement this Period 160.00 Transaction ID : D523898
City Brooklyn	State NY	
Zip Code 11223-3848	Purpose of Disbursement Petition Canvassing	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. Ms. Andrea L. Dawes		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO Box 5636		Amount of Each Disbursement this Period 1200.00 Transaction ID : D522600
City Albany	State NY	
Zip Code 12205	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).....	1580.00
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 40 OF 70	
	<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. Andrea L. Dawes		Date of Disbursement MM / DD / YYYY 02 / 19 / 2014
Mailing Address PO Box 5636		Amount of Each Disbursement this Period 2000.00 Transaction ID : D522447
City Albany	State NY Zip Code 12205	
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:		

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement MM / DD / YYYY 02 / 21 / 2014
Mailing Address 900 North hangar Road		Amount of Each Disbursement this Period 26.65 Transaction ID : D524095
City Jamaica	State NY Zip Code 11430	
Purpose of Disbursement Express Package	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. Giando on the water, Inc.,		Date of Disbursement MM / DD / YYYY 03 / 11 / 2014
Mailing Address 400 Kent Avenue		Amount of Each Disbursement this Period 1200.00 Transaction ID : D522437
City Brooklyn	State NY Zip Code 11249	
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:		

SUBTOTAL of Disbursements This Page (optional).....	3226.65
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 41 OF 70			
	<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. Godfrey Evans		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 752 E 52nd St Imani International		Amount of Each Disbursement this Period 350.00 Transaction ID : D522475
City Brooklyn	State NY	
Zip Code 11203-5914	Purpose of Disbursement Dj 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. Holland Maurice		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 930 Madison Avenue		Amount of Each Disbursement this Period 110.00 Transaction ID : D523899
City Brooklyn	State NY	
Zip Code 11221	Purpose of Disbursement Petition Canvassing	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. Holland Maurice		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 930 Madison Avenue		Amount of Each Disbursement this Period 200.00 Transaction ID : D523887
City Brooklyn	State NY	
Zip Code 11221	Purpose of Disbursement Petition Canvassing	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).....	660.00
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 42 OF 70			
	<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. Holland Maurice			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 930 Madison Avenue			Amount of Each Disbursement this Period 14.25 Transaction ID : D523889
City Brooklyn	State NY	Zip Code 11221	
Purpose of Disbursement Travel	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. Holland Maurice			Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 930 Madison Avenue			Amount of Each Disbursement this Period 155.00 Transaction ID : D523904
City Brooklyn	State NY	Zip Code 11221	
Purpose of Disbursement Petition Canvassing	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. Hyatt Hotel			Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 100 Heron Blvd			Amount of Each Disbursement this Period 1150.00 Transaction ID : D524090
City Cambridge	State MD	Zip Code 21613-3420	
Purpose of Disbursement Democratic Conference	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).....	1319.25
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 43 OF 70			
	<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. Jacque's Catering, Inc.,		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 138-22 242nd. Street		Amount of Each Disbursement this Period 6860.62 Transaction ID : D522472
City Rosedale	State NY	
Zip Code 11422	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. Jewish Post		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 31 East 32nd. Street		Amount of Each Disbursement this Period 325.00 Transaction ID : D522434
City New York	State NY	
Zip Code 10016	Purpose of Disbursement Advertising	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) c. Johnny's Half Shell		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 400 N Capitol St NW Ste 175		Amount of Each Disbursement this Period 580.00 Transaction ID : D522608
City Washington	State DC	
Zip Code 20001-1511	Purpose of Disbursement Catering	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).....	7765.62
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 44 OF 70			
	<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. Johnny's Half Shell		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 400 N Capitol St NW Ste 175		Amount of Each Disbursement this Period 200.00 Transaction ID : D524094
City Washington State DC Zip Code 20001-1511	Purpose of Disbursement Catering 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. Justin Holland		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 930 Madison Avenue		Amount of Each Disbursement this Period 150.00 Transaction ID : D522469
City Brooklyn State NY Zip Code 11221	Purpose of Disbursement Petition Canvassing 005 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. Justin Holland		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 930 Madison Avenue		Amount of Each Disbursement this Period 240.00 Transaction ID : D522457
City Brooklyn State NY Zip Code 11221	Purpose of Disbursement Petition Canvassing 005 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).....	590.00
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 45 OF 70	
	<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. Justin Holland		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 930 Madison Avenue		Amount of Each Disbursement this Period 15.00 Transaction ID : D522459
City Brooklyn	State NY	
Zip Code 11221	Purpose of Disbursement travel	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) B. Kai Studio		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 1011 Dean St		Amount of Each Disbursement this Period 4707.25 Transaction ID : D522448
City Brooklyn	State NY	
Zip Code 11238-3304	Purpose of Disbursement space rental	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. Kai Studio		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1011 Dean St		Amount of Each Disbursement this Period 1260.00 Transaction ID : D522597
City Brooklyn	State NY	
Zip Code 11238-3304	Purpose of Disbursement Catering Refreshment 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:	

SUBTOTAL of Disbursements This Page (optional).....	5982.25
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 46 OF 70			
	<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. Kai Studio		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1011 Dean St		Amount of Each Disbursement this Period 12.00 Transaction ID : D522598
City Brooklyn	State NY	
Zip Code 11238-3304	Purpose of Disbursement Catering Refreshment Services	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. Kwadwo Payton		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 984 Greene Ave		Amount of Each Disbursement this Period 285.00 Transaction ID : D523064
City Brooklyn	State NY	
Zip Code 11221-2916	Purpose of Disbursement Petition Canvassing	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. Kwadwo Payton		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 984 Greene Ave		Amount of Each Disbursement this Period 2.50 Transaction ID : D523065
City Brooklyn	State NY	
Zip Code 11221-2916	Purpose of Disbursement Petition Canvassing	Category/ Type 002
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).....	299.50
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 47 OF 70			
	<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. Kwadwo Payton		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 984 Greene Ave		Amount of Each Disbursement this Period 200.00 Transaction ID : D522461
City Brooklyn	State NY	
Purpose of Disbursement Petition Canvassing		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) B. Kwadwo Payton		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 984 Greene Ave		Amount of Each Disbursement this Period 8.50 Transaction ID : D522462
City Brooklyn	State NY	
Purpose of Disbursement travel		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. Kwadwo Payton		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 984 Greene Ave		Amount of Each Disbursement this Period 190.00 Transaction ID : D522466
City Brooklyn	State NY	
Purpose of Disbursement Petition Canvassing		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).....	398.50
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 48 OF 70			
	<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. Kwadwo Payton		Date of Disbursement MM / DD / YYYY 03 / 25 / 2014
Mailing Address 984 Greene Ave		Amount of Each Disbursement this Period 6.75 Transaction ID : D522467
City Brooklyn	State NY	
Zip Code 11221-2916	Purpose of Disbursement travel	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) B. Kwadwo Payton		Date of Disbursement MM / DD / YYYY 03 / 18 / 2014
Mailing Address 984 Greene Ave		Amount of Each Disbursement this Period 220.00 Transaction ID : D522470
City Brooklyn	State NY	
Zip Code 11221-2916	Purpose of Disbursement Petition Canvassing	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. MEMJ Consulting		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 292 Halsey St		Amount of Each Disbursement this Period 2500.00 Transaction ID : D522449
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).....	2726.75
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 49 OF 70	
	<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 MM / DD / YYYY 02 / 01 / 2014
Mailing Address 292 Halsey St		Amount of Each Disbursement this Period 2500.00 Transaction ID : D522438
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:	

Full Name (Last, First, Middle Initial) B. MTA NYC Transit		Date of Disbursement MM / DD / YYYY 03 / 12 / 2014
Mailing Address Nostrand Ave		Amount of Each Disbursement this Period 10.00 Transaction ID : D524102
City Brooklyn	State NY	
Zip Code 11229-5197	Purpose of Disbursement Travel	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. MTA NYC Transit		Date of Disbursement MM / DD / YYYY 03 / 06 / 2014
Mailing Address Nostrand Ave		Amount of Each Disbursement this Period 10.00 Transaction ID : D524103
City Brooklyn	State NY	
Zip Code 11229-5197	Purpose of Disbursement Travel	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).....	2520.00
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 50 OF 70	
	<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. MTA NYC Transit		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address Nostrand Ave		Amount of Each Disbursement this Period 10.00 Transaction ID : D524104
City Brooklyn	State NY	
Zip Code 11229-5197	Purpose of Disbursement Travel	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) B. MTA NYC Transit		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address Nostrand Ave		Amount of Each Disbursement this Period 10.00 Transaction ID : D524105
City Brooklyn	State NY	
Zip Code 11229-5197	Purpose of Disbursement Travel	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. MTA NYC Transit		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address Nostrand Ave		Amount of Each Disbursement this Period 10.00 Transaction ID : D524106
City Brooklyn	State NY	
Zip Code 11229-5197	Purpose of Disbursement Travel	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).....	30.00
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 51 OF 70			
	<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. MTA NYC Transit		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address Nostrand Ave		Amount of Each Disbursement this Period 10.00 Transaction ID : D524107
City Brooklyn	State NY	
Zip Code 11229-5197	Purpose of Disbursement Travel	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) B. MTA NYC Transit		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address Nostrand Ave		Amount of Each Disbursement this Period 10.00 Transaction ID : D524110
City Brooklyn	State NY	
Zip Code 11229-5197	Purpose of Disbursement Travel	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. MTA NYC Transit		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address Nostrand Ave		Amount of Each Disbursement this Period 10.00 Transaction ID : D524111
City Brooklyn	State NY	
Zip Code 11229-5197	Purpose of Disbursement Travel	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).....	30.00
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 52 OF 70	
	<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. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 30 Ivy St SE		Amount of Each Disbursement this Period 100.00 Transaction ID : D522454
City Washington State DC Zip Code 20003-4006	Purpose of Disbursement Meeting & Dues Fees 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. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 30 Ivy St SE		Amount of Each Disbursement this Period 50.00 Transaction ID : D522471
City Washington State DC Zip Code 20003-4006	Purpose of Disbursement Meeting & Dues Fees 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. NGP		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1225 I St NW Ste 1225		Amount of Each Disbursement this Period 80.00 Transaction ID : D523059
City Washington State DC Zip Code 20005-5918	Purpose of Disbursement Email Service 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).....	230.00
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 53 OF 70			
	<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 M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 1225 I St NW Ste 1225		Amount of Each Disbursement this Period 1950.00 Transaction ID : D523962
City Washington State DC Zip Code 20005-5918	Purpose of Disbursement Office Administration -software Rental 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. NGP		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2014
Mailing Address 1225 I St NW Ste 1225		Amount of Each Disbursement this Period 1950.00 Transaction ID : D523971
City Washington State DC Zip Code 20005-5918	Purpose of Disbursement Office Administration -software Rental 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. NYS Association of Black & Hispanic Caucus		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address South Swan Street Rm 442 A		Amount of Each Disbursement this Period 175.00 Transaction ID : D524088
City Albany State NY Zip Code 12206	Purpose of Disbursement Meeting/seminars 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).....	4075.00
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 54 OF 70	
	<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. Tiana Palmer		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 11 Paerdegat 15th Street		Amount of Each Disbursement this Period 200.00 Transaction ID : D523966
City Brooklyn	State NY	
Zip Code 11236	Purpose of Disbursement Clerical	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. Tiana Palmer		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 11 Paerdegat 15th Street		Amount of Each Disbursement this Period 112.00 Transaction ID : D523967
City Brooklyn	State NY	
Zip Code 11236	Purpose of Disbursement Travel	Category/ Type 002
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. Sidney Parker		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 301 E 109th St		Amount of Each Disbursement this Period 1000.00 Transaction ID : D522601
City New York	State NY	
Zip Code 10029-3704	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).....	1312.00
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 55 OF 70	
	<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. Agyei Kojo Payton		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 984 Greene Ave		Amount of Each Disbursement this Period 200.00 Transaction ID : D523062
City Brooklyn State NY Zip Code 11221-2916	Purpose of Disbursement Petition Canvassing 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) B. Agyei Kojo Payton		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 984 Greene Ave		Amount of Each Disbursement this Period 230.00 Transaction ID : D522468
City Brooklyn State NY Zip Code 11221-2916	Purpose of Disbursement Petition Canvassing 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. Agyei Kojo Payton		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 984 Greene Ave		Amount of Each Disbursement this Period 10.00 Transaction ID : D522458
City Brooklyn State NY Zip Code 11221-2916	Purpose of Disbursement Travel 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).....	440.00
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 56 OF 70	
	<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. Agyei Kojo Payton		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 984 Greene Ave		Amount of Each Disbursement this Period 220.00 Transaction ID : D522464
City Brooklyn	State NY	
Zip Code 11221-2916	Purpose of Disbursement Petition Canvassing	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) B. Agyei Kojo Payton		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 984 Greene Ave		Amount of Each Disbursement this Period 16.75 Transaction ID : D522465
City Brooklyn	State NY	
Zip Code 11221-2916	Purpose of Disbursement Travel	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. Agyei Kojo Payton		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 984 Greene Ave		Amount of Each Disbursement this Period 240.00 Transaction ID : D522456
City Brooklyn	State NY	
Zip Code 11221-2916	Purpose of Disbursement Petition Canvassing	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).....	476.75
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 57 OF 70			
	<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. PDPA		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1123 Nostrand Ave		Amount of Each Disbursement this Period 1500.00 Transaction ID : D523119
City Brooklyn	State NY	
Zip Code 11225-5409	Purpose of Disbursement Office Rent	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. PDPA		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 1123 Nostrand Ave		Amount of Each Disbursement this Period 2400.00 Transaction ID : D523973
City Brooklyn	State NY	
Zip Code 11225-5409	Purpose of Disbursement Office Rent	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. Veronica Phillips		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 248 E 52nd St		Amount of Each Disbursement this Period 306.13 Transaction ID : D522443
City Brooklyn	State NY	
Zip Code 11203-3506	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:	

SUBTOTAL of Disbursements This Page (optional).....	4206.13
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 58 OF 70			
	<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. Powell Locksmith Servicec/o 2.0 Hardware		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 860 Atlantic Avenue		Amount of Each Disbursement this Period 445.00 Transaction ID : D522474
City Brooklyn	State NY	
Zip Code 11238	Purpose of Disbursement Professional Services	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. Progress Printing Corp.		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 3728 56th. Street		Amount of Each Disbursement this Period 598.13 Transaction ID : D522446
City Woodside	State NY	
Zip Code 11377	Purpose of Disbursement Petition Printing	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. Progress Printing Corp.		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 3728 56th. Street		Amount of Each Disbursement this Period 98.67 Transaction ID : D522450
City Woodside	State NY	
Zip Code 11377	Purpose of Disbursement Petition Printing	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).....	1141.80
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 59 OF 70			
	<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. Revolution Messaging		M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 1730 Rhode Island Avenue NW ST		Amount of Each Disbursement this Period
City Washington State DC Zip Code 20036		1750.00
Purpose of Disbursement Professional Services	001	Transaction ID : D522476
Candidate Name	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)		Date of Disbursement
B. Simply Forms & Computers, Inc.,		M M / D D / Y Y Y Y 02 / 15 / 2014
Mailing Address 555 Rogers Ave		Amount of Each Disbursement this Period
City Brooklyn State NY Zip Code 11225-5954		878.00
Purpose of Disbursement Printing	006	Transaction ID : D522444
Candidate Name	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)		Date of Disbursement
C. Simply Forms & Computers, Inc.,		M M / D D / Y Y Y Y 02 / 15 / 2014
Mailing Address 555 Rogers Ave		Amount of Each Disbursement this Period
City Brooklyn State NY Zip Code 11225-5954		355.00
Purpose of Disbursement Printing	003	Transaction ID : D522445
Candidate Name	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).....	2983.00
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 60 OF 70			
	<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 Direct

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4478

Purpose of Disbursement office supplies 001 Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 12 / 2014

Amount of Each Disbursement this Period: 187.37

Transaction ID : D524091

Full Name (Last, First, Middle Initial)
B. Staples

Mailing Address 91-30 Van Wyck Expressway

City Jamaica State NY Zip Code 11418

Purpose of Disbursement Office Supplies 005 Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 06 / 2014

Amount of Each Disbursement this Period: 255.96

Transaction ID : D524109

Full Name (Last, First, Middle Initial)
c. Staples

Mailing Address 1011 Flatbush Ave

City Brooklyn State NY Zip Code 11226-4002

Purpose of Disbursement Office Supplies 001 Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 26 / 2014

Amount of Each Disbursement this Period: 188.31

Transaction ID : D524096

SUBTOTAL of Disbursements This Page (optional) 631.64

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 61 OF 70			
	<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 03 / 03 / 2014
Mailing Address 1011 Flatbush Ave		Amount of Each Disbursement this Period 46.67
City Brooklyn	State NY	
Zip Code 11226-4002	Purpose of Disbursement Office Supplies	Transaction ID : D524100
Candidate Name	005 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. Staples		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2014
Mailing Address 20934 Northern Blvd		Amount of Each Disbursement this Period 390.07
City Bayside	State NY	
Zip Code 11361-3149	Purpose of Disbursement Office Supplies	Transaction ID : D523060
Candidate Name	005 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. Stella Magloire		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 878 Lenox Road		Amount of Each Disbursement this Period 240.00
City Brooklyn	State NY	
Zip Code 11203	Purpose of Disbursement Petition Canvassing	Transaction ID : D523903
Candidate Name	005 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).....	676.74
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 62 OF 70	
	<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. Stella Magloire		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 878 Lenox Road		Amount of Each Disbursement this Period 280.00 Transaction ID : D523906
City Brooklyn	State NY	
Purpose of Disbursement Petition Canvassing	Category/ Type 005	
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. Stella Magloire		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 878 Lenox Road		Amount of Each Disbursement this Period 60.00 Transaction ID : D523892
City Brooklyn	State NY	
Purpose of Disbursement Petition Canvassing	Category/ Type 005	
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. Stella Magloire		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 878 Lenox Road		Amount of Each Disbursement this Period 220.00 Transaction ID : D523900
City Brooklyn	State NY	
Purpose of Disbursement Petition Canvassing	Category/ Type 005	
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).....	560.00
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 63 OF 70	
	<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 03 / 11 / 2014
Mailing Address 4000 Coral Ridge Dr		Amount of Each Disbursement this Period 54.95 Transaction ID : D524204
City Coral Springs	State FL	
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 02 / 11 / 2014
Mailing Address 4000 Coral Ridge Dr		Amount of Each Disbursement this Period 66.63 Transaction ID : D523974
City Coral Springs	State FL	
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. Sun Trust Merchant		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 4000 Coral Ridge Dr		Amount of Each Disbursement this Period 460.42 Transaction ID : D523972
City Coral Springs	State FL	
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: _____	

SUBTOTAL of Disbursements This Page (optional)	582.00
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 64 OF 70			
	<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. Symantha Rhodes		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 9010 Kings Highway		Amount of Each Disbursement this Period 210.00 Transaction ID : D523901
City Brooklyn	State NY	
Purpose of Disbursement Petition Canvassing	Candidate Name	Category/ Type 005
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Symantha Rhodes		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 9010 Kings Highway		Amount of Each Disbursement this Period 230.00 Transaction ID : D523902
City Brooklyn	State NY	
Purpose of Disbursement Petition Canvassing	Candidate Name	Category/ Type 005
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: _____ District: _____		

Full Name (Last, First, Middle Initial) c. Symantha Rhodes		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 9010 Kings Highway		Amount of Each Disbursement this Period 100.00 Transaction ID : D523894
City Brooklyn	State NY	
Purpose of Disbursement Petition Canvassing	Candidate Name	Category/ Type 005
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional).....	540.00
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 65 OF 70			
	<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. Symantha Rhodes		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 9010 Kings Highway		Amount of Each Disbursement this Period 110.00 Transaction ID : D523908
City Brooklyn	State NY	
Purpose of Disbursement Petition Canvassing		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) B. The Jewish Press		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 4915 16th. Avenue		Amount of Each Disbursement this Period 585.00 Transaction ID : D522435
City Brooklyn	State NY	
Purpose of Disbursement Advertising		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) c. The Recognition Source		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 1451 Empire Central Dr		Amount of Each Disbursement this Period 260.00 Transaction ID : D522607
City Dallas	State TX	
Purpose of Disbursement Trophies, Plaques		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).....	955.00
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 66 OF 70	
	<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 MM / DD / YYYY 02 / 04 / 2014
Mailing Address 11136 200th St		Amount of Each Disbursement this Period 2250.00 Transaction ID : D522441
City Saint Albans	State NY	
Zip Code 11412-2138	Purpose of Disbursement Professional Services	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. Vanguard Independent Deomcratic Association		Date of Disbursement MM / DD / YYYY 03 / 10 / 2014
Mailing Address 1424 Fulton St		Amount of Each Disbursement this Period 600.00 Transaction ID : D522455
City Brooklyn	State NY	
Zip Code 11216-2505	Purpose of Disbursement Petition Canvassing	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. Verizon		Date of Disbursement MM / DD / YYYY 01 / 31 / 2014
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 308.40 Transaction ID : D523963
City Albany	State NY	
Zip Code 12212-5124	Purpose of Disbursement Telephone Service	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).....	3158.40
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 67 OF 70	
	<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 MM / DD / YYYY 02 / 17 / 2014
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 307.57 Transaction ID : D524092
City Albany	State NY Zip Code 12212-5124	
Purpose of Disbursement Telephone Service	Category/Type 001	
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. Verizon		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 307.06 Transaction ID : D524112
City Albany	State NY Zip Code 12212-5124	
Purpose of Disbursement Telephone Service	Category/Type 001	
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	614.63
TOTAL This Period (last page this line number only).....	63928.29

**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 68 OF 70
	<input type="checkbox"/> 17 20a <input checked="" 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. Democratic Congressional Campaign Committee (DCCC)		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 430 S Capitol St SE		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Political contribution	Transaction ID : D522436
Candidate Name	Category/Type 008	
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.		Date of Disbursement 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: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement 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: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	2500.00

**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 69 OF 70	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. HORSFORD FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 6100 Elton Ave Ste 1000		Amount of Each Disbursement this Period 1000.00 Transaction ID : D522603
City Las Vegas	State NV Zip Code 89107-0123	
Purpose of Disbursement Political contribution	011	
Candidate Name Steven A Horsford		
Office Sought: <input checked="" 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: NV District: 04		

Full Name (Last, First, Middle Initial) B. Rangel for Congress		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO Box 5577 MANHATTANVILLE STA		Amount of Each Disbursement this Period 1000.00 Transaction ID : D522602
City New York	State NY Zip Code 10027-5570	
Purpose of Disbursement Political contribution	011	
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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	011	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00

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"/>