

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Clarke for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	32260.00	82650.00
(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)).....	32260.00	82650.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	44233.43	73790.69
(b) Total Offsets to Operating Expenditures (from Line 14).....	13.65	108.33
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	44219.78	73682.36
8. Cash on Hand at Close of Reporting Period (from Line 27).....	76920.07	
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).....	15317.66	

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).....	2550.00	31600.00
(ii) Unitemized.....	210.00	9520.00
(iii) TOTAL of contributions from individuals ▶	2760.00	41650.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	29500.00	41000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	32260.00	82650.00
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.)	13.65	108.33
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)..... ▶	32273.65	82758.33

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	44233.43	73790.69
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
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	4700.00	4700.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	48933.43	78490.69

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	93579.85
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	32273.65
25. SUBTOTAL (add Line 23 and Line 24).....	125853.50
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	48933.43
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	76920.07

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

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

FOR LINE NUMBER: PAGE 5 OF 28
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
Clarke for Congress

A. Full Name (Last, First, Middle Initial)
Jean Claude Compas MD

Mailing Address 255 Eastern Parkway

City State Zip Code
Brooklyn NY 11238

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

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2015

Transaction ID : C10167519

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Millicent Comrie MD

Mailing Address 611 Edwards St

City State Zip Code
Baldwin NY 11510-3837

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

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : C10195301

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Garey Ellis, M.D.

Mailing Address 1181 E New York Ave

City State Zip Code
Brooklyn NY 11212-3830

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

Name of Employer Inner Force Tots, Inc. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 07 / 2015

Transaction ID : C10166803

Amount of Each Receipt this Period
 500.00

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

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

1500.00

**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 28
(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)
Ceyda Oner MD

Mailing Address 111 Fulton St
Apt 723

City State Zip Code
New York NY 10038-2776

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

Name of Employer Occupation
Center for Women's Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : C10195303

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Vladimir J. Rodney Esq.

Mailing Address 105 Court St
Feder & Rodney

City State Zip Code
Brooklyn NY 11201-5625

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

Name of Employer Occupation
Feder & Rodney Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 23 / 2015

Transaction ID : C10174419

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Una S Tomlinson-Clarke

Mailing Address 242 Midwood St

City State Zip Code
Brooklyn NY 11225-5408

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

Name of Employer Occupation
Una Clarke & Associates, Int'l Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2015

Transaction ID : C10180601

Amount of Each Receipt this Period
300.00

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

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

1050.00

2550.00

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

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

FOR LINE NUMBER: PAGE 7 OF 28
(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)
4MA PAC

Mailing Address **PO Box 490464**

City **Newton Center** State **MA** Zip Code **02459**

FEC ID number of contributing federal political committee. **C C00543504**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : C10225311

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
American Hospital Association

Mailing Address **325 7th St NW
Ste 700**

City **Washington** State **DC** Zip Code **20004-2801**

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : C10225306

Amount of Each Receipt this Period

1500.00

C. Full Name (Last, First, Middle Initial)
American Society for Clinical Laboratory Science (ASCLS PAC)

Mailing Address **1861 INTERNATIONAL DRIVE
#200**

City **TYSONS CORNER** State **VA** Zip Code **22102**

FEC ID number of contributing federal political committee. **C C00034645**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : C10214103

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 8 OF 28
	<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. Amgen Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 555 13th St NW
Ste 600W
City Washington State DC Zip Code 20004-1159

FEC ID number of contributing federal political committee. **C C00251876**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : C10214104

Amount of Each Receipt this Period
1000.00

B. AT&T Inc. Federal PAC

Full Name (Last, First, Middle Initial)
Mailing Address 175 E Houston St
Rm 7-A-50
City San Antonio State TX Zip Code 78205-2255

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : C10214105

Amount of Each Receipt this Period
2500.00

C. CenturyLink Employees' PAC

Full Name (Last, First, Middle Initial)
Mailing Address 150 Fayetteville St
Ste 2810
City Raleigh State NC Zip Code 27601-2986

FEC ID number of contributing federal political committee. **C C00419911**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : C10214106

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: PAGE 9 OF 28
(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)
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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : C10273211

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DIRECTV GROUP, INC. FUND - FEDERAL (DIRECTV PAC)

Mailing Address 901 F STREET, NW
SUITE 600

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00331991

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : C10208194

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Emergent Biosolutions Employees PAC

Mailing Address 2273 RESEARCH BLVD
SUITE 400

City ROCKVILLE State MD Zip Code 20850

FEC ID number of contributing federal political committee. **C** C00380303

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : C10225307

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 10 OF 28
	<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)
GRIDIRON-PAC

Mailing Address **345 PARK AVENUE**

City **NEW YORK** State **NY** Zip Code **10154**

FEC ID number of contributing federal political committee. **C C00451153**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : C10225310

Amount of Each Receipt this Period
 1500.00

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : C10225308

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : C10214107

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: PAGE 11 OF 28
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Clarke for Congress

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

Mailing Address 51 Madison Ave

City State Zip Code
New York NY 10010-1603

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : C10225309

Amount of Each Receipt this Period
2500.00

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2015

Transaction ID : C10215983

Amount of Each Receipt this Period
5000.00

C. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2015

Transaction ID : C10215985

Amount of Each Receipt this Period
5000.00

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

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

12500.00

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

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

FOR LINE NUMBER: PAGE 12 OF 28
(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)
Retail Wholesale & Dept. Store Union COPE

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

City New York State NY Zip Code 10016-7925

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 23 / 2015

Transaction ID : C10174420

Amount of Each Receipt this Period
1000.00

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

Mailing Address 607 14TH STREET NORTHWEST
SUITE 400

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000984

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : C10208088

Amount of Each Receipt this Period
1000.00

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).....

2000.00

29500.00

**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 13 OF 28			
	<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, LLCABC			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address 499 South Capitol Street SW			Amount of Each Disbursement this Period 4250.00 Transaction ID : D569052
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: 2016 <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, LLCABC			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2015
Mailing Address 499 South Capitol Street SW			Amount of Each Disbursement this Period 4250.00 Transaction ID : D572673
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: 2016 <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, LLCABC			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015
Mailing Address 499 South Capitol Street SW			Amount of Each Disbursement this Period 44.00 Transaction ID : D572696
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	8544.00
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 14 OF 28			
	<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, LLCABC		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2015
Mailing Address 499 South Capitol Street SW		Amount of Each Disbursement this Period 4250.00 Transaction ID : D572881
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: 2016 <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, LLCABC		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address 499 South Capitol Street SW		Amount of Each Disbursement this Period 4250.00 Transaction ID : D572883
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Brooklyn Exposure		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 1401 Bedford Ave		Amount of Each Disbursement this Period 410.00 Transaction ID : D572905
City Brooklyn State NY Zip Code 11216-5836	Purpose of Disbursement catering Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8910.00
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 15 OF 28			
	<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. Details Catering		M M / D D / Y Y Y Y 01 / 26 / 2015	
Mailing Address 1236 Underwood St NW		Amount of Each Disbursement this Period	
City Washington State DC Zip Code 20012-2924		590.00	
Purpose of Disbursement Catering		Transaction ID : D572679	
Candidate Name		Category/Type 003	
Office Sought:	House Senate President	Disbursement For: 2016	<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. Hilton Albany		M M / D D / Y Y Y Y 02 / 17 / 2015	
Mailing Address 40 Lodge Streets		Amount of Each Disbursement this Period	
City Albany State NY Zip Code 12207		387.60	
Purpose of Disbursement Hotel/travel		Transaction ID : D572700	
Candidate Name		Category/Type 002	
Office Sought:	House Senate President	Disbursement For: 2016	<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. KGN 6, LLC		M M / D D / Y Y Y Y 02 / 06 / 2015	
Mailing Address 86 Monroe Street		Amount of Each Disbursement this Period	
City Brooklyn State NY Zip Code 11216		225.00	
Purpose of Disbursement design printing		Transaction ID : D572695	
Candidate Name		Category/Type 003	
Office Sought:	House Senate President	Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	1202.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 28			
	<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 / 06 / 2015
Mailing Address 292 Halsey St		Amount of Each Disbursement this Period 2500.00 Transaction ID : D572694
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MEMJ Consulting		Date of Disbursement MM / DD / YYYY 01 / 07 / 2015
Mailing Address 292 Halsey St		Amount of Each Disbursement this Period 2500.00 Transaction ID : D572672
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: 2016 <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 03 / 08 / 2015
Mailing Address 292 Halsey St		Amount of Each Disbursement this Period 2500.00 Transaction ID : D572683
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 28			
	<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. MLK Commission		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2015
Mailing Address 316 State Street		Amount of Each Disbursement this Period 500.00 Transaction ID : D572669
City Brooklyn	State NY	
Zip Code 11201	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: 2016 <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 02 / 23 / 2015
Mailing Address 30 Ivy St SE		Amount of Each Disbursement this Period 197.50 Transaction ID : D572682
City Washington	State DC	
Zip Code 20003-4006	Purpose of Disbursement Meeting & Dues Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <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 01 / 01 / 2015
Mailing Address 1101 15th. Street Ste 500		Amount of Each Disbursement this Period 1950.00 Transaction ID : D569285
City Washington	State DC	
Zip Code 20005-5918	Purpose of Disbursement software	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2647.50
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 18 OF 28			
	<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. NYS Association of Black & Hispanic Caucus			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2015
Mailing Address South Swan Street Rm 442 A			Amount of Each Disbursement this Period 60.00 Transaction ID : D572698
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. NYS Association of Black & Hispanic Caucus			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2015
Mailing Address South Swan Street Rm 442 A			Amount of Each Disbursement this Period 175.00 Transaction ID : D572699
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. PDPA			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015
Mailing Address 1123 Nostrand Ave			Amount of Each Disbursement this Period 3000.00 Transaction ID : D572693
City Brooklyn	State NY	Zip Code 11225-5409	
Purpose of Disbursement Office Rent	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	3235.00
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 19 OF 28			
	<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. Qtel		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2015
Mailing Address P.O.Box 234330		Amount of Each Disbursement this Period 462.82
City Great Neck	State NY	
Zip Code 11023-4330	Purpose of Disbursement Telephone Service	Transaction ID : D572688
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Qtel		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2015
Mailing Address P.O.Box 234330		Amount of Each Disbursement this Period 179.89
City Great Neck	State NY	
Zip Code 11023-4330	Purpose of Disbursement Telephone Service	Transaction ID : D572689
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sheraton Society Hill Hotel		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 1 Dock St		Amount of Each Disbursement this Period 1150.00
City Philadelphia	State PA	
Zip Code 19106-3939	Purpose of Disbursement Travel	Transaction ID : D572697
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1792.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 28			
	<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 / 2015
Mailing Address 4000 Coral Ridge Dr		Amount of Each Disbursement this Period 74.90
City Coral Springs	State FL	
Zip Code 33065-7614	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : D572896
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 / 2015
Mailing Address 4000 Coral Ridge Dr		Amount of Each Disbursement this Period 85.52
City Coral Springs	State FL	
Zip Code 33065-7614	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : D572902
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 / 2015
Mailing Address 4000 Coral Ridge Dr		Amount of Each Disbursement this Period 293.28
City Coral Springs	State FL	
Zip Code 33065-7614	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : D572674
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	453.70
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. The Faith & Politics Institute			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2015
Mailing Address 110 Maryland Avenue NE			Amount of Each Disbursement this Period 1700.00 Transaction ID : D572685
City Washington	State DC	Zip Code 20002	
Purpose of Disbursement Travel	Candidate Name		Category/ Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 / 28 / 2015
Mailing Address 338 3rd Ave			Amount of Each Disbursement this Period 730.00 Transaction ID : D572702
City Brooklyn	State NY	Zip Code 11215-1816	
Purpose of Disbursement Advertising	Candidate Name		Category/ Type 004
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Ray Trotman			Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2015
Mailing Address 11136 200th St			Amount of Each Disbursement this Period 2250.00 Transaction ID : D572684
City Saint Albans	State NY	Zip Code 11412-2138	
Purpose of Disbursement professional services	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	4680.00
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 22 OF 28	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Clarke for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 68.93
City Albany	State NY Zip Code 12212-5124	
Purpose of Disbursement Telephone Service		Transaction ID : D572670
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type 001
State: District:		

Full Name (Last, First, Middle Initial) B. Washington Nationals Baseball Club Nationals Park		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address 1500 South Capitol Street, SE		Amount of Each Disbursement this Period 4510.00
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Rental Suite Event		Transaction ID : D572681
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type 003
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		Category/Type
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).....	4578.93
TOTAL This Period (last page this line number only).....	43544.44

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 28
	<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. CROWLEY LEADERSHIP FUND		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2015
Mailing Address 700 13TH STREET, NW SUITE 600		Amount of Each Disbursement this Period 2000.00 Transaction ID : D572676
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name JOSEPH CROWLEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District:		

Full Name (Last, First, Middle Initial) B. New South Leadership PAC		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address 434 Fayetteville Street Suite		Amount of Each Disbursement this Period 700.00 Transaction ID : D572678
City Raleigh State NC Zip Code 27601	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name G K Butterfield	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 01		

Full Name (Last, First, Middle Initial) c. Vinnie For Congress		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 8901 Shore Road 7E		Amount of Each Disbursement this Period 2000.00 Transaction ID : D572675
City Brooklyn State NY Zip Code 11209	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name Vincent Joseph Gentile	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 11		

SUBTOTAL of Disbursements This Page (optional).....	4700.00
TOTAL This Period (last page this line number only).....	4700.00

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 Angerholzer Broz Consulting, LLCABC	Nature of Debt (Purpose): fundraising expenses
Mailing Address 499 South Capitol Street SW	
City State Zip Code Washington DC 20003	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D572908	
Amount Incurred This Period 11.05	Payment This Period 0.00	Outstanding Balance at Close of This Period 11.05

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Angerholzer Broz Consulting, LLCABC	Nature of Debt (Purpose): fundraising expenses
Mailing Address 499 South Capitol Street SW	
City State Zip Code Washington DC 20003	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D572909	
Amount Incurred This Period 733.08	Payment This Period 0.00	Outstanding Balance at Close of This Period 733.08

C. 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 10000.00	Transaction ID : D119749	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10000.00

1) SUBTOTALS This Period This Page (optional)	10744.13
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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

Form/Schedule: SD10

Transaction ID : D119749

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

Form/Schedule:

Transaction ID:

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 1500.00	Transaction ID : D124540	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor National Democratic Club	Nature of Debt (Purpose): Meeting & Dues Fees
Mailing Address 30 Ivy St SE	
City State Zip Code Washington DC 20003-4006	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D572906	
Amount Incurred This Period 388.13	Payment This Period 0.00	Outstanding Balance at Close of This Period 388.13

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor National Democratic Club	Nature of Debt (Purpose): Meeting & Dues Fees
Mailing Address 30 Ivy St SE	
City State Zip Code Washington DC 20003-4006	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D572907	
Amount Incurred This Period 685.40	Payment This Period 0.00	Outstanding Balance at Close of This Period 685.40

1) SUBTOTALS This Period This Page (optional)	2573.53
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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

Form/Schedule: SD10

Transaction ID : D124540

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

Form/Schedule:

Transaction ID:

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

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:
 (check only one) 9
 10

NAME OF COMMITTEE (In Full)

Clarke for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tollin Associates & Liberty Legal, PPLC

Mailing Address 365 Bridge St
 Apt 9E

City State Zip Code
 Brooklyn NY 11201-3808

Nature of Debt (Purpose):
 Legal Services

Outstanding Balance Beginning This Period **Transaction ID : D391550**

2000.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

0.00 0.00 2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	2000.00
2) TOTALS This Period (last page this line number only)	15317.66
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	15317.66