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FEB 18 2010

Amendment	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

Statement of Organization - Candidate Committee

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500.

1. Committee Information			
a. Full Name		c. ID Number	
Phil Clark for Sheriff			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
146 Phil's Cir Rutherfordton, NC 28139		2-18-10	
		e. Phone Number	
2. Candidate Information		<input type="checkbox"/> Candidate's Primary Committee	
a. Full Name		c. Candidate ID Number	d. Party Affiliation
Phillip Douglas Clark			Una.
b. Mailing Address (include City, State, and Zip Code)		e. Office Sought	f. Jurisdiction
146 Phil's Cir Rutherfordton, NC 28139		Sheriff	CO
		(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)	
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
Phil D. Clark			
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
SAME			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
825-2889434	CLARK549@AOL.COM		
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
c. Phone Number	d. Email Address	c. Account Code	d. Type
CERTIFICATION			
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct.			
Phil Clark		[Signature]	2/18/10
Printed Name of Signer		Signature of Appointed Treasurer	Date

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Disclosure Report Cover

Amendment
Yes No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Information
a. Full Name: Phil Clark for Sheriff
b. Mailing Address: 146 Phils Circle, Rotherford, NC 28139
c. ID Number
d. Date Filed
e. Phone Number

2. Report Year
3. Period Start Date (mm/dd/yy)
4. Period End Date (mm/dd/yy)
5. Treasurer Full Name

6. Type of Committee (Check One)
Candidate Campaign, PAC, Independent Expenditure, Legal Expense Fund, Party, Referendum, Joint Fundraiser
7. Type of Report (check only one type of report from one category)
Municipal: Organizational, Thirty-five day, Pre-primary, Pre-election, Pre-runoff, Semi-annual, Mid Year, Year End, Final, Special
State/County: Organizational, Quarterly, First, Second, Third, Fourth, Semi-annual, Mid Year, Year End, Final, Special
Referendum: Organizational, Pre-referendum, Final, Supplemental Final, Annual, Special
8. Type of Fund (if applicable, check one)
Booster Fund, Building Fund, Other
9. Number of Fundraisers this Report
10. Special Report Name

11. Account Information
a. Financial Institution Full Name
b. Purpose
c. Account Code
d. Period Begin Balance

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

Phil Clark (Printed Name of Signer), Phil Clark (Signature of Appointed Treasurer), 2/19/10 (Date)

FOR OFFICE USE ONLY

Date Received, Date Postmarked, Date Scanned, Date Data Entered, Employee, Delivery Method (Normal Mail, Registered Mail, Hand Delivered, Electronically Filed), Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

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**Detailed Summary**

Amendment  
 Yes  No

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

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Phil Clark for Sheriff					
Start of Election Cycle: January 1, 2010		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 0		\$	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 100.00		\$	
6) Contributions from Individuals (CRO-1210)		\$ 100.00		\$	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$ 100.00		\$	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$		\$	
11e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		\$ 100.00		\$	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$		\$	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$		\$	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 100.00		\$	
<b>ADDITIONAL INFORMATION</b>					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$			
24) Account Transfers Within the Committee (CRO-1720)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

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Loan Proceeds

Pg \_\_\_\_ of \_\_\_\_

Amendment	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

Use this form to report proceeds from a loan and loan endorser's information  
 A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Phil Clark for Sheriff					
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Phil Clark 146 Phil's Cir Rothertown NC 28139					
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
		Self			
				f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount	
%			Check	\$ 100.00	
l. Full Name of Lending Institution				m. Loan Number	
4. Endorsers/Makers (The people who guaranteed the loan)					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
5. Total of ALL CRO-1410 Pages				\$	
(This line must be on line 2 of Detailed Summary Page CRO-1100)					

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## Loan Proceeds Statement

The individual making a loan to the committee must provide the following information. Failure to provide all of the information requested could be a violation of campaign reporting disclosure laws.

- Name of committee to receive loan: Phil Clark For Sheriff
- Person lending money to committee (Lender): Phil Clark
- Date of loan to committee: 2/19/10
- Name of lending institution and account number (source):  
100.00
- Amount of loan: \_\_\_\_\_
- Names of all parties responsible for payment of loan (guarantors):  
Phil Clark
- Period of loan: 12 mos.
- Rate of interest of loan: \_\_\_\_\_
- Security pledged for loan: \_\_\_\_\_

I, \_\_\_\_\_, acknowledge that all of the information  
(Person lending money to committee)  
provided is complete, true, and accurate. I further understand I may not forgive a loan that has an outstanding balance to any source.

Phil D. Clark

Signature of Lender

Phil D. Clark

Signature of Treasurer of Committee

This form must be submitted with the disclosure report for which the loan is initially disclosed.