2005-005

[redacted]

FOR OFFICE USE ONLY
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REPORT COVERING:

☐ JANUARY 1 through JUNE 30, _____ - DUE BY AUGUST 15

☑ JANUARY 1 through DECEMBER 31, 2004 - DUE BY FEBRUARY 15

1. Name: Clark (Last) Robert (First) _____ (MI)

2. Business Address: 723-C East 2nd Avenue (Street and No.) Rome (City) GA (State) 30161 (Zip)

Mailing Address: _____

3. Business Phone: 706-378-9780 (Area Code and Telephone Number)

4. Employer: Sterling Capital Management

5. Employer's address: 4064 Colony Rd. Suite 300 (Street and No.) Charlotte (City) NC (State) 28211 (Zip)

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6. Did you make an expenditure exceeding $50 on one occasion for a retirement system official:

From January 1 through June 30? Yes ☐ No ☐
From July 1 through December 31? Yes ☑ No ☐ NA ☐

If the answer to either question in Number 6 above is YES, complete Schedule A and attach.

7. Did you make expenditures exceeding the sum of $250 for a retirement system official:

From January 1 through June 30? Yes ☐ No ☐
From July 1 through December 31? Yes ☐ No ☐ NA ☐

If the answer to either question in Number 7 above is YES, complete Schedule A and attach.

8. PROVIDE BELOW (a) the name of the state or statewide public retirement system; (b) the aggregate total of all expenditures attributable to the retirement system made during the January 1 – June 30 reporting period; (c) the aggregate total of all expenditures attributable to the retirement system made during the July 1 – December 31 reporting period when applicable; (d) the aggregate total of all expenditures made in a calendar year attributable to the retirement system.

1). a. Name of Retirement System: Municipal Police Employees' Retirement System

b. Total of all expenditures made January 1 through June 30: $ —

c. Total of all expenditures made July 1 through December 31: $ 92
(When applicable)

d. Total of all expenditures made during the calendar year: $ 92

2) a. Name of Retirement System: _____

b. Total of all expenditures made January 1 through June 30: $ _____

c. Total of all expenditures made July 1 through December 31: $ _____
(When applicable)

d. Total of all expenditures made during the calendar year: $ _____

3) a. Name of Retirement System: _____

b. Total of all expenditures made January 1 through June 30: $ _____

c. Total of all expenditures made July 1 through December 31: $ _____
(When applicable)

d. Total of all expenditures made during the calendar year: $ _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 42:1114.2 has been deliberately omitted.

Lisa Blanck

Signature of Filer

1. OFFICIAL'S NAME	2. NAME OF RETIREMENT SYSTEM	3. AMOUNT OF EXPENDITURES MADE ON AN OFFICIAL FOR WHOM YOU EITHER SPENT OVER $50 ON ONE OCCASION OR MADE EXPENDITURES EXCEEDING $250 BETWEEN JANUARY 1 AND JUNE 30	4. AMOUNT OF EXPENDITURES MADE ON AN OFFICIAL FOR WHOM YOU EITHER SPENT OVER $50 ON ONE OCCASION OR MADE EXPENDITURES EXCEEDING $250 BETWEEN JULY 1 AND DECEMBER 31	5. TOTAL OF COLUMNS 3 AND 4
Willie Joe Greene	Municipal Police employees Retirement System		$ 92	$ 92