



RECEIVED

FEB 01 2010

CANDIDATE COMMITTEE
COVER PAGE


FOR OFFICIAL USE ONLY

10-19-09 to 11-23-09

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

INGHAM COUNTY CLERK

This Statement covers From: 10-19-09 to 11-23-09

1. Committee I.D. Number 45727 2. Committee Name Virg Berners for Lansing	4. Candidate Last Name Bernard First Name Virg M.I. P 4a. Office Sought Including District # or Community Served (If applicable) Lansing Mayor 4b. County of Residence East Cambridge Ingham
5. Committee's Mailing Address 3000 Cambridge Lansing, MI 48911 Area Code and Phone _____ If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	6. Treasurer's Name & Residential Address Joe McDonald 902 Smith Lansing MI 48910 Area Code & Phone _____
7. Treasurer's Business Address NA Area Code and Phone _____	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) <div style="border: 1px solid black; padding: 5px;"> <p>F2010-0070 2/1/10 2:09 PM Page 1 of 1 CAMP \$0.00 Mike Bryanton, Ingham County Clerk</p>  </div> Area Code and Phone _____

9. TYPE OF STATEMENT

9a. Pre-Election OR 9b. Post-Election

9c. Annual Statement (_____ Coverage Year)

9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)

9e. Dissolution of Candidate Committee

Effective Date of Dissolution _____

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper Joseph McDonald Joe McDonald Date 1-26-10
 Type or Print Name Signature

Candidate Virg Berners Virg Berners Date 1-26-10
 Type or Print Name Signature



1. Committee I.D. Number 45727

2. Committee Name Willy Bernero for Lansing Mayor

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>5 5,040.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>5,040</u>	(18.) \$ <u>352,341.23</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u></u>	(19.) \$ <u>10,151.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>5,040</u>	(20.) \$ <u>362,492.23</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u></u>	(21.) \$ <u>4506.45</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u></u>	(22.) \$ <u></u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>141,352.84</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u></u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u></u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>141,352.84</u>	(23.) \$ <u>378,489.34</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u></u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u></u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u></u>	(24.) \$ <u></u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u></u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u></u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>151,742.56</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>5,040.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>156,782.56</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>141,352.84</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>15,429.72 *</u>	



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 45727
2. Committee Name Mr. Bernard Br Lansing

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>PSE PAC</u> Address <u>3120 Sovereign Dr Sublet C Lansing MI 48911</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Re fund</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>1-13-10</u> Date	<u>\$1,000.00</u>
Expenditure #2 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page 1,000.00

Grand Total of all Schedules 1B
(Complete on last page of Schedule) 1,000.00

Enter this total
on line 8a of
Summary Page



January 29, 2010

Mike Bryanton, Clerk
Ingham County
Box 179
Mason, MI 48854

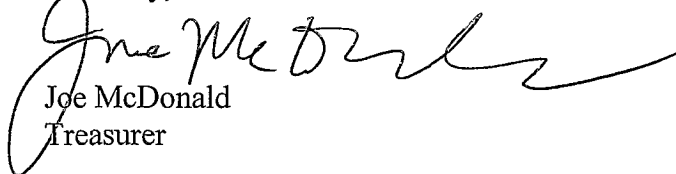
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FEB 01 2010
INGHAM COUNTY CLERK

Dear Clerk Bryanton,

Please be aware that the contribution from PSI Political Action Committee was returned on January 13, 2010. I have amended the post-general report to reflect the change in the ending balance.

In addition, I have amended the pre-general report. The amended report includes the donors and their contributions which were erroneously attributed to Dickinson Wright law firm as one donation. Please feel free to contact me if you have any questions.

Sincerely,



Joe McDonald
Treasurer



Current Date: February 01, 2010

Account Number: 337997106
Capture Date: January 26, 2010
Item Number: 5250043196056
Posted Date: January 26, 2010
Posted Item Number: 6219618101
Amount: \$1,000.00
Record Type: Debit

Virg Bernero for Lansing
% Joseph H McDonald
3000 N Cambridge Rd
Lansing MI 48911

copy
explains info =
all report

Security enhanced document. See back for details.

VIRGIL BERNERO FOR LANSING 05-03 1956
3000 N CAMBRIDGE ROAD
LANSING, MI 48911-1015

DATE 1-13-10 74-0226/2724 0

PAY TO THE ORDER OF PSI PAC \$ 1,000.00
one thousand no/10 DOLLARS

NuUnion 501 S. Capitol Avenue
Lansing, MI 48933-2320
888.267.7200 NuUnion.org

FOR Joe H. McDonald

⑆ 272482265⑆ 0337997106⑆ 01956

0002244768 2010-01-25 FOX DIRVE 8

BOFD >071102568<
Fox Drive 8
2010-01-25
002244768

PSI PAC
McDonald



copy

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 004572-7

2. Committee Name Virg Bernero for Lansing Mayor

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>9</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/02/2009</u> Name: Phillip L Thompson Address: 1026 E Michigan Ave. Lansing MI 48912 5. If over \$100.00 cumulative, please provide: Occupation <u>Executive Vice President</u> Employer <u>Michigan State Council PAC - SEIU</u> Business Address <u>2604 Fourth Street Detroit MI 48201</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	250.00	250.00
3. Contribution # <u>10</u> PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>11/02/2009</u> Name: PSI Political Action Committee Address: 3120 Sovereign Drive Suite C Lansing MI 48911 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	1000.00	1000.00
3. Contribution # <u>11</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/27/2009</u> Name: Stan Fedewa Address: 3129 N. Cambridge Lansing MI 48911 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # <u>12</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/21/2009</u> Name: Patricia Farhat Address: 2501 Hampden Lansing MI 48911 5. If over \$100.00 cumulative, please provide: Occupation <u>Secretary</u> Employer <u>AFL-CIO</u> Business Address <u>S. Washington Lansing MI 48933</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100.00	225.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	1400.00	

Enter this total on line 3a of Summary Page