



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE  
COVER PAGE**

FOR OFFICIAL USE ONLY

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

1. Committee I.D. Number <p style="text-align: center;">45727</p>		3. This Statement covers: from <u>7-21-14</u> to <u>10-20-14</u>	
2. Committee Name <p style="text-align: center;">Ving Bernaro for Lansing</p>		4. Candidate Last Name First Name M.I. <p style="text-align: center;">Bernaro Ving B.</p>	
5. Committee's Mailing Address <p style="text-align: center;">3000 Cambridge Lansing MI 48911</p>		4a. Office Sought Including District # or Community Served (If applicable) <p style="text-align: center;">Lansing Mayor</p>	
Area Code and Phone <u>517 485-5205</u> 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.		4b. County of Residence <u>Ingham</u>	
7. Treasurer's Business Address <p style="text-align: center;">902 Smith Lansing, MI 48910</p>		6. Treasurer's Name & Residential Address <p style="text-align: center;">Joe McDonald 902 Smith Lansing MI 48910</p>	
Area Code and Phone <u>517 485-5205</u>		Area Code & Phone <u>517 485-5205</u>	
9. TYPE OF STATEMENT 9a. <input type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus  Date of Election, Convention or Caucus <hr/>		Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input checked="" type="checkbox"/> October Quarterly  9c. <input type="checkbox"/> Annual Statement ( ) Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	
		9e. <input type="checkbox"/> By checking this item I/We certify any debts by the committee to the candidate or his or her by discharged and forgiven and no longer owe the committee. The committee has no outstanding debts or has any outstanding debts.  Further, if the dissolution cannot be granted, it is considered a request for the Reporting Waiver.  Effective date of dissolution <hr/> Note: The disposition of residual funds must be Schedule 1B and the Summary Page.	
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 <u>Joseph McDonald</u> Type or Print Name Signature		Date <u>10-27-14</u>	
Candidate <u>Ving Bernaro</u> Type or Print Name Signature		Date <u>10-27-14</u>	

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 10/27/14 12:33 PM  
 Barb Byrum Ingham County Clerk  
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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 001500 45727  
 2. Committee Name Vicki Bernero for Lansing  
~~001500 45727~~

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>0</u>	(18.) \$
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	(19.) \$
c. Subtotal of "Contributions"	(3c.) \$		(20.) \$
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$		
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$	<u>0</u>	<u>41,320</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>			
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$		(21.) \$
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$		(22.) \$
<b>EXPENDITURES</b>			
<b>8. Expenditures</b>			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>0</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$		
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$		
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$	<u>0</u>	(23.) \$ <u>33,820.23</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)			
<b>10. Disbursements</b>			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$		
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$		
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$		(24.) \$
<b>DEBTS AND OBLIGATIONS</b>			
<b>12. Debts and Obligations</b>			
a. Owed by the Committee (Schedule 1E)	(12a.) \$		
b. Owed to the Committee (Schedule 1E)	(12b.) \$		
<b>BALANCE STATEMENT</b>			
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$	<u>50,131.95</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>0</u>	
<b>15. SUBTOTAL Add lines 13 and 14</b>	(15.) = \$	<u>50,131.95</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$	<u>0</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$	<u>50,131.95</u>	