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MICHIGAN DEPARTMENT OF STATE

F2015-0203

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CAMP \$0.00

Barb Byrum, Ingham County Clerk

COUNTY CLERK FOR OFFICIAL USE ONLY

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

3. This Statement covers From:

10-21-14 to 12-31-14

1. Committee I.D. Number

45727

2. Committee Name

Ving Bernero for Lansing

4. Candidate Last Name

First Name

M.I.

Bernero Ving P.

4a. Office Sought Including District # or Community Served (If applicable)

Lansing Mayor

4b. County of Residence

Ingham

5. Committee's Mailing Address

3000 Cambridge
Lansing MI 48911

Area Code and Phone

517 485-5205

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 McDonnell

902 Smith

Lansing MI 48910

Area Code & Phone

517 485-5205

7. Treasurer's Business Address

NA

Area Code and Phone

Area Code and Phone

9. TYPE OF STATEMENT

9a. ☐ Pre-Election

OR

9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

☐ Primary

☐ General

☐ Convention

☐ School

☐ Special

☐ Caucus

Date of Election, Convention or Caucus

11-7-17

9c. ☒ Annual Statement (2014 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

Type or Print Name

Signature

Date

Joe McDonnell

[Signature]

2-1-15

Candidate

Type or Print Name

Signature

Date

Ving Bernero

[Signature]

2-3-15



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 45727

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Vic Bernero for Lansing

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>0</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>0</u>	(18.) \$ <u>42,825.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$		(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>0</u>	(20.) \$ <u>42,825.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$		(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$		(22.) \$
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>1,284.89</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$		
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$		
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>1,284.89</u>	(23.) \$ <u>51,899.64</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$		
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$		(24.) \$
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$		
b. Owed to the Committee (Schedule 1E)	(12b.) \$		
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>46,485.95</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>0</u>	
	(15.) = \$	<u>46,485.95</u>	
15. SUBTOTAL Add lines 13 and 14	(16.) - \$	<u>6,284.89</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(17.) \$	<u>45,301.06</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)			



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 45727
2. Committee Name Ving Barnaro for Lansing

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>USPS</u> Address <u>4800 Collins Rd</u> <u>Lansing MI 48910</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11-4-14</u> Date	<u>\$ 92.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>USPS</u> Address <u>4800 Collins Rd</u> <u>Lansing MI 48910</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11-25-14</u> Date	<u>\$ 92.89</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>Friends for Paul Wojno</u> Address <u>32025 Margaret</u> <u>Warren MI 48093</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Ticket Purchase</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12-4-14</u> Date	<u>\$ 100.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Manatee Graphic</u> Address <u>840 S. Clark</u> <u>Dansville, MI 48819</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Consulting</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12-16-14</u> Date	<u>\$ 1000.00</u> Click Here for Memo Itemization Type
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	\$ _____ Click Here for Memo Itemization Type

Subtotal this page 1,234.89
Grand Total of all Schedules 1B
(Complete on last page of Schedule)

Enter this total
on line 8a of
Summary Page