

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Depart must be legible typed as sciented in late and air to	O This Otal	
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement	2-17-12 to 1-22-12
1. Committee I.D. Number	4. Candidate Las	
45-4627469 18219°	Hershbe	erger TRudy L.
2 Committee Name	4a. Office Sought	Including District # or Community Served (If applicable)
Committee to elect	Bedford	Township Clerk
TRudy Hershberger Clerk 5. Committee's Mailing Address	4b. County of Resi	1101100
		me & Residential Address
3640 Knepper	1	alya Dunton
LAmbertville, Mi 48144		Fernwood
	Temp	Perance, Mi 48182
Area Code and Phone 734 854 503.2		
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.	Area Code & Bhar	ne 734-847-0337
7. Treasurer's Business Address	Designated Reco	ecord keeper's Name and Mailing Address (If the committee has a ord keeper)
MARILYN Dunton 2438 Fernwood		dd Hershberger
2438 761 1000	3	640 Knepper
Temperance, Mi 48182	L	Ambert Ville, M. 48144
Area Code and Phone 734 -847-0337	Area Code and P	hone 734 854 503 Z
9. TYPE OF STATEMENT	.1	
9a. Pre-Election OR 9b. Pos	st-Election	9c. Arınual Statement (Coverage Year)
Pos J. Pre-Election OK 9b. Pos	st-Election	, and state of the
Pre-Election or Post-Election Statement relates to:		9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)
	-	9e. Dissolution of Candidate Committee
Primary Ge	neral	
Convention	thool	Effective Date of Dissolution
Special Ca	ucus	
L Cd	-	By checking this item, IWe certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if
Date of Election, Convention or Caucus		the dissolution cannot be granted, that this be considered a request for
8-7-2012	181	the Reporting Waiver. Note: The disposition of residual funds must be reported on Schedule
	onuland O	1B and the Summary Page.
Schedules. Direct contributions, in-kind contributions, loans, exp	enditures, and outsta	Statements. The Campaign Statements must include all applicable anding 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 chan amendment to the Statement of Organization should accompany before the filling deadline of a required campaign statement.	ged since the inform this Campaign State that campaign stat	nation was shown on the committee's Statement of Organization, an ement. If a request for a Reporting Waiver is not received on or ement cannot be waived.
10. Verification: I/We certify that all reasonable diligence was used	in the preparation of	of this statement and attached schedules (if any) and to the best of
my/our knowledge and belief the contents are true, accurate and of	complete.	11 2 1 4
Current Treasurer or Designated Record keeper MARILYN L. ()	unton /	Varily Durla-pola 7-23-12
Type or Print Name	Signature	Date
Tool Hoodbase		n 22 12
Candidate INLOW Type or Print Name	Signature	half Date 1-d3-ld



SUMMARY PAGE CANDIDATE COMMITTEE 1. Committee I.D. Number 45-4627469 COMMITTEE TO ELECT TRUCKY 2. Committee Name Hersh Werger Clerk

RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 2445	* * * * * * * * * * * * * * * * * * *
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) s 2445.00	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>2445.00</u>	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES	20180	
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) s <u>2671.80</u>	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) S	(22.) \$
EXPENDITURES		
8. Expenditures	- 42-	2
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ 4977.	
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.) s 4977.02	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS	(10b.) \$	
(Add Line 10a + Line 10b)	(11.) \$	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.)	(27.) V
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	×	
	(12b.) SBALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) S O	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + s <u>2445</u> .00	
(Line 5, Total Contributions & Other Receipts)	(15.) = S	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.) - s 4977.02	
(Add lines 9 and 11) 17. ENDING BALANCE	(17.) s (2532.02)	*
(Subtract line 16 from line 15)		



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number	45	4/2	746	7
(')	11/1/1/	TIEE.	10	c/057

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount. 3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 2-17-12 Name & Address: Hers In berger, Alice E. 6844 Lexington PL Tem Perance, M, U8182 5. If over \$100.00 cumulative, please provide: Occupation Retired Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 2-19-12 Name & Address Hers g, Brenda L. Quo TACKMAN Rd Temperance, M; U8182	s 500°C	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address: Hersh berger, Alice E. 6844 Lexington PL Templer Ance, M., 48182 5. If over \$100.00 cumulative, please provide: Occupation Betical Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 2-19-12 Name & Address Hersg Borenda L. Occupation #2 PAC Receipt? TACKMAN Rd		s or Memo Itemization
Name & Address Hersg Brenda L. DALLO JACKMAN Rd		and the second control of the second
5. If over \$100.00 cumulative, please provide: Comparison	s 100 a	\$ r Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	de filiabilità de que se es esta de filia de fi	ton Zahlar koolokkoo uurunkuurunkuurunka poka kolokko kok liinkoolo kilok
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 2-20-12 Name & Address: Frederick, R. Lamar 3254 Deer Creek Lambert Ville, Mi 48144 5. If over \$100.00 cumulative, please provide: Occupation (Manty Commission Employer Monroe Co. Mi. Business Address Type of Contribution: Direct Loan from a person Fund Raiser	s 400 00	. \$r Memo Itemization
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 2-20-12 Name & Address FREDERICK CAROL H, 3254 Deer Creek Lambert ville, M, 48144 5. If over \$100.00 cumulative, please provide: Occupation Retired Employer Business Address Type of Contribution: A Direct Receipt? Type of Contribution: A Direct Receipt?	s 400 °C	sor Memo Itemization
Type of Contribution: Loan from a person Fund Raiser Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page	Enter this total on line 3a of Summar Page.	у

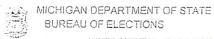


ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number	45 - 4627469	
Com	MITTEE TO Elect al	L
2. Committee Name TRH	dy Hershberger Cler	K

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 10-25-12 Name & Address: Dunton, MARILYN L. 2438 Fernwood Temperature, M., 48182 5. If over \$100.00 cumulative, please provide:	s 100.00 s
Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt (0-25-12) Name & Address Hershberger Ashlynn M, 3640 Knepper	
LAMberwille, Mi 48144	\$ <u>5</u> <u>6</u> .
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Dental Assistan Temployer Pero, Glinka & VOSS	
Business Address MAUMEE, Ohio	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5-25-12 Name & Address: BARton, DAIE 7836 Summerfield LAmbertville, M, 48144 5. If over \$100.00 cumulative, please provide: Occupation Employer	s S s S Click Here for Memo Itemization
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 4-4-12 Name & Address FRODISH, DUWAYNE 1387 Winding WAY Temferance, M., 48182 5. If over \$100.00 cumulative, please provide:	s 50 s
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
Page Subtotal	470 00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on
Page $\frac{2}{3}$ of $\frac{3}{3}$	line 3a of Summary Page.



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

Committee I.D. Number	45-4627469
2. Committee Name TRUN	mittee to Electrerk

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 3-2-12 Name & Address: J.B.E.W C.O.P.E. 900 7tl St WAShington, DC 2000 5. If over \$100.00 cumulative, please provide: Occupation Electrical Managements	s 250 ° s Click Here for Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 4-4-12 Name & Address Minges Mike GO48 Summerfield Temperance, Mi 48182 5. If over \$100.00 cumulative, please provide:	s 75 dd s Click Here for Memo Itemization
Occupation Employer	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 7-3-12 Name & Address; C (0 ROCH, John N Loss Polyck Dirtmond LAmbertulle M, 48144 5. If over \$100.00 cumulative, please provide:	s_50 ss_Click Here for Memo Itemization
Occupation Employer	
Business Address	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address	ss
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal	37600
Grand Total of All Schedules 1A (Complete on last page of Schedule)	1445



ITEMIZED IN-KIND C

ITEMIZED IN-KIND CONTR	RIBUTIONS 45	-4627469
SCHEDULE 1-IF		To Glent
CANDIDATE COMM	11200	hberger clerk
Name and Address from whom received if contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services we purchased	7. Amount or Fair Market Value System (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	
Name & Address: HERSHBERGEC, TRUDY L	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others	s 61296 s
3640 KREFFER LAPS BESTVILLE, MY, 48144 If over \$100.00 cumulative, please provide:	Goods or Services Purchased by Candidate or Others- LOA Description Pastage & Marling	.N
Occupation: Clerk Employer Name & Business Address: Bed Ford Township	5. Date Of Receipt: 6 22 12	-
JACKMAN KO TEMPERANCE, MI	6. Vendor Name & Address: MAIL WORKS 5272 TRACTOK Rd STE J.	Click Here for Memo Itemization
Fund Raiser Contribution	Toledo, Ohio 43612	, e
Contribution # 2 PAC Receipt? Yes Name & Address	4. Endorsement or Guarantee of Bank Loan	
Hersh berger, Trudy L	Goods Donated or Loaned Services Donated	0 17,116,00
3640 Knepper	Goods or Services Purchased by Candidate or Others	\$ 1744.00 \$ 2356.96
LAmbertville, Mi 48144	Goods or Services Purchased by Candidate or Others- LO.	AN ·
If over \$100.00 cumulative, please provide:	Description YARD SIGNS	
Occupation: CIERK	5. Date Of Receipt: 7-6-12	
Employer Name & Address: Bed FORD TO WASKIP JACKMAN Rd TEMPERANCE, MI	6. Vendor Name & Address: CREATIVE PROMOTIONS 3325 W TEMPERANCE Rd	Click Here for Memo Itemization
Fund Raiser Contribution	2 LAmbertuille, Mi 48144	
Contribution #3 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	20190
Name & Address: Hershberger, TRudy L	Goods Donated or Loaned Services Donated	s 124 = \$ 2481.86
3640 Kne Pler	Goods or Services Purchased by Candidate or Others	
13640 Kne Přer LAMbertville, Mi 48149	Goods or Services Purchased by Candidate or Others- LO	AN
If over \$100.00 cumulative, please provide:	Description Logo T-Shirts	
Occupation: Clark	5. Date Of Receipt: 7-6-12	. · ·
Employer Name & Address: Bell ford Township TACKMAN Rd	6. Vendor Name & Address: Michigan Silkscreen	Click Here for Memo Itemization
Temperance, Mi 4818	2 Sylvania, oh 43560	
Fund Raiser Contribution	-dinamin' on 1-2-	
	Page Su	btotal 2481.86 2481.86
	Grand Total of all Schedule (Complete on last page of Sch	

Page 1 of 2

Enter this total on line 6 of Summary Page

ITEMIZED IN-KIND CONTRIBUTIONS 1. Committee I. D. Number

SCHEDULE 1-IF	1. Committee 1. D. Number	70 Ele	e I
CANDIDATE COMM	IITTEE 2. Committee Name TRINGY HEYSH	berger C	Ie RY
are and Address from whom received control is from an individual, enter last are first. Oheck box to indicate if contribution are a Political Committee or an Independent of Titlee (Both are commonly called PACs).	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Fund Raiser Contribution	3363 Hemorine WAW 1	Ck Here for Memo Ite	
Contribution # 2 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	\$	
If over \$100.00 cumulative, please provide: Cooperion: Employer Name & Address: Fund Raiser Contribution	Description	ck Here for Memo Ite	emization
Pond Raiser Contribution Contribution #3 PAC Receipt? Yes vame & Address: flower \$100.00 cumulative, please provide:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Sorvices Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	\$	
Occupation: Employer Name & Address:	Description	ick Here for Memo It	emization
Fund Raiser Contribution		1	
	Page Subtota Grand Total of all Schedules 1-I (Complete on last page of Schedule	K 267).86	2671.86
Page 7 of 7			

45-4627469



SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number	45-462746	9
(0,	nmittee to E	leat
2. Committee Name TR	ndy Hershberge	- CleKK

Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Expenditure #1	
Name Huntington Bank	3-6-12 \$ 12.95
Address Secont Rd	Purpose: Check Fee Date
LAMBert Ville, Mi 48144	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #2	*
Name Office MAX	2-12-12 . 1 . 1 . 16
5221 MonRoe St Address	Purpose: Office Supplies Date
Address Toledo, Ohio 43623	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #3	
Name Campuign Partners	3-14-12 = 2000
Address 16 Dudley	Purpose: Website fee 3-14-12 \$ 29.00
Fitch burg, MA	Click Here for Memo Itemization Type
01420	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous
	statement
Expenditure #4	
Name Michigan Silkscreen	3-15-12 49
Address 5354 Whiteford Rd	Purpose: Logo t-Shirts 3-15-12 s 114.47
Calyania A	Click Here for Memo Itemization Type
Sylvania, ch. 43560	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous statement
Expenditure #5	
Name Glacier Hills	
Address 1200 EARHART	Purpose: Color Cofies 3-20-12 \$27,50
A A A L	Click Here for Memo Itemization Type
Ann Arbor, M. 48105	Check box if this expenditure is payment of debt or obligation reported on previous
Fund Raiser	statement .
	Subtotal this page 292.80
	Grand Total of all Schedules 1B (Complete on last page of Schedule)

Enter this total on line 8a of Summary Page

Page ____ of _____



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

	45	462	- 1469	
1. Committee I. D. No	ımber	****	1	_
	committee	: 10	Elect	
2 Committee Name	TRUJU Hershk	securer (IERK	

Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Expenditure #1 Name (Am Paign) Partners	11-16-12
Name (Armaign Tarmer)	4-16-12s 2900
Address 16 Dudley	Purpose: Website fee Date
Fitch burg, MA	Click Here for Memo Itemization Type
Total Daily Mills	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous statement
Expenditure #2	
Name CAMPaign Partners	5-14-12: 29 00
Address 16 Diadle	Purpose: Web Site fee 5-14-12 \$ 29 00
Fitch burg, MA 01420	Click Here for Memo Itemization Type
+ Irch burg, of the	
) Parameter	Check box if this expenditure is payment of debt or obligation reported on previous
Fund Raiser	statement
Expenditure #3	
Name Campaign Partners	1-14-12 - 70.00
Address 16 Dudley	Purpose: Website See 6-14-12 \$ 2900
	Purpose: CORD JULY C
Fitchburg, MA 01420	Click Here for Memo Itemization Type
01420	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous statement
Expenditure #4	VALOUTOIN .
Name Help Printers	
Help IIII	621-12 \$ 295 10
Address 9673 Lewis	Purpose: CAMPaign Flyers Date \$39570
Temperance, Mi 48182	Click Here for Memo Itemization Type
48107	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous
	statement
Expenditure #5	
Name MAIL WORKS	6-22-12 11296
Address 5272 TRACTOR PL STE J.	Purpose: Postage & MAILING Date \$ 612.
toledo Ohio 43612	Click Here for Memo Itemization Type
	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous statement
	Subtotal this page 1095.66
	Grand Total of all Schedules 1B
	(Complete on last page of Schedule)

Enter this total on line 8a of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE 2. Ca	ommittee I. D. Number 45-46: Committee Name TRINGY Hersh	27469 to Elect herger Clerk
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1 Name Creative Promotions Address 3325 W Temperance	Purpose: YARD Sighs	7-6-12 s 1500.
Lambertville, M. 48144	. Clic	ck Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous statement	of
Expenditure #2 Name CAMPAIGN Partners	Purpose: Website Fee	7-14-12 \$ 29 00 Date
Address 16 Dudley Fitch burg MA		ck Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous statement	
Expenditure #3	Statement	
Name Michigan Silk Screen Address 5354 Whiteford Rd	Purpose: Logo + Shints	7-6-12 \$ 12490 Date
6 1/2 0 0		
Sylvania, Oh 43560	Check box if this expenditure is payment debt or obligation reported on previous	of .
Fund Raiser	statement	
Expenditure #4 Name Creative Promotions Address 3325 W. Temperance & Lambertville, M. 48144		7-6-12 \$ 1744. Ck Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous statement	
Expenditure #5		
Name Bedford Press Address 3363 Hemmingway	Purpose: NewsPAPer Ad	7-16-12 s 190°0
Lambertville, M. 48144	Cli Check box if this expenditure is payment	ck Here for Memo Itemization Type t of
Fund Raiser	debt or obligation reported on previous statement	
	S	ubtotal this page 2588 56

Grand Total of all Schedules 1B

(Complete on last page of Schedule)

Enter this total on line 8a of Summary Page