Page 1

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full		
Committee for Dave Lundrega	n	
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC
Dave Lundregan		Mayor own Hunner, a 1 M C
Street Address	Description of Item or Service	Will be the transfer of the tr
5709 Tynecastle Loop	pexcipound trailor service	M D Y Fair Market Value
7707 Tyriecastie Loop		<u> </u>
City	State Zip Code	Received at Fundraising Event?
Dublin	O H 43016	☐ YES ☑ NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC
Dave Lundregan		
Street Address	Description of Item or Service	MI Di IVI III II I
5709 Tynecastle Loop	Description harries	M D Y Fair Market Value
		1 0 3 0 0 7 2,200.00
City	State Zip Code	Received at Fundraising Event?
<u>Dublin</u>	O H 43016	☐ YES ☑ NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC
		,
Street Address	Description of Item or Service	Mi Di Di Irana
	Description tenior service	M D Y Faix Market Value
City		
City	State Zip Code	Received at Fundraising Event?
	<u>_</u>	YES NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC
	1 - /	
Street Address	Description of Item or Service	MI I NI I TO I TO I TO I TO I TO I TO I T
	pestigion of heart of service	M D Y Fair Market Value
P)		
City	State Zip Code	Received at Fundraising Event?
		│ │ YES │ NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC
	1 - 1	
Street Address	Description of Item or Service	M DI Y Fair Market Value
	Downgamia hama yervee	M D Y Fair Market Value
City		
cxy	State Zap Code	Received at Fundraising Event?
		∐YE5 □NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC
Street Address	Description of Item or Service	M D Y Fair Market Value
	a see speed of a see of the see o	In D I I Parmarket Value
City		
Ску	State Zip Code	Received at Fundraising Event?
		YES NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC
	<u> </u>	
Street Address	Description of Item or Service	M D Y Fair Market Value
	Description Range Jetype	M D Y Fair Market Value
<u> </u>		
City	State Zip Code	Received at Fundraising Event?
<u> </u>	i	YES NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC
Street Address	Description of Item or Service	W Di W Friday
	Describent of rest of Service	M D Y Fair Market Value
m		
City	State Zip Code	Received at Fundraising Event?
		YES NO
		

Page Total \$ 4,200.00

^{*} Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroil deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. (R.C. 3517.10(E)(4))