

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>WM Lotz</u>			
Full Name of Contributor <u>Bill Lotz</u>		Employer, Occupation, Labor Organization*	
Street Address <u>3800 ZUBER RD</u>		Description of Item or Service <u>FORGIVEN LOAN</u>	
City <u>ORIENT</u>		State <u>OH</u>	Zip Code <u>43146</u>
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State <u>OH</u>	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State <u>OH</u>	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State <u>OH</u>	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State <u>OH</u>	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
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Street Address		Description of Item or Service	
City		State <u>OH</u>	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	

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