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UNITED STATES HOUSE OF REPRESENTATIVES For Ne	FORM B For New Members, Candidates, and New Employees	Constanting upper of 7
Name: Lorence R. Wenke Daytim	Daytime Telephone	US ROUST OF RESPECT LATIVES
New Member of or Candidate for State: U.S. House of Representatives District: 6 Candidates – Date of Election:	Check if Amendment	(Office Use Only)
New Officer or Employee Employing Office:	Period Covered: January 1,to	A \$200 penaity shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	SE QUESTIONS	
A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Make more than \$200 in unearmed income from any reportable asset during the reporting period?	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	ing the reporting period Yes No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes No reporting period?	F. Do you have any repo outside entity during the year up through the date	ortable agreement or arrangement with an reporting period or in the current calendar Yes No No filing?
D. Did you, your spouse, or your dependent child have any reportable Yes No No	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	an \$5,000 from a single Yes No No
ATTACH THE CORRESPONDING SCHEDULE IF YOU. THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE	NDING SCHEDULE IF YOU ANSWER "YES" HEDULES THAT YOU ARE REQUIRED TO COMPLETE	S" COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BO	RMATION - ANSWER <u>BOTH</u> OF THES	TH OF THESE QUESTIONS
TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need this report details of such a trust that benefits you, your spouse, or dependent child?		not be disclosed. Have you excluded from Yes No X
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	liabilities of a spouse or dependent child because they meerics.	t all three tests for Yes No

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Lorence R. Wenke

Page 2 of 7

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Name: Lorence Wentle

SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Lorenze Wenju

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Name: jorne Wen/2 Page_

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below. **EXCLUDE**: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2015 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,225. The 2016 limit is \$27,495. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

		Am	Amount
Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples: State of Maryland City 2) Contain County Road of Education	Spouse Speech	\$20,000 \$0	\$76,000 \$1,000
Michigan Commer Products	Director France	2 4 2	5 000
		ø	
Grower Properties LLC	Distribution	*L/0,000	40,000
Sunder Greenwas	Distronton	6, 685, 14	9
Weake Greenhouses	Distribution	102,80	8,150°
Family Trat	P Tran	1959CB	523,°
Personal Checking	Integr	494.98	298.61
Wenter Correctionses	Interest	80,000	60, 164.38
Weath Properties Mortgage	Interat	\$ 11,600.03	\$9, 903°99
Rent Received Personal	Deter Rent	\$80,757.90	81,585.50
Weake Greenwar Rent	Rear	€ (760.°°	73, 42900
Social Securty Drame horence Wealle	5,5	00	30,520,0
Social Security Drewne Namy Wente	2.2	9,895.00	39,196,00

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(unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a **revolving charge account** (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child. period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting

						SP, DC, JT	
		1	Z 0	-	Example		
			No Crezitons on layou	4	First Bank of Wilmington, DE	Creditor	
					5/98	Date Liability Incurred MO/YR	
					Mortgage on Rental Property, Dover, DE	Type of Liability	
			, , , \ \ \ , , , , , , , , , , , , , ,	* * * * * * * * * * * * * * * * * * * *		\$10,001- \$15,000	
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~ {		v				\$50,001~ \$100,000	
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				, ,		\$25,000,001- \$50,000,000	
						Over \$50,000,000 _	
						Over \$1,000,000° (Spouse/DC Liability)	

SCHEDULE E - POSITIONS

the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or

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B& Member	Member	Bd Member	BE Member Weake Greenhouses	Position	Territ caleridat year. The tryear candidates and from t
BBCÓW (Doperties (Gamer Groperties)	Michigan Grower Probet	Sombelt Greenhouse	Wenke Greenhouses	Name of Organization	are varient calendary year. They year warming was in they see to post postucionaria and the previous years.

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Identify the da	Name: しのている ldentify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment that you have y	Name: LOTTRE WENKE Page 6 of Page 6
Identify the da continuation o	ate, parties to, and general terms of any agreement or arrangement that you hav or deferral of payments by a former or current employer other than the U.S. gove	Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.
Date	Parties to Agreement	Terms of Agreement
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SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

government and any information considered confidence as a result of a	усиеннен ана ану пноннавин сильшено сонценцана в а техни от а римперец текниот при судител су таж. То постервах пноннавин выво от эсливане с.
Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
C	
Chetha	

Use additional sheets if more space is required.

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FILER NOTES (Optional)

Name: