FOR PAPER FILING ONLY Statement of Contributions Received

Prescribed by Secretary of State 03/05

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Name of Committee in Full Citizens for Kin Maggard							
Name of Committee in Full Citizens for Kim Maggard Full Name of Contributor Jim and Norma Bukoyski Street Address Hayle Medical Ave Employer/Occupation/Labor Organization City State Zip Code Whitehali, Ohio OH 43213 Full Name of Contributor			Registration Number, if PAC				
Street Address 4246 Medical AVe	Employer/Occupat	ijon/Labor Organization*				Form (Cash, Cleck, Mc.)	
whitehell, Ohio	State O H	etined Zip Code 43213	1/2	107	1/2	Amount	
ull Name of Contributor			Registration Number, if PAC				
Street Address	Employer/Occupat	<u>.</u>			Form (Cash, Check, etc.)		
City	State O H	Zip Code	M	D	Y	Amount	
Contributor Contributor Contributor Registration Number, if F Contributors Registration Number, if F Figures (Occupation) about regarization						AC .	
Street Address	Employer/Occupati	31-E			Form (Cash, Check, etc.)		
City	State O H	Zip Code	M 12	D 2	1/2	Amount 955.00	
Full Name of Contributor				Registration Number, if PAC			
Street Address	Employer/Occupati				Form (Cash, Check, etc.)		
City	State O H	Zip Code	M	D	Y	Amount	
Full Name of Contributor				Registration Number, if PAC			
Street Address	Employer/Occupati	ion/Labor Organization*				Form (Cash, Check, etc.)	
City	State O H	Zip Code	M	D	Y	Amount	
Full Name of Contributor Registra					tration Number, if PAC		
Street Address	Employer/Occupati	. Form (Cash, Check, etc.)					
City	State O H	Zip Code	M	D	Y	Amount	
Full Name of Contributor Registration Number					nber, if PA	AC	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City	State O H	Zip Code	М	D	Y	Amount	
Full Name of Contributor Registration Number, if F						AC	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City	State O H	Zip Code	M	D	Y	Атоия	

^{*} 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 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)]