Statement of Contributions Received



Prescribed by Secretary of State 03/05

Name of Committee in Full Cibizens For Lim Maggard Full Name of Contributor Registration Number, if PAC				
Full Name of Contributor Lani Shultz			Registration Number, if	
Street Address 4085 Etna Street	Employer/Occupation/Labor Organization Retired State Zip Code OH 43213			Form (Cash, Check etc.) Check Amount 15 00.
City Whitehall	State OH	Zip Code 43213	Registration Number, if	
Full Name of Contributor LDN i Shultz Street Address Employer/Occupation/Labor Organization Registration Number, If PAC City Whitehall Full Name of Contributor Contributor Contributor Contributor Employer/Occupation/Labor Organization Registration Number, if PAC Registration Number, if PAC Contributor Employer/Occupation/Labor Organization Form (Cash, Check, etc.)				
Street Address	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)
City	State	Zip Code	09/01/	/Anount
Full Name of Contributor				
Street Address	Employer/Occupa	ntion/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount
Full Name of Contributor Registration Number, if PAC				
Street Address	Employer/Occupa	ation/Labor Organization*	<u>I</u>	Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount
Full Name of Contributor Registration Number, if PAC				
Street Address	Employer/Occupa	stion/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount
Full Name of Contributor Registration Number, if I				PAC
Street Address	Employer/Occupa	ation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount
Full Name of Contributor			Registration Number, it	PAC
Street Address	Employer/Occup	ation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount
Full Name of Contributor	Contributor Registration Number, if P/			PAC
Street Address	Employer/Occup	ation/Labor Organization		Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount

Page Total \$ 3,150.00

^{*} 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 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)]