



NEW YORK STATE
Unified Court System

OFFICE OF COURT ADMINISTRATION
ATTORNEY REGISTRATION UNIT

RECEIPT

September 28, 2019

JACOB R. BUCZKO
7617 HOLLYWOOD BLVD
LOS ANGELES, CA 90046-2709

Attorney Registration #: 4351011
Batch #: Online
Process Date: 09/28/2019
Receipt #: 660710
Credit Card Ending In: 5865
Credit Transaction #:
280919A43-0F8084F5-E2B6-4B76-AC87-9B467F3F582B
Authorization Code: 38251P
Next Registration: October 2021
Registration Status: Currently registered

This will acknowledge receipt of your 2019-2020 registration as an attorney and receipt of the \$375.00 fee.

Name: JACOB R. BUCZKO

First: JACOB
Middle: R.
Last: BUCZKO
Suffix:

DOB: XX/XX/1979

SSN: XXX-XX-8387

Social Security numbers are required in order to administer the collection of revenue from attorney registration fees 42 U.S.C. § 405 (c)(2)(C)(i). Your Social Security number will not be made public. The first 5 digits have been concealed to protect your identity.

Admission Data:

Year Admitted to the NYS Bar: 2005
Judicial Dept. of Admission: 1

Law School: COLUMBIA

Business Address:

Russ August & Kabat
12424 Wilshire Blvd FL 12
Los Angeles, CA 90025-1052

Home Address:

(Note: Is public information if no business is listed.)

7617 Hollywood Blvd
Los Angeles, CA 90046-2709

Business County: Out of State

Home County: Out of State

Business Phone: (310) 826-7474

e-mail (optional): jbuczko@raklaw.com

Note: If provided, the e-mail address will be made public.

Our records contain information above, return only if changes to the above are required and retain a copy for your records.

Please review the above information on this receipt for accuracy. The Rules of the Chief Administrator require that this office be notified of any changes in the above information within 30 days of any such change. If changes are required you may make them online or by mail.

▣ **Online** 1) Go to www.nycourts.gov and Attorney Online Services 2) Make desired changes 3) Print a corrected receipt.

- OR -

▣ **By Mail** 1) Circle the item 2) Enter the correct information directly on the receipt 3) Sign and date the receipt 4) Return to the address at the bottom of the receipt. You will receive a new receipt by mail acknowledging the above changes made.

Signature: _____

Date: _____

Certifications Recorded:

Child Support Oblig. §3-503: No Obligation

Part 1200 (1.15) Affirmation: Not Applicable

CLE: Certified as Exempt

Pro Bono Reported: Yes

