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## **Statement of Contributions Received**

Prescribed by Secretary of State 03/05

Name of Committee in Full							
Friends of Liliana Rivera Baiman							
Full Name of Contributor			Registration Number, i	fPAC			
Donna Christman							
Street Address	Employer/	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)			
Street Address 1214 Park Ave		nsultant, Ohio Educati		online portal			
	State	Zip Code	Date	Amount			
City	OH	45320	10/17/2019	\$50.00			
Eaton Full Name of Contributor	V11	13320	Registration Number, i				
Scott Maney	Em-1	Occupation/I -1 O	ization*	Form (Cash, Check, etc.)			
Street Address	Employer/Occupation/Labor Organization*  Consultant, Ohio Education Association						
835 Antler Pt			T	online portal Amount			
City	State	Zip Code	Date				
Dayton	ОН	45459	10/17/2019  Registration Number, i	\$50.00			
Full Name of Contributor							
Todd Jaeck				г			
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
49 Canterbury Dr	Consultar		T=	online portal			
City	State	Zip Code	Date	Amount			
Athens	ОН	45701	10/17/2019	\$50.00			
Full Name of Contributor	Full Name of Contributor Registration Num						
John Avouris							
Street Address				Form (Cash, Check, etc.)			
5806 Horning Rd	Labor Re	presentative, Ohio Ed	ucation Association	online portal			
City	State	Zip Code	Date	Amount			
Kent	ОН	44240	10/17/2019	\$25.00			
Full Name of Contributor	Registration Number,						
Alexander Reusing							
Street Address	Emplover/	/Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)			
218 W Gorgas Lane		er, SEIU Healthcare PA		online portal			
City	State	Zip Code	Date	Amount			
Philadelphia	PA	19119	10/17/2019	\$21.00			
Full Name of Contributor			Registration Number,				
Corey Glover							
Corey Glover Street Address	Employer	/Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)			
	Courier, Capital Courier Services			online portal			
801 S Main St Apt 76	State	Zip Code	Date	Amount			
City Mount Holly	NC NC	28120	10/18/2019	\$3.00			
Mount Holly Full Name of Contributor	Twe	20120	Registration Number,				
Full Name of Contributor	registration (vuiliber,	<del></del>					
Barbara Fleming	nization*	Form (Cash, Check, etc.)					
Street Address	1						
2612 Glenmawr Ave		Zip Code		online portal Amount			
City	State	Zip Code	Date	Amount \$18.07			
Columbus	ОН		10/18/2019				
Full Name of Contributor Registration Number, if PAC							
Michael Kraemer							
Street Address		r/Occupation/Labor Orga		Form (Cash, Check, etc.)			
1866 Northwest Blvd Apt. D		ployed, Not Employed		online portal			
City	State	Zip Code	Date	Amount			
Columbus	ОН	43212	10/19/2019	\$120.00			

Page Total: \$337.07

<sup>\*</sup> 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)]