Page	3

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	Registration Number, if PAC	
			Registration Number	a, ii rac
Peter DeMay Street Address	Employe	er/Occupation/Labor C	rganization*	Form (Cash, Check, etc.)
		Organizer, Consulta		online portal
3709 S Honore	State	Zip Code	Date	Amount
Chicago	IL	60609	10/25/2019	\$56.00
Chicago Full Name of Contributor	IL.	00009	Registration Number	
Kathleen Gmeiner			Registration Number	a, ii i Ac
Street Address	Employ	er/Occupation/Labor (Propriestion*	Form (Cash, Check, etc.)
463 E Hinman Avenue		Employer/Occupation/Labor Organization* Project Director, UHCAN Ohio		online portal
City		State Zip Code Date		Amount
Columbus	OH	43207	10/25/2019	\$25.00
Full Name of Contributor	OII	43207	Registration Number	
Alex Davis			Registration (vulner	a, n i ne
Street Address	Employ	er/Occupation/Labor (Drugnization*	Form (Cash, Check, etc.)
4666 Blairfield Dr		ployed, Not Emplo		online portal
	State	Zip Code	Date	Amount
City Columbus	OH	43214	10/25/2019	\$25.00
Full Name of Contributor	ГОП	43214	Registration Number	
			Registration (various	u, ii 1110
Le Ron Carlton Street Address	Employ	er/Occupation/Labor (Organization*	Form (Cash, Check, etc.)
156 S 17th St	Employer/Occupation/Labor Organization* Engineer, LBrands		online portal	
	State	Zip Code	Date	Amount
City	OH	Zip code	10/25/2019	\$14.00
Columbus Full Name of Contributor	UH		Registration Number	
			Registration Number	ci, ii i AC
Austin McCabe Juhnke Street Address	Employ	er/Occupation/Labor (Organization*	Form (Cash, Check, etc.)
	Employer/Occupation/Labor Organization* Not Employed, Not Employed		online portal	
3162 Indianola Ave Apt D City	State	Zip Code	Date	Amount
1 '	OH	43202	10/27/2019	\$20.00
Columbus Full Name of Contributor	JOH	43202	Registration Numb	
			Registration (value	or, in the
Jon Dailey Street Address	Employ	er/Occupation/Labor	Organization*	Form (Cash, Check, etc.)
		re Developer, ICF 1		online portal
767 Thurber Dr W	State	Zip Code	Date	Amount
City	OH	43215	10/27/2019	\$15.00
Columbus	Оп	43213	Registration Numb	
Full Name of Contributor			registration (valid	,
Jacob Rochester	Employ	or/Occupation/Labor	Organization*	Form (Cash, Check, etc.)
Street Address	Employer/Occupation/Labor Organization*		online portal	
2654 Adams Ave	Graduate Research Associate, The Ohio State University		omme portar	
City	State	Zip Code	Date	Amount
Columbus	ОН	43202	10/27/2019	\$10.00
Full Name of Contributor			Registration Numb	er, if PAC
Will Klatt				
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
80 e lakeview	Organizer, Oea		online portal	
City	State	Zip Code	Date	Amount
Calumbus	OH	43202	10/28/2019	\$1,000.00

Page Total: \$1,165.00

^{*} 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)]