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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						
Friends of Liliana Rivera Balman Full Name of Contributor			Registration Number	Registration Number, if PAC		
Clauser Nathanael				Form (Cash, Check, etc.)		
Street Address	Employer	Employer/Occupation/Labor Organization*				
12C Warwick St.		y Fish & Richardse	online portal			
	State	Zip Code	Date	Amount		
City Somerville	MA	2145	07/19/2019	\$11.00		
Somerville				gistration Number, if PAC		
				Form (Cash, Check, etc.)		
Redfern Eli Street Address	Employe	Employer/Occupation/Labor Organization*				
		tive Fellow State of	online portal			
366 s Richardson Ave	State	Zip Code	Amount			
City	OH	43204	Date 07/20/2019	\$25.00		
Columbus	On	15204	Registration Number			
Full Name of Contributor			- Sionadon Hanto			
Preston Dean	- In. 1	Employer/Occupation/Labor Organization*				
Street Address			Form (Cash, Check, etc.) online portal			
1045 Hayes Street	not app		Date	Amount		
City	State	Zip Code	Date 07/21/2019	\$500.00		
San Francisco	CA	94117	Registration Numb			
Full Name of Contributor	-		Registration Numb	u, ii i AC		
Travers Peter				Form (Cash, Check, etc.)		
Street Address	_ · ·	Employer/Occupation/Labor Organization*				
4134 11th Ave NE Apt 3	not app			online portal		
City	State	Zip Code	Date	Amount		
Seattle	WA	98105	07/21/2019	\$250.00		
Full Name of Contributor	per, if PAC					
Cooney Thomas				Form (Cash, Check, etc.)		
Street Address	Employ	Employer/Occupation/Labor Organization*				
475 Mansfield View Road		not applicable		online portal		
City	State	Zip Code	Date	Amount		
	VT	5672	07/22/2019	\$50.00		
Stowe Full Name of Contributor		Registration Numb				
			<u> </u>			
Rotter Andrei	Employ	yer/Occupation/Labo	Form (Cash, Check, etc.)			
Street Address		sor The Ohio State	online portal			
3136 Kingsdale Ctr #115	State	Zip Code	Date	Amount		
City	OH	43221	07/22/2019	\$5.00		
Columbus	I OH	73221	Registration Num			
Full Name of Contributor			registration runn	•		
Gottel Neil	<del></del>	yer/Occupation/Labo	or Organization*	Form (Cash, Check, etc.)		
Street Address			or Organization	online portal		
3950 Mahaila Avenue M14		Manager UCSD	T Data	Amount		
City	State	Zip Code	Date	\$25.00		
San Diego	CA	92122	07/22/2019			
Full Name of Contributor			Registration Num	ioer, ii fAC		
Flannery Matthew				Para (Carl Object or )		
Street Address		oyer/Occupation/Lab	Form (Cash, Check, etc.)			
712 S 2 Av	not ap	oplicable	online portal			
City	State	Zip Code	Date	Amount		
Highland Park	NJ	8904	07/23/2019	\$11.00		

Page Total: \$877.00

<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)]