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	if PAC
Randal Ott				
Street Address	Employer/	Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)
301 NW 13th Ave		Gleim Publications Inc.		online portal
City	State	Zip Code	Date	Amount
Gainesville	FL	32601	09/07/2019	\$20.00
Full Name of Contributor			Registration Number, i	
Michael McEachern				
Street Address	Employer/	/Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)
14607 Lake Meadows Dr.		elations, OEA		online portal
City	State	Zip Code	Date	Amount
Perrysburg	ОН		09/10/2019	\$25.00
Full Name of Contributor			Registration Number, i	if PAC
Hilary Conley				
Street Address		Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)
7386 terrace view court	LRC, OE.			online portal
City	State	Zip Code	Date	Amount
Reynoldsburg	ОН	43068	09/11/2019	\$50.00
Full Name of Contributor	Registration Numb			if PAC
Jess Paul Attilli				
Street Address	1	/Occupation/Labor Organ		Form (Cash, Check, etc.)
5229 Crested Owl Court		nt, Ohio Education Ass	sociation	online portal
City	State	Zip Code	Date	Amount
Morrow	ОН	45152	09/11/2019	\$100.00
Full Name of Contributor			Registration Number, it	of PAC
Andrew Lin			<u></u>	
Street Address		Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)
3636 Osprey Lane	Not Appli			online portal
City	State	Zip Code	Date	Amount
Powell Full Name of Contributor	ОН	43065	09/12/2019	\$27.00
	Registration 14thin			f PAC
Trent Calloway Street Address	T			
		Occupation/Labor Organ		Form (Cash, Check, etc.)
5050A City		gner, Chemical Abstrac		online portal
	State	Zip Code	Date	Amount
Columbus Full Name of Contributor	ОН	43219	09/15/2019	\$25.00
responding 1			Registration Number, if	FPAC
Mike Hansen Street Address				
874 Swan Ln.			.ization*	Form (Cash, Check, etc.)
8/4 Swan Ln. City		Consultant, n/a	Т	online portal
Deerfield	State	Zip Code	Date	Amount
Full Name of Contributor	IL		09/15/2019	\$10.00
Full Name of Contributor Registration Number, if PAC Andrew Welsh				
Street Address	Employer/	Employer/Occupation/Labor Organization*		
124 E Patterson Ave.	1		Form (Cash, Check, etc.)	
124 L I ducison Ave.	University	Administrative Assistar Y	it, Onio State	online portal
City	State	Zip Code	Date	Amount
Columbus	ОН	43202	09/16/2019	\$20.00

^{*} 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)]