

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 Donna Christman			Registration Number, if PAC	
Street Address 1214 Park Ave	Employer/Occupation/Labor Organization* Labor Consultant, Ohio Education Association		Form (Cash, Check, etc.) online portal	
City Eaton	State OH	Zip Code 45320	Date 10/17/2019	Amount \$50.00
Full Name of Contributor Scott Maney			Registration Number, if PAC	
Street Address 835 Antler Pt	Employer/Occupation/Labor Organization* Consultant, Ohio Education Association		Form (Cash, Check, etc.) online portal	
City Dayton	State OH	Zip Code 45459	Date 10/17/2019	Amount \$50.00
Full Name of Contributor Todd Jaeck			Registration Number, if PAC	
Street Address 49 Canterbury Dr	Employer/Occupation/Labor Organization* Consultant, OEA		Form (Cash, Check, etc.) online portal	
City Athens	State OH	Zip Code 45701	Date 10/17/2019	Amount \$50.00
Full Name of Contributor John Avouris			Registration Number, if PAC	
Street Address 5806 Horning Rd	Employer/Occupation/Labor Organization* Labor Representative, Ohio Education Association		Form (Cash, Check, etc.) online portal	
City Kent	State OH	Zip Code 44240	Date 10/17/2019	Amount \$25.00
Full Name of Contributor Alexander Reusing			Registration Number, if PAC	
Street Address 218 W Gorgas Lane	Employer/Occupation/Labor Organization* Organizer, SEIU Healthcare PA		Form (Cash, Check, etc.) online portal	
City Philadelphia	State PA	Zip Code 19119	Date 10/17/2019	Amount \$21.00
Full Name of Contributor Corey Glover			Registration Number, if PAC	
Street Address 801 S Main St Apt 76	Employer/Occupation/Labor Organization* Courier, Capital Courier Services		Form (Cash, Check, etc.) online portal	
City Mount Holly	State NC	Zip Code 28120	Date 10/18/2019	Amount \$3.00
Full Name of Contributor Barbara Fleming			Registration Number, if PAC	
Street Address 2612 Glenmawr Ave	Employer/Occupation/Labor Organization* Not Employed, Not Employed		Form (Cash, Check, etc.) online portal	
City Columbus	State OH	Zip Code	Date 10/18/2019	Amount \$18.07
Full Name of Contributor Michael Kraemer			Registration Number, if PAC	
Street Address 1866 Northwest Blvd Apt. D	Employer/Occupation/Labor Organization* Not Employed, Not Employed		Form (Cash, Check, etc.) online portal	
City Columbus	State OH	Zip Code 43212	Date 10/19/2019	Amount \$120.00

* 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)]