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, if PAC	
Rachel Secttor				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
255 E Long St	Therapist, Affirmations			online portal
City	State	Zip Code	Date	Amount
Columbus	ОН	43215	10/07/2019	\$10.00
Full Name of Contributor				if PAC
Crossman Wilkins			,	1177.0
Street Address	Employer	Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)
124 Magnolia Ave Apt 1	1	Senior Manager Education & Enablement, ATT		online portal
City	State	Zip Code	Date	Amount
Jersey City	NJ	7306	10/08/2019	\$11.00
Full Name of Contributor			Registration Number,	
ester Allen			***************************************	IIIAC
Street Address	Employer/Occupation/Labor Organization*		nization*	Form (Cash, Check, etc.)
5526 Swingley Drive	Program Manager, Columbus Public Health			online portal
City	State	Zip Code	Date	Amount
Columbus	ОН	43230	10/09/2019	\$5.00
Full Name of Contributor		1	Registration Number,	
avid Jennings			,	II I I I
Street Address Employer/Occupation/Labor Organization*			nization*	Form (Cash, Check, etc.)
190 Powhatan Ave	Ops Specialist, Chase			online portal
City	State	Zip Code	Date	Amount
Columbus	ОН	43204	10/09/2019	\$3.00
Full Name of Contributor			Registration Number,	- <u></u>
THOMAS HADDOCK				
Street Address	Employer/	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)
196 Grant Park Dr.		LRC, OEA		online portal
City	State	Zip Code	Date	Amount
Dayton	KY	41074	10/09/2019	\$500.00
Full Name of Contributor			Registration Number, i	
Alex Nelson				
Street Address	Employer/	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)
70 Hayden Ave		Researcher, Ohio Education Association		online portal
City	State	Zip Code	Date	Amount
Columbus	ОН	43222	10/09/2019	\$100.00
Full Name of Contributor	<u></u>		Registration Number, i	
Taylor Hiestand				TTAC
Street Address	Employer/	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)
111 W. Hudson St. Apt. 1F	Community Support Assistant, Hucklebe			online portal
City	State	Zip Code	Date	Amount
Columbus	ОН	43202	10/10/2019	\$3.00
Full Name of Contributor			Registration Number, i	
Roger Doyle				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
360 Chittenden Ave	Not Applicable		online portal	
City	State	Zip Code	Date	Amount
Columbus	ОН		10/10/2019	\$100.00

^{*} 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)]