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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				
Full Name of Contributor	Registration Number, if PAC			
Nadell Brooke	_			
Street Address	Employe	r/Occupation/Labor O	rganization*	Form (Cash, Check, etc.)
606 W 113th St Apt 3C	not applicable			online portal
City	State	Zip Code	Date	Amount
New York	NY	10025	07/01/2019	\$8.00
Full Name of Contributor	Registration Number	Registration Number, if PAC		
Spires Kristy				
Street Address	Employe	er/Occupation/Labor O	rganization*	Form (Cash, Check, etc.)
3860 Carlotta st	CFO Ohio Education Association			online portal
City	State	Zip Code	Date	Amount
Grove City	ОН	43123	07/01/2019	\$25.00
Full Name of Contributor			Registration Number	r, if PAC
Ott Espinoza Randal				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
1982 Drury Ln	Quality Control / Testing Coordinator Gleim Interne			net online portal
City	State	Zip Code	Date	Amount
Columbus	ОН	43235	07/02/2019	\$5.00
Full Name of Contributor			Registration Number, if PAC	
Ott Randal				
Street Address	Employ	er/Occupation/Labor (Organization*	Form (Cash, Check, etc.)
301 NW 13th Ave	Tester Gleim Publications Inc.			online portal
City	State	Zip Code	Date	Amount
Gainesville	FL	32601	07/02/2019	\$5.00
Full Name of Contributor			Registration Number	er, if PAC
Cain Colleen				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
1197 Tillicum Dr.	Project coordinator CUSI tech			online portal
City	State	Zip Code	Date	Amount
Worthington	ОН	43085	07/09/2019	\$5.00
Full Name of Contributor	er, if PAC			
Smith Chad	T 1 10 1 T 1 - Our righting			
Street Address	Teacher Columbus City Schools			Form (Cash, Check, etc.) online portal
5628 Naiche Rd		Zip Code	Date	Amount
City	State	43213	07/09/2019	\$20.00
Columbus	ОН	43213	Registration Numb	
Full Name of Contributor			Registration Ivalia	y
Baiman Liliana Street Address Employer/Occupation/Labor of Employer/Occupa			Organization*	Form (Cash, Check, etc.)
Street Address				online portal
426 Reinhard Ave	Labor Liason Central Ohio State Zip Code		Date	Amount
City	State OH	43206	07/09/2019	\$25.00
Columbus	UH	73200	Registration Numb	
Full Name of Contributor			and the state of t	, · · ·
Inskeep Jordan	E1	yer/Occupation/Labor	Organization*	Form (Cash, Check, etc.)
Street Address		r Inskeep Printing		online portal
143 West Lakeview Ave.	State	Zip Code	Date	Amount
City	OH	43202	07/10/2019	\$18.07
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^{*} 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)]