Page 6

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full					
Friends of Liliana Rivera Baiman			Destact State	Registration Number, if PAC	
Full Name of Contributor			Registration Number	r, ii PAC	
Kestner Jeffrey				Form (Cash, Check, etc.)	
Street Address		Employer/Occupation/Labor Organization*			
231 Marietta St		Labor Relations Consultant Ohio Education Association		online portal	
City	State	Zip Code	Date	Amount	
Bremen	ОН	43107	08/28/2019	\$100.00	
Full Name of Contributor				Registration Number, if PAC	
Weckesser Phil					
Street Address	Employe	Employer/Occupation/Labor Organization*			
8158 Pelham Dr	1	Engineer Salas Obrien			
City	State	Zip Code	Date	Amount	
Westerville	ОН	43081	06/27/2019	\$50.00	
Full Name of Contributor		Registration Number		er, if PAC	
Messmer Jane					
Messmer Jane Street Address	Employ	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
	1	Attorney State of Ohio		online portal	
117 Highmeadow Drive City	State	Zip Code	Date	Amount	
Gahanna	ОН	43230	06/29/2019	\$10.00	
Full Name of Contributor			Registration Numb	er, if PAC	
wentz John Street Address	Employ	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
	1 .	barkanmeizlish/ Lawyer		check	
1173 Pennsylvania Ave,	State	Zip Code	Date	Amount	
Calumbus	oh	43201	07/13/2019	\$150.00	
Columbus Full Name of Contributor	011		Registration Numb	per, if PAC	
			OH1761		
THE MATRIOTS Street Address	Employ	rer/Occupation/Labor		Form (Cash, Check, etc.)	
	Zimpioy		-	check	
2470 E. MAIN ST	State	Zip Code	Date	Amount	
City	oh	43209	07/24/2019	\$2,500.00	
BEXLEY	- Uil	Registration Numb			
Full Name of Contributor		C00692137			
Vote Moma	Employ	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
Street Address	Emplo	Employer/Occupation/Labor Organization		check	
32 AVON PLACE	State	Zip Code	Date	Amount	
City		11701	06/21/2019	\$2,500.00	
Amityville,	ny	11701	Registration Num		
Full Name of Contributor				· 	
O'Brachta Elizabeth	E1-	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
Street Address		not applicable		cash	
2217 Arlington Ave	State	Zip Code	Date	Amount	
City		43221	08/20/2019	\$10.00	
Columbus	oh_	73221	Registration Num		
Full Name of Contributor			Togistianon Han	,	
Hayden Valerie		Employer/Occupation/Labor Organization*			
Street Address	1 -	Once Upon A Child Employer		Form (Cash, Check, etc.) cash	
1851 Plains Blvd				Amount	
City	State		08/21/2019	\$4.00	
Powell.	OH	43065	1 00/21/2019		

Page Total: \$5,324.00

^{*} 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)]