

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 Bill Quirk			Registration Number, if PAC	
Street Address 301 Northgate Dr Unit B		Employer/Occupation/Labor Organization* Labor organizer / UC-AFT		Form (Cash, Check, etc.) online portal
City Goleta	State CA	Zip Code 93117	Date 02/23/2019	Amount \$100.00
Full Name of Contributor Isaac Epstein			Registration Number, if PAC	
Street Address 15 Pearl Street		Employer/Occupation/Labor Organization* Photographer / Self		Form (Cash, Check, etc.) online portal
City Dover	State NH	Zip Code 3820	Date 02/23/2019	Amount \$25.00
Full Name of Contributor Holly Rowe			Registration Number, if PAC	
Street Address 8078 Snyder Rd		Employer/Occupation/Labor Organization* RN / Ohio		Form (Cash, Check, etc.) online portal
City Orient	State OH	Zip Code 43146	Date 02/23/2019	Amount \$50.00
Full Name of Contributor Rick Lucas			Registration Number, if PAC	
Street Address 5725 Tile Plant Rd		Employer/Occupation/Labor Organization* RN / OSUWMC		Form (Cash, Check, etc.) online portal
City New Lexington	State OH	Zip Code 43764	Date 02/22/2019	Amount \$50.00
Full Name of Contributor Sara Wallenfang			Registration Number, if PAC	
Street Address 2947 Broadway Ave.		Employer/Occupation/Labor Organization* Regional Organizing Director / Michigan United		Form (Cash, Check, etc.) online portal
City Kalamazoo	State MI	Zip Code 49008	Date 02/22/2019	Amount \$50.00
Full Name of Contributor Candace Miller			Registration Number, if PAC	
Street Address 4825 Brixston Dr		Employer/Occupation/Labor Organization* Nurse / OSUWMC		Form (Cash, Check, etc.) online portal
City Hilliard	State OH	Zip Code 43026	Date 02/22/2019	Amount \$27.00
Full Name of Contributor Nate Williams			Registration Number, if PAC	
Street Address 6000 Old Quarry Loop		Employer/Occupation/Labor Organization* Labor Relations / California Teachers Association		Form (Cash, Check, etc.) online portal
City Oakland	State CA	Zip Code 94605	Date 02/22/2019	Amount \$100.00
Full Name of Contributor Angie Romines-Smith			Registration Number, if PAC	
Street Address 3117 Aullwood Court		Employer/Occupation/Labor Organization* Senior lecturer / Ohio State		Form (Cash, Check, etc.) online portal
City Dublin	State OH	Zip Code 43017	Date 02/22/2019	Amount \$27.00

* 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)]