31-	Α
R.C.	3517.10

			age 3	

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							
Patrick_Pohler								
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)				
121 Chatham Rd	Software developer, self			online portal				
City	State	Zip Code	Date	Amount				
Columbus	ОН	43214	11/03/2019	\$25.00				
Full Name of Contributor	 	Registration Number, if PAC						
Lewis Kuhlman	ewis Kuhlman							
Street Address	Employer/	Occupation/Labor Orga	nization*	Form (Cash, Check, etc.)				
222 Jay Street #211	Urban Planner, City of La Crosse			online portal				
City	State Zip Code Date			Amount				
La Crosse	WI	54601	11/04/2019	\$5.00				
Full Name of Contributor	<u> </u>	'	Registration Number,	if PAC				
Luke Darby			·					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)				
3284 Chadbourne Road	Freelance	r, self		online portal				
City	State	Zip Code	Date	Amount				
Shaker Heights	ОН	44120	11/05/2019	\$15.00				
Full Name of Contributor		<u> </u>	Registration Number,	if PAC				
Jason Edwards								
Street Address								
2971 Abbey Knoll dr	not applic	able		online portal				
City	State	Zip Code	Date	Amount				
Lewis Center	ОН	43035	11/07/2019	\$20.00				
Full Name of Contributor	Registration Number,	if PAC						
Melissa Lawrence								
Street Address	Employer/	Occupation/Labor Orga	nization*	Form (Cash, Check, etc.)				
6340 Royal Tern Crossing	Program Supervisor, Nationwide Childrens			online portal				
City	State	Zip Code	Date	Amount				
Columbus	ОН	43230	11/13/2019	\$6.00				
Full Name of Contributor			Registration Number,	if PAC				
Trent Calloway								
Street Address	Employer/	Occupation/Labor Orga	nization*	Form (Cash, Check, etc.)				
5050A	UX Designer, chemical abstract			online portal				
City	State	Zip Code	Date	Amount				
Columbus	ОН	43219	11/15/2019	\$25.00				
Full Name of Contributor			Registration Number,	, if PAC				
Andrew Welsh								
Street Address	Employer	Occupation/Labor Orga	inization*	Form (Cash, Check, etc.)				
124 E Patterson Ave.	Student /	Administrative Assist	ant, OSU	online portal				
City	State	Zip Code	Date	Amount				
Columbus	ОН	43202	11/16/2019	\$20.00				
Full Name of Contributor		Registration Number	, if PAC					
Luke Darby								
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)				
3284 Chadbourne Road	Freelancer, Self			online portal				
City	State	Zip Code	Date	Amount				
Shaker Heights	ОН	44120	10/31/2019	\$120.00				

Page Total: \$236.00

^{*} 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)]