

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 Christopher Tiffany			Registration Number, if PAC	
Street Address 342 S Huron ave		Employer/Occupation/Labor Organization* Manager York Risk Services		Form (Cash, Check, etc.) online portal
City Columbus	State OH	Zip Code 43204	Date 07/25/2019	Amount \$15.00
Full Name of Contributor Schutz Nicholas			Registration Number, if PAC	
Street Address 11271 Otsego St. #203		Employer/Occupation/Labor Organization* Library College of the Canyons		Form (Cash, Check, etc.) online portal
City Los Angeles	State CA	Zip Code 91601	Date 07/25/2019	Amount \$11.00
Full Name of Contributor Michels Kathleen			Registration Number, if PAC	
Street Address 239 Buttles Ave		Employer/Occupation/Labor Organization* not applicable		Form (Cash, Check, etc.) online portal
City Columbus	State OH	Zip Code 43215	Date 07/26/2019	Amount \$120.00
Full Name of Contributor Knapp Kyle			Registration Number, if PAC	
Street Address 254 S Monroe Ave Apt D		Employer/Occupation/Labor Organization* Graphic Designer OCALI		Form (Cash, Check, etc.) online portal
City Columbus	State OH	Zip Code 43205	Date 07/26/2019	Amount \$56.00
Full Name of Contributor Haidet Kyle			Registration Number, if PAC	
Street Address 3592 Aaron Drive		Employer/Occupation/Labor Organization* Teacher Jefferson Local Schools		Form (Cash, Check, etc.) online portal
City Columbus	State OH	Zip Code 43228	Date 07/27/2019	Amount \$15.00
Full Name of Contributor Gehring Sarah			Registration Number, if PAC	
Street Address 637 Farragut Place Northeast		Employer/Occupation/Labor Organization* not applicable		Form (Cash, Check, etc.) online portal
City Washington	State DC	Zip Code 20017	Date 07/27/2019	Amount \$5.00
Full Name of Contributor Humphrey Jake			Registration Number, if PAC	
Street Address 416 E Maynard Ave		Employer/Occupation/Labor Organization* Barback Seventh Son Brewing		Form (Cash, Check, etc.) online portal
City Columbus	State OH	Zip Code 43202	Date 07/28/2019	Amount \$11.00
Full Name of Contributor Belle Deborah			Registration Number, if PAC	
Street Address 27 Myrtle Avenue		Employer/Occupation/Labor Organization* not applicable		Form (Cash, Check, etc.) online portal
City Cambridge	State MA	Zip Code 2138	Date 07/29/2019	Amount \$56.00

* 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)]