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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
Erin Upchurch				
Street Address	Employe	er/Occupation/Labor O)rganization*	Form (Cash, Check, etc.)
956 Caniff Rd	Social V	Worker, Kaleidoscop	pe Youth Center	online portal
City	State	Zip Code	Date	Amount
Columbus	ОН	43221	09/29/2019	\$3.00
full Name of Contributor		Registration Number,		
Adam Bulizak				
Street Address	Employe	er/Occupation/Labor O	rganization*	Form (Cash, Check, etc.)
178 E Longview Ave	Dean, H	Hondros College of N		online portal
City	State	Zip Code	Date	Amount
Columbus	ОН	43202	09/29/2019	\$33.00
Full Name of Contributor			Registration Number,	
Jessie Frymyer				
Street Address	Employe	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
9485 Beavers Rd		e Ohio State Univers	=	online portal
City	State	Zip Code	Date	Amount
Orient	ОН	43146	09/29/2019	\$60.00
Full Name of Contributor			Registration Number,	
Joseph Spaulding				
Street Address		er/Occupation/Labor Or	rganization*	Form (Cash, Check, etc.)
2830 International Blvd Apt 207	Project J	Director, 5 corners	<u> </u>	online portal
City	State	Zip Code	Date	Amount
Oakland	CA	94601	09/30/2019	\$35.00
Full Name of Contributor			Registration Number, i	
Brandie Bright				
Street Address	Employer	r/Occupation/Labor Or	rganization*	Form (Cash, Check, etc.)
5263 Greensedge Way		IT Analyst, OhioHealth		online portal
City	State	Zip Code	Date	Amount
Columbus	ОН	43220	09/30/2019	\$18.00
Full Name of Contributor			Registration Number, i	if PAC
Ed Hoffman				
Street Address	Employer	r/Occupation/Labor Or	rganization*	Form (Cash, Check, etc.)
94 E. Tulane Rd.	bookselle			online portal
City	State	Zip Code	Date	Amount
Columbus	ОН	43202	09/30/2019	\$33.00
Full Name of Contributor	Registration Number		Registration Number, i	
Ian Gray				·
Street Address	Employer	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
113 West Oakland Ave	Intern, C	City of Columbus		online portal
City	State	Zip Code	Date	Amount
Columbus	ОН	43201	09/30/2019	\$3.00
Full Name of Contributor			Registration Number, i	
Susan Long				
Street Address	Employer	r/Occupation/Labor Org	ganization*	Form (Cash, Check, etc.)
386 E 12th Ave	Lab techi Hospital	nologist, Ohio state	university James Cancer	online portal
City	State	Zip Code	Date	Amount
Columbus	ОН	43201	09/30/2019	\$18.00

^{*} 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)]