

# 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 Will Easton			Registration Number, if PAC	
Street Address 183 northmoor place	Employer/Occupation/Labor Organization* Lead, Fundraising and Email Strategy / Mozilla Foundation		Form (Cash, Check, etc.) online portal	
City columbus	State OH	Zip Code 43214	Date 02/27/2019	Amount \$27.00
Full Name of Contributor Brian Meyers			Registration Number, if PAC	
Street Address 138 Long Street	Employer/Occupation/Labor Organization* Mechanic / Central Ohio Transit Authority		Form (Cash, Check, etc.) online portal	
City Ashville	State OH	Zip Code 43103	Date 02/26/2019	Amount \$27.00
Full Name of Contributor Kimberly Moore			Registration Number, if PAC	
Street Address 4542 Heather Ridge Dr	Employer/Occupation/Labor Organization* RN / Nationwide Children's Hospital		Form (Cash, Check, etc.) online portal	
City Hilliard	State OH	Zip Code 43026	Date 02/24/2019	Amount \$27.00
Full Name of Contributor Kathleen Gmeiner			Registration Number, if PAC	
Street Address 2343 Hardesty Court	Employer/Occupation/Labor Organization* Senior Health Policy Associate / Voices for Ohio's Children		Form (Cash, Check, etc.) online portal	
City Columbus	State OH	Zip Code 43204	Date 02/24/2019	Amount \$27.00
Full Name of Contributor Amy Shaw Yevincy			Registration Number, if PAC	
Street Address 507 Orchard Ln,	Employer/Occupation/Labor Organization* Labor Relations Consultant / Ohio Education Association		Form (Cash, Check, etc.) online portal	
City St. Clairsville	State OH	Zip Code 43950	Date 02/23/2019	Amount \$50.00
Full Name of Contributor Ethan Young			Registration Number, if PAC	
Street Address 1251 Courtland Ave apt 303	Employer/Occupation/Labor Organization* Union Representative / Ohio Education Association		Form (Cash, Check, etc.) online portal	
City Columbus	State OH	Zip Code 43201	Date 02/23/2019	Amount \$500.00
Full Name of Contributor Traci L Arway			Registration Number, if PAC	
Street Address 4011 Carlow Ct.	Employer/Occupation/Labor Organization* Teacher / Columbus City Schools		Form (Cash, Check, etc.) online portal	
City Dublin	State OH	Zip Code 43016	Date 02/23/2019	Amount \$50.00
Full Name of Contributor Will Petrik			Registration Number, if PAC	
Street Address 2992 Bremen Street	Employer/Occupation/Labor Organization* Budget Researcher / Policy Matters Ohio		Form (Cash, Check, etc.) online portal	
City Columbus	State OH	Zip Code 43224	Date 02/23/2019	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)]