



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Citizens for Tarazi				
Full Name of Contributor Irshad Hussain			Registration Number, if PAC	
Street Address 965 Olde Sterling Way		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Centerville	State OH	Zip Code 45459	Date (MM/DD/YYYY) 10/13/2019	Amount 250
Full Name of Contributor Mohammed Dallal			Registration Number, if PAC	
Street Address 413 Cethedral Ct.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Dayton	State OH	Zip Code 45458	Date (MM/DD/YYYY) 10/12/2019	Amount 300
Full Name of Contributor Nadeem Ahmed			Registration Number, if PAC	
Street Address 11189 Ashbury Meadows Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Centerville	State OH	Zip Code 45458	Date (MM/DD/YYYY) 09/20/2019	Amount 250
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount

*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)]