



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee					
Citizens for Tarazi					
Full Name of Contributor Registration Number					or if PAC
Stivers for Congress					a, πτ Δυ
Street Address					Form (Cash, Check, etc.)
4679 Winterset Drive					check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Columbus	ОН	43220	09/09/2019		1000
Full Name of Contributor	Registration Number				er, if PAC
Golam Rahman					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
4860 Noor Dr.					Check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Dublin	ОН	43016	08/22/2019		300
Full Name of Contributor	ntributor Registration Number				er, if PAC
Mohammad Ijaz					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
5139 Silver Woods Ln					check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Dublin	ОН	43016	07/20/2019		100
Full Name of Contributor Registration Number					er, if PAC
Nadeem Momin					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
3040 Hemlock Edge Dr.					check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Dublin	ОН	43016		09/24/2019	100
Full Name of Contributor Registration Number					er, if PAC
Mujtaba A Khan					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
870 Southwick Circle					check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Dublin	ОН	45459	09/10/2019		250

^{*}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)]