



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Tarazi				
Full Name of Contributor Tariq Gill			Registration Number, if PAC	
Street Address 5134 Silver Woods Ln		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Dublin	State OH	Zip Code 43235	Date (MM/DD/YYYY) 07/19/2019	Amount 151
Full Name of Contributor Azeez C. Haque			Registration Number, if PAC	
Street Address 5095 Noor Park Cir.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Dublin	State OH	Zip Code 43016	Date (MM/DD/YYYY) 07/21/2017	Amount 200
Full Name of Contributor Radeeq Rehman			Registration Number, if PAC	
Street Address 5066 Silver Woods Ln		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Dublin	State OH	Zip Code 43016	Date (MM/DD/YYYY) 07/20/2019	Amount 100
Full Name of Contributor Muhammad Akhtar			Registration Number, if PAC	
Street Address 5027 Noor Park Cir.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Dublin	State OH	Zip Code 43016	Date (MM/DD/YYYY) 09/17/2019	Amount 100
Full Name of Contributor Ajmal Shamim			Registration Number, if PAC	
Street Address 5054 Silver Woods Ln		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Dublin	State OH	Zip Code 43016	Date (MM/DD/YYYY) 07/20/2019	Amount 100

*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)]