



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Bhuwan Pyakurel				
Full Name of Contributor Bhagawat Pyakurel			Registration Number, if PAC	
Street Address 2069 Saint Andrews Ct		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Pickerington	State OH	Zip Code 43147	Date (MM/DD/YYYY)	Amount \$100.00
Full Name of Contributor Kamal Kafley			Registration Number, if PAC	
Street Address 3512 Whisper Creek Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Columbus	State OH	Zip Code 43231	Date (MM/DD/YYYY)	Amount \$100.00
Full Name of Contributor Ram Baskota			Registration Number, if PAC	
Street Address 6875 Runik Pl, Apt J		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY)	Amount \$101.00
Full Name of Contributor Gopi Dhital			Registration Number, if PAC	
Street Address 7004 Onyxbluff Lane		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Blacklick	State OH	Zip Code 43004	Date (MM/DD/YYYY)	Amount \$110.00
Full Name of Contributor Narad Dhungyel			Registration Number, if PAC	
Street Address 8361 Priestley Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY)	Amount \$100.00

*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)]