



## **Statement of Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Bhuwan Pyakurel					
Full Name of Contributor				Registration Number, if PAC	
Asbi Mizer					
Street Address	Employ	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
4114 Lisbon St			PayPal		
City	State	Zip Code	Date (MM/DD/	YYYY)	Amount
Denver	со	80249			\$200.00
Full Name of Contributor			R	tegistration N	lumber, if PAC
Kedar khatiwoda					
Street Address	Employ	yer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
4110 Malaya St					PayPal
City	State	Zip Code	Date (MM/DD/	YYYY)	Amount
Denver	со	80249			\$110.00
Full Name of Contributor		Registration			Number, if PAC
Dev Basne					i e
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
7174 Wind River Dr					PayPal
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Reynoldsburg	ОН	43068			\$60.00
Full Name of Contributor			F	Registration l	Number, if PAC
Rohit Phuyal					-
Street Address	Emplo	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
4689 Delma Dr					PayPal
City	State	Zip Code	Date (MM/DD	/YYYY)	Amount
Pittsburgh	PA	15236			\$200.00
Full Name of Contributor		Registration			Number, if PAC
Parma Bastola					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
12088 Freestone Ct					PayPal
City	State	Zip Code	Date (MM/DD	OMYYY)	Amount
Cincinnati	ОН	45240			\$100.00

Page Total \$670.00	
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<sup>\*</sup>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)]