



# Statement of Contributions Received

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Friends of Bhuwan Pyakurel				
Full Name of Contributor Aryeh Alex			Registration Number, if PAC	
Street Address 1952 Harrisburg Pike		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Columbus	State OH	Zip Code 43223	Date (MM/DD/YYYY)	Amount \$20.00
Full Name of Contributor Yashwant Belsare			Registration Number, if PAC	
Street Address 1158 Gateview Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Lawrenceville	State GA	Zip Code 30046	Date (MM/DD/YYYY)	Amount \$51.00
Full Name of Contributor Noel Andersen			Registration Number, if PAC	
Street Address 3331 Mt. Pleasant St, Apt 9		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Washington D.C.	State OH	Zip Code 20010	Date (MM/DD/YYYY)	Amount \$100.00
Full Name of Contributor Pool Lounge LLC			Registration Number, if PAC	
Street Address 807 PATTERSON AVE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City AKRON	State OH	Zip Code 44310	Date (MM/DD/YYYY)	Amount \$200.00
Full Name of Contributor John Tolbert III			Registration Number, if PAC	
Street Address 537 Stratshire Lane		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Gahanna	State OH	Zip Code 43230	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)]