



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Bhuwan Pyakurel				
Full Name of Contributor Christopher Marlowe Shook			Registration Number, if PAC	
Street Address 572 Hunnicut Dr	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 11/14/2018	Amount \$100.00
Full Name of Contributor Kalyan Nepal & Pabitra Dulal			Registration Number, if PAC	
Street Address 1591 Charles Ct, Apt L	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Pickerington, Ohio	State OH	Zip Code 43147	Date (MM/DD/YYYY) 11/15/2018	Amount \$100.00
Full Name of Contributor Yamuna Subedi			Registration Number, if PAC	
Street Address 6895 Greenleaf Dr	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 01/07/2019	Amount \$51.00
Full Name of Contributor Jeniffer L. & William M Quesenberry			Registration Number, if PAC	
Street Address 949 Lancaster Ave	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 01/05/2019	Amount \$50.00
Full Name of Contributor Krishna & Kamala Dhakal			Registration Number, if PAC	
Street Address 584 Allis Pl. E	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 01/07/2019	Amount \$51.00

*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)]

Page Total \$352.00