Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat Number :	ion	20120	0302			Repo Filed		:	CANDI	DATE	✓	CC	OMMITTE		LOB	BYIS	т		
Name of Filing (Committee, Ca	andida	ate or Lo	obbyist:		Bryan	Cut	ler											
Street Address:	Street Address:																		
City:									State:				Zip Cod	Zip Code: 17563-9641					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDA PRIMARY	Y PRE	- 2. X) da Rima		POST-	3.		AMENDMI REPORT?	ENT	Yes	\checkmark	No]	
(place X to the right of	6TH TUESDAY PRE-ELECTIO		4.	2ND FRIDA ELECTION	Y PRE	5.) da .ect	y f 'ION	POST-	OST- 6.		TERMINATION REPORT?		Yes		No	\checkmark	
report type)	ANNUAL REF	PORT	7.	Year 2012					G METHO				PAPER		\checkmark	DIS	KETTE	:	
Name of Office S	L Sought by Car	ndidat	e:						DATE O	F ELE	CTIO	N	District Number	Office Code	Pai	ty Co	de Cou	 unty de	
									мо	DAY	YE	AR	100	STH	REF)	36		
REPRESENTAT	IVE IN THE G	ENER	AL ASSI	EMBLY					11		6	2012	 	(SEE INS	TRUCTI	ONS F	OR CODE	ES)	
Summary of	Receipts a	nd	мо	DAY	YEAR	Ł			мо	DAY	YE	AR	FOI	R OFFIC	E USE	ONL	.Y		
Expenditures	s from:			3 6	2	012	то		4		9	2012							
A. Amount Bro	ught Forward	l From	Last Ro	eport	.			\$				0.00							
B. Total Monet	ary Contribut	ions A	nd Rece	eipts (From	n Sche	dule I)		\$				0.00							
C. Total Funds	Available (Su	ım Of	Lines A	and B)				\$				0.00							
D. Total Expen	ditures (Fron	1 Sche	dule III	[)				\$				0.00	1						
E. Ending Cash	n Balance (Su	btract	Line D	From Line	C)			\$				0.00							
F. Value Of In-	Kind Contribu	utions	Receive	ed (From S	chedu	le II)		\$				0.00							
G. Unpaid Deb	ts And Obliga	tions	(From S	chedule IV	')			\$				0.00							
					AFF	IDAV	IT	SE	CTION										
PART I - If this i		-	•	-						• •			-						
I swear (or affirm correct and compl		rt, inclu	uding the	attached sc	hedules	s filed or	n pap	per o	or by elect	ronic me	edium,	are to	the best of	my know	ledge	and b	elief , t	true	
Sworn to and subs	scribed before n day of	ne this		20							S	ignatur	e of Person	Submitti	ng Re	port		_	
		gnatur	A	-			_						Print	ed Name				—	
My Commission E		gnatur	-										Email					—	
	мо		DA	NY	YR					Are	a Cod	e	Daytime	e Telepho	one Nu	mber			
Part II- If this is	a report of a	a cand	idate's a	authorized	Comn	nittee,	Can	dida	ate shall	sign he	ere.								
I swear (or affirm) No 320) as amend	ed.		y knowle	dge and beli	ef this	politica	l co	mmi	ttee has n	ot viola	ed an	y provis	ions of the	act of Ju	ne 3,1	937 (P.L. 13	33,	
Sworn to and subscribed before me this Signature of Candidate Signature of Candidate																			
20Printed Name										—									
My Commission Exp	-	ature					_						Email					—	
																		_	
	М	ο	DA	AY .	YR					Area Code Daytime Telephone Number									

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: <u>3/6/2012</u> **To:** 4/9/2012 Bryan Cutler 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate				Reporting Period						
						:				
		·			DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	•)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$						\$	0.00			

PART B ALL OTHER CONTRIBUTIONS \$50.01 TO \$250.00 Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part A)										
Name of Filing Committee or Candida	te		Rep	orting P	eriod					
			Fror	m:		Тс	o:			
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address		_					\$	0.00		
City	State	Zip Code (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part A on	Schedule I, Detail	ed Summary Pag	je, Se	ection 2			\$	0.00		

PART C Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting Period					
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR	\$	0.00
Mailing Address] *	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

PART D ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of

over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate Re				eporting Period						
			Froi	n:		Т):			
				D	ATE		АМ	IOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00		
Mailing Address										
City	State	Zip Code (Pl	ıs 4)							
Employer Name				Occupat	tion					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 0.00		

PART E **OTHER RECEIPTS**

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC. Use this Part to report refunds received, interest earned, returned checks and

prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate			Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	Section	4.			\$		0.00

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
Bryan Cutler	From:	<u>3/6/2012</u> то:	<u>4/9/2012</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R				Reporting Period						
F						То:				
				DATE			AMOUNT			
Full Name of Contributor			мо	DAY	YEAR					
Mailing Address		_				 \$	0.00			
City	State	Zip Code (Plus 4)								
Description of Contribution:	•		•	•						
Enter Grand Total of Part F of Section 2.	on Schedule II, In-Kir	nd Contributions Detai	led Sum	mary Pag	je,		PAGE TOTAL			
						\$	0.00			

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period						
						То:				
					DATE		АМО	DUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code(Plus 4)								
Employer of Contributor	L			Occupa	ation					
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Cont	ribution		
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kin	d Contributions D	etaile	ed			ΡΑ	GE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period						
	From			То:					
				DATE			AMOUNT		
To Whom Paid	мо	DAY	YEAR						
Mailing Address						\$	0.00		
City State Zip Code (Plus 4)				tion of Exp	enditure				
Enter Grand Total of Exponditures	on Page 1. Penert (Cover Bage Item [`				PAGE TOTAL		
Enter Grand Total of Expenditures of	JII Page 1, Report C	lover Page, menn i				\$	0.00		