Campaign Finance Report

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

											-				100	WICT			
Filer Identificati Number :	on	2012	C0302				port ed B		CAND	IDATE	>	co	MMITTEE		LOBI	BYIST			
Name of Filing C	Committe	e, Candida	ate or Lo	obbyist:		Bry	an C	utler											
Street Address:																			
City:									State:				Zip Code	e: 17	563-9	641			
TYPE OF REPORT	6TH TUES	_	1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3. X		AMENDME REPORT?	NT	Yes	No)	\	
(place X to the right of	6TH TUES		4.	2ND FRIDATELECTION	y pri	≣-	5.	30 DA ELECT		POST-	6.		TERMINATION Yes No REPORT?					√	
report type)	ANNUAL	. REPORT	7.	Year 2012					IG METH CHECK O				PAPER						
Name of Office S	Sought by	/ Candidat	te:						DATE ()F ELE	CTI	DN	District Number						
									МО	DAY	Υ	EAR	100	STH	REP		36		
REPRESENTATI	VE IN TH	HE GENER	AL ASS	EMBLY					11		6	2012		(SEE INS	TRUCTI	ONS FOR	CODES)	
Summary of	Receipts	s and	МО	DAY	YEAR	ł			МО	DAY	Y	EAR	FOF	OFFIC	E USE	ONLY			
Expenditures	from:			4 10	2	012	Т	0	5	5	14	2012							
A. Amount Bro	ught For	ward Fron	1 Last R	eport	•			\$		•	•	0.00							
B. Total Moneta	ary Contr	ibutions A	And Rec	eipts (From	Sche	dule	e I)	\$				0.00							
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$				0.00							
D. Total Expend	ditures (I	From Sche	edule II	I)				\$				0.00							
E. Ending Cash	Balance	(Subtract	Line D	From Line (C)			\$				0.00							
F. Value Of In-	Kind Con	tributions	Receiv	ed (From S	chedu	le I	I)	\$				0.00							
G. Unpaid Debt	ts And Ob	oligations	(From S	chedule IV)			\$				0.00		,					
					AFF	·ID/	AVI	T SE	CTION										
PART I - If this is	s a Comm	nittee repo	ort, trea	surer sign	here.	If th	nis is	a Can	ndidate r	eport, o	candi	idate sig	ın here.						
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	hedule	s file	d on	paper (or by elec	tronic m	ediun	n, are to t	he best of	my know	/ledge	and beli	ef , tr	ue <u>.</u>	
Sworn to and subs	cribed bef day of	ore me this		20								Signature	of Person	Submitt	ing Rep	ort			
	_	Signatu	re					-					Printe	d Name				_	
My Commission Ex	cpires							_					Email					_	
		МО	D	AY	YR					Ar	ea Co	de	Daytime	Teleph	one Nu	mber			
Part II- If this is	a report	of a cand	lidate's	authorized	Comn	nitte	ee, C	andida	ate shall	sign h	ere.								
I swear (or affirm) No 320) as amende		ne best of m	y knowle	edge and beli	ef this	poli	itical	commi	ittee has ı	not viola	ted a	ny provis	ions of the	act of Ju	ine 3,1	937 (P.L	133	3,	
Sworn to and subsc		re me this										s	ignature of	Candida	te			-	
	day of —							_					Printed	Name				-	
		Signature						-						-				_	
My Commission Exp	oires												Email						
	_	МО	D	AY	YR	1		-		Area	Code		Day	rtime Te	lephon	e Numb	er	-	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
Bryan Cutler	From:	4/10/2012	<u>2</u> To:	5/14/2012
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
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
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

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 Commit	Name of Filing Committee or Candidate			Reporting Period						
				From:			То	:		
			•			DATE			AMOUNT	
Full Name of Contributin	g Committee			М	o	DAY	YEAR			
Mailing Address								\$	0.00	
City		State	Zip Code (Plus 4)							

PAGE TOTAL
0.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

0.00

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 Committ	tee or Candidate		Rep					
Fi			From: To:) :		
		L			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, Detailed Summary Page, Section 2.

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 Cai	me or Filing Committee or Candidate			Reporting Period						
			From:			То:				
				DA	TE		Þ	AMOUNT		
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00		
Mailing Address							*	0.00		
City	State	Zip Code	e (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part C o	on Schedule I, Detaile	d Summary Pa	age, Sectio	n 3.			\$	0.00		

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	2			Rep	orting Pe	riod				
				Fror	From:			То:		
					DATE			AMOUNT		
Full Name of Contributor					мо	DAY	YEAR	\$	0.00	
Mailing Address								7		
City	State	Zi	p Code (Plus	s 4)						
Employer Name	•				Occupa	tion	-	-		
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)	
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary Page,	Section	on 3.				PAGE TOTAL	
								\$	0.00	

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 of	or Candidate		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							\neg	
City	State	Zip Code (I	Plus 4)					
Receipt Description	•	•			1	•	•	
Futor Coand Total of Bank	Cabadula I Detailed	Commence De	Cookie					PAGE TOTAL
Enter Grand Total of Part I	e on Schedule I, Detailed	Summary 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 Perio	d	
Bryan Cutler	From:	4/10/2012 To:	<u>5/14/2012</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Can	lame of Filing Committee or Candidate					Reporting Period				
			From:			То:				
				DATE			AMOUNT			
Full Name of Contributor	МО	DAY	YEAR							
Mailing Address						7 \$	0.0	10		
City	State	Zip Code (Plus 4)								
Description of Contribution:	•		•	•						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Details			ailed Summary Page,			PAGE TOTAL				
Section 2.						\$	0.0	0		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate				porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi _l	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	lame 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)	Descrip	tion of Exp	enditure					
Enter Crand Total of Evnanditures	on Dogg 1 Donowh (Cover Dage Item F					PAGE TOTAL			
Enter Grand Total of Expenditures	on Page 1, Report C	Lover Faye, Item L	, .			\$	0.00			