Campaign Finance Report

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

Filer Identificati Number :	on 20	012C0	0302				Report iled B		CA	NDII	DATE	√	C	OMMITTEE		LOB	BYIST		
Name of Filing C	ommittee, Can	didat	e or Lo	bbyist:		Bı	ryan C	utler											
Street Address:																			
City:									State	e:				Zip Cod	e: 17	'563-9	641		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1		2ND FRI PRIMARY		PRE-	2.	30 DA PRIMA		Р	OST-	3.		AMENDME REPORT?	NT	Yes	1	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4		2ND FRI ELECTIO		PRE-	5.	30 DA ELECT		Р	OST-	6.		TERMINAT REPORT?	ΓΙΟΝ	Yes	1	No	\
report type)	ANNUAL REPO	RT 7	′. X	Year 20	12				IG ME			PAPER				V	DIS	KETTE	
Name of Office S	ought by Cand	idate	:						DAT	ЕΟ	F ELE	СТІ	ON	District Number	Office Code	Par	ty Cod	le Cou	
DEDDECEMENT	VE IN THE CE	NEDA	1 ACC!	-MDI V					МО		DAY	١	/EAR	100	STH	REF	•	36	
REPRESENTATI	VE IN THE GET	VEKA	L A55	EMDLT						11		6	2012		(SEE IN	STRUCTI	ONS FO	R CODES	5)
Summary of Expenditures		ı	МО	DAY		YEAR		_	МО		DAY	١	YEAR	FOI	OFFIC	CE USE	ONL	Y	
expenditures	irom:		1	.1	27	201	12 T	0		12	:	31	2012						
A. Amount Bro	ught Forward F	rom l	Last Re	eport				\$					0.00						
B. Total Moneta	ary Contributio	ns An	nd Rece	eipts (Fr	om	Schedu	ule I)	\$					0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 0.00																			
D. Total Expenditures (From Schedule III) \$ 0.00																			
E. Ending Cash Balance (Subtract Line D From Line C) \$ 0.00																			
F. Value Of In-	Kind Contributi	ons R	Receive	ed (Fron	ı Sc	hedule	II)	\$					0.00						
G. Unpaid Debt	s And Obligation	ons (F	From S	chedule	IV)		\$					0.00			'			
						AFFII	DAVI	ΓSE	CTI	NC									
PART I - If this is	a Committee	repor	t, treas	surer sig	gn h	ere. If	this is	a Car	ndida	te re	port, c	cand	lidate si	gn here.					
I swear (or affirm) correct and complete		includ	ling the	attached	sch	edules f	iled on p	paper	or by e	electr	onic m	ediu	m, are to	the best of	my knov	wledge	and be	elief , tı	rue
Sworn to and subs	cribed before me day of	this		20									Signatur	e of Person	Submitt	ing Re	ort		_
								-						Printe	ed Name				-
My Commission Ex	-	nature												Email					_
	мо		DA	·Υ		YR		-			Are	ea Co	ode	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a c	andic	date's a	authoriz	ed	Commit	ttee, Ca	andid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my	knowle	dge and l	belie	ef this p	olitical	comm	ittee h	as no	ot viola	ted a	ny provis	ions of the	act of J	une 3,1	937 (F	.L. 133	з,
Sworn to and subsc		:his											9	Signature of	Candida	ate			- $ $
	day of ————————————————————————————————————			- <u>-</u> —				-						Printed	Name				-
	Signatu	ıre						-											_
My Commission Exp	ires													Email					
	мо		DA	ΛΥ		YR		•			Area	Code	e	Da	ytime T	elephor	ne Nun	nber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

betanea banmary rage				
Name of Filing Committee or Candidate	Reporting	J Period		
Bryan Cutler	From:	11/27/201	<u>2</u> To:	12/31/2012
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 and totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	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 Committee or Candidat	e		Reporting	Period			
		F	rom:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			МО	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.

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.

Name of Filing Comn	nittee or Candidate		Repo	orting P	eriod			
			Fron	n:		To	o:	
		I			DATE			AMOUNT
Full Name of Contribut	or			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
	•					•		PAGE TOTAL
								I AGE IOIAE

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	ame 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 TOT	AL	
Enter Grand Total of Part C on School	dule I, Detailed Sun	nmary 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	n:		To	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							7	
City	State	Zip Code (I	Plus 4)					
Receipt Description	•	•			1	•	•	
Futor Coand Total of Bank	Cabadula I Detailed	Commence De	Caatle					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 Per	od	
Bryan Cutler	From:	11/27/2012 To:	12/31/2012
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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 Candi	idate		Reportin					
						То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•	•			
Enter Grand Total of Part F on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL	
Section 2.						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	portin	ng Pe	eriod				
				Fro	m:			To:			
							DATE			АМ	IOUNT
Full Name of Contributor					мо		DAY	YEAR			
Mailing Address										\$	0.00
City	State		Zip Code(Plus 4)								
Employer of Contributor					Оссі	upati	ion				
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	Stat	e Z	Zip C	ode(Plus 4)	Desc	ript	tion of Con	tribution
Enter Grand Total of Part G on Sch	edule II, In-Kir	nd (Contributions D	etaile	ed					PA	GE TOTAL
Summary Page, Section 3.	,										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period				
			From			То:		
				DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)	4) Description of Expenditure					
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	