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 2005	289			Rep File			CA	NDI	DATE		СОМІ	AITTEE	Y	LUBI	51131	
Name of Filing C	Committee, Candid	ate or L	obbyist:	,	CUTI	LER	, BRY	AN FI	RIEN	NDS O	F						
Street Address:																	
City:	QUARRYVILLE							State	e:	PA			Zip Co	de: 17	'566-1	104	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE-	- 2	2.	30 DA		P	POST-	3. X		AMENDN REPORT		Yes	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	- 5	5.	30 DA		P	POST-	6.		TERMINA REPORT		Yes	No	\
report type)	ANNUAL REPORT	7.	Year 2015					NG ME					PAPER		⋈	DISKE	TTE
Name of Office S	Sought by Candida	te:	•					DAT	ΕO	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	County Code
								МО		DAY	YI	AR			REF)	
									11		3	2015		(SEE IN	STRUCTI	ONS FOR (CODES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR		_	_	МО		DAY	Y	EAR	FC	R OFFI	E USE	ONLY	
			5 5	20	015	Т	0		6		8	2015					
A. Amount Bro	ught Forward Fror	n Last R	eport				\$					949.20					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule	I)	\$				6,:	100.00					
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				52,0	049.20					
D. Total Expend	ditures (From Sch	edule II	I)				\$				20,0	75.79					
E. Ending Cash	Balance (Subtrac	Line D	From Line	C)			\$				31,9	73.41					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II))	\$					0.00					
G. Unpaid Debt	ts And Obligations	(From S	Schedule I\	/)			\$					0.00			•		
				AFF	IDA	VI	T SE	CTIC	NC								
	s a Committee rep) that this report, inc	-	_							-		_		f my knov	wledge	and beli	ef , true
correct and comple														_			
	cribed before me this day of — —————		20				_				S	Signature	of Perso	n Submitt	ting Rep	oort	
	Signatu	re					-						Prin	ted Name			
My Commission Ex	cpires						_		•				Ema	il			
	МО	D.	AY	YR						Are	ea Coo	le	Daytin	e Teleph	one Nu	mber	
	a report of a cand					•				_		_					
No 320) as amende		ny knowle	edge and bel	ief this	politi	ical	comm	ittee h	as n	ot viola	ted ar	y provis	ions of th	e act of Ji	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this day of		20									s	ignature (of Candida	ate		
			- —				-						Printe	d Name			— I
My Commission Exp	Signature pires						_						Ema	il			—
	МО	D	AY	YR			•			Area	Code		D	aytime T	elephor	ne Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	y Period		
CUTLER, BRYAN FRIENDS OF	From:	5/5/201	<u>5</u> To:	6/8/2015
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)			\$	100.00
TOTAL for the Reporting) Period	(2)	\$	100.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	5,500.00
All Other Contributions (Part D)			\$	500.00
TOTAL for the Reporting	Period	(3)	\$	6,000.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	6,100.00

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	R	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.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee or Candidate

Reporting Period

CUTLER, BRYAN FRIENDS OF

From: $\frac{5/5/2015}{}$ To:

DATE

6/8/2015

AMOUNT

	ame of Contributor S MACKENZIE			МО	DAY	YEAR	
Mailin	g Address				\$ 100.00		
City	OXFORD	State	Zip Code (Plus 4)	5	10	2015	
		PA	19363-2416				

PAGE TOTAL

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

100.00

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	ame of Filing Committee or Candidate						Reporting Period					
CUTLER, BRYAN FRIENDS OF			From:	<u>5/</u>	<u>/5/2015</u>	То:		<u>6/8/2015</u>				
				DA	TE		Α	MOUNT				
Full Name of Contributing Committee				мо	DAY	YEAR						
HAPAC-STATE							\$	1,000.00				
Mailing Address				5	8	2015		·				
City HARRISBURG	State	Zip Code	e (Plus 4)]		2013						
	PA	17105-	8600									
Full Name of Contributing Committee				мо	DAY	YEAR						
MALADY & WOOTEN PUBLIC AFFAIRS							\$	1,000.00				
Mailing Address				5	8	2015		Ť				
City HARRISBURG	State	Zip Code	e (Plus 4)			2013						
	PA	17101										
Full Name of Contributing Committee				мо	DAY	YEAR						
ENTERPRISE HOLDINGS, INC PAC				140	DAI	ILAK	 	500.00				
Mailing Address				6	1	2015						
City ST LOUIS	State	Zip Code	e (Plus 4)]	-	2013						
	МО	63105										
Full Name of Contributing Committee				мо	DAY	YEAR						
MERCK EMPLOYEES PAC				140		ILAK	 	1,000.00				
Mailing Address				6	1	2015		•				
City WASHINGTON	State	Zip Code	e (Plus 4)		-	2013						
	DC	20004										
Full Name of Contributing Committee				мо	DAY	YEAR						
THE ROCHE GOOD GOV'T COMMITTEE							\$	500.00				
Mailing Address				5	10	2015						
City NUTLEY	State	Zip Code	e (Plus 4)									
	NJ	07110										
Full Name of Contributing Committee				мо	DAY	YEAR						
LANCASTER GENERAL HEALTH PAC						. 2711	\$	500.00				
Mailing Address				5	10	2015						
City MEDIA	State	Zip Code	e (Plus 4)									
	PA	19063										

Full Name of Contributing Comm	nittee		мо	DAY	YEAR	
PIADA PAC (PA INDEPENDENT	AUTO DEALERS ASSN)		1-10	DAI	ILAK	\$ 500.00
Mailing Address			6	5	2015	
City HARRISBURG	State	Zip Code (Plus 4)]		2013	
	PA	17102				
Full Name of Contributing Committee						
Full Name of Contributing Comm	nittee		МО	DAY	YFAR	
Full Name of Contributing Comm	nittee	<u> </u>	МО	DAY	YEAR	\$ 500.00
	mittee	•				\$ 500.00
ELI LILLY & CO PAC	nittee	Zip Code (Plus 4)	MO 5	DAY 10	YEAR 2015	\$ 500.00

 $\label{lem:enter} \textbf{Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.}$

PAGE TOTAL \$ 5,500.00

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	•			Repo	orting Pe	riod				
CUTLER, BRYAN FRIENDS OF				Fron	n:	<u>5/5/2</u>	<u>015</u>	<u>5</u> To: <u>6/8/2015</u>		<u>/8/2015</u>
					D/	ATE			AMOUN	IT
Full Name of Contributor					мо	DAY	YEA	R	\$	F00 00
BERNARD MORRISSEY						57.	,		₹	500.00
Mailing Address					5	17	201	15		
City STEVENS	State	Zip	p Code (Plus	4)		1,	[20]			
	l _{PA}	₁₇	7578-9453							
Employer Name RETIRED					Occupat	ion	RETIR	ED		
Employer Mailing Address/Principal Pl	ace of Business		City			State		7	Zip Code (Pl	us 4)
			STEVENS			PA		:	17578	
Enter Grand Total of Part C on Sch	edule I, Detailed S	umn	nary Page,	Section	on 3.				PAGE	TOTAL
	<u>-</u>							\$		500.00

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	or Candidate		Report	ing Peri	od			
			From:			To:		
		•		C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	us 4)					
Receipt Description	•	•			•	•	•	
Futor Curred Total of Bout	Fan Cabadula I. Datailad	Summer Base S	! !	4				PAGE TOTAL
Enter Grand Total of Part	E ON Schedule 1, Detalled	Summary Page, Se	ection	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		
CUTLER, BRYAN FRIENDS OF	From:	<u>5/5/2015</u> To:	<u>6/8/2015</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 Candid	Reportin						
	From: To:						
		-		DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address	Mailing Address					7 \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•	-	•	•		•	
Enter Grand Total of Part F on S	chedule 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	porting	Period				
				Fro	m:					
						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	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	Reporting Period				
CUTLER, BRYAN FRIENDS OF	From	5/5/2015	То:	6/8/2015	

				DATE		AMOUNT	
To Whom Paid			МО	DAY	YEAR		
West Lampeter Fair co							
Mailing Address			5	27	2015	\$	135.00
City Conestoga	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17516	advertisement payment				
To Whom Paid			МО	DAY	YEAR		
Moore's Library Memorial Golf outing			1-10				
Mailing Address			6	8	2015	\$	500.00
City Christiana	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17509	Golf sponsorship and fees				
To Whom Paid			мо	DAY	YEAR		
Maverick Finance					1 = 1		
Mailing Address			6	8	2015	\$	4,424.89
City Harrisburg	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17101	Costs/Fees associated with HBG fundraiser				
To Whom Paid				DAY	YEAR		
HRCC			МО		1 = 1 1		
Mailing Address			6	1	2015	\$	15,000.00
City Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	17108	Donation for Spring Roundup tickets				
To Whom Paid				DAY	YEAR		
Constant Contact			МО		ILAK		
Mailing Address			5	12	2015	\$	15.90
City Waltham	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1	
	PA	02451	email routing service				
							PAGE TOTAL
Enter Grand Total of Expe	enditures on Page 1, Re	port Cover Page, Item D	•			\$	20,075.79