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 20	022C0332			Repor Filed I		CAND	IDATE	✓	co	OMMITTE	E	LOBE	BYIST							
Name of Filing	Committee, Can	didate or l	obbyist:	•	BRYAN	D CU	TLER			•											
Street Address:	Street Address:																				
City:							State:	Zip Code: 17565-9641													
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE-	- 2. X	30 D PRIM		POST-	3.		AMENDM REPORT?		Yes	No	\checkmark						
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	AY PRE	- 5.	30 D ELEC	AY TION	POST- 6.			TERMINA REPORT?		Yes	No	\checkmark						
report type)	ANNUAL REPO	PRT 7.	Year 2022	2			NG METH CHECK O				PAPER		\checkmark	TTE							
Name of Office	⊥ Sought by Cand	idate:					DATE O	OF ELE	CTIC	DN	District Number	Office Code	Par	ty Code	County Code						
							мо	DAY	Y	EAR	100	STH	REP		couc						
REPRESENTAT	IVE IN THE GE	NERAL ASS	SEMBLY				11		8	2022	1	(SEE INS	TRUCTI	ONS FOR O	ODES)						
	Receipts and	мо	DAY	YEAR			мо	DAY	Y	EAR	FO	R OFFIC	e use	ONLY							
Expenditure	s from:		3 29	9 20	022 7	О	5	5	2	2022											
A. Amount Bro	ought Forward F	rom Last I	Report			\$				0.00											
B. Total Monet	tary Contributio	ns And Re	ceipts (Fror	n Schee	dule I)	\$	5			0.00]										
C. Total Funds	Available (Sun	n Of Lines /	A and B)			\$	5			0.00											
D. Total Exper	ditures (From S	Schedule I	II)			\$	5			0.00]										
E. Ending Casl	n Balance (Subt	ract Line D	From Line	C)		4	5			0.00											
F. Value Of In	-Kind Contribut	ions Receiv	ved (From S	Schedul	le II)	\$	5			0.00	4										
G. Unpaid Deb	ts And Obligation	ons (From	Schedule I	V)		\$	5			0.00											
				AFF	IDAVI	T SE	CTION														
PART I - If this		• •	-					• •							6						
I swear (or affirm correct and comp		including th	ie attached so	chedules	s filed on	paper	or by elec	tronic m	eaium	, are to	the best of	ту клом	leage	and bell	er, true						
Sworn to and sub	scribed before me day of	this	20						9	Signatur	e of Persor	n Submitti	ing Rep	ort							
	Sigr	nature				_					Print	ed Name									
My Commission E	xpires					_					Emai	I									
	МО	C	DAY	YR				Ar	ea Co	de	Daytim	e Telepho	one Nu	mber							
Part II- If this is	a report of a d	andidate's	authorized	l Comm	nittee, G	Candio	late shall	sign h	ere.												
I swear (or affirm No 320) as amend		of my know	ledge and bel	lief this	political	comn	nittee has i	not viola	ted ar	ny provis	ions of the	act of Ju	ne 3,19	937 (P.L	. 1333,						
Sworn to and subs	cribed before me t day of	this	20					Signature of Candidate													
						_					Printe	d Name									
My Commission Ex	Signatı pires	ıre				_					Emai	1									
						_															
	мо		DAY	YR				Area	Code		Da	iytime Te	lephon	Area Code Daytime Telephone Number							

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period BRYAN D CUTLER** From: <u>3/29/2022</u> To: 5/2/2022 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						
				From: To:						
		·			DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
Γ								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 Candidate Reporting Period										
			Fro	From: To:						
					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. \$ 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						
				То:					
				DA	TE		A	AMOUNT	
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 Schedule I, Detailed Summary Page, Sect							\$	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				Reporting Period						
From:				m:			То:			
				D	ATE		АМ	AMOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00		
Mailing Address										
City	State	Zip Code (Pl	ıs 4)							
Employer Name				Occupation						
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 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 Candidat	Name of Filing Committee or Candidate			Reporting Period							
				rom: To:							
				D	ATE			AMOUNT			
Full Name				мо	DAY	YEAR	\$		0.00		
Mailing Address											
City	State	Zip Code (Plus 4)								
Receipt Description	•				•						
Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Sec				PAGE TOTAL			TAL				
Enter Grand Total of Part E on Sched	iule I, Detailed Sum	imary 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 D CUTLER	From:	<u>3/29/2022</u> то:	<u>5/2/2022</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 PART	ΓF)		
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			Reporting Period					
				From:			То:	
	DATE			AMOUNT				
Full Name of Contributor				DAY	YEAR			
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Sched Section 2.	iled Sum	mary Pag	je,		PAGE TOTA	AL.		
						\$		0.00

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period						
				From:		То:					
					DATE		AMOUNT				
Full Name of Contributor				мо	DAY	YEAR					
Mailing Address							\$ 0.00				
City	State	Zip Code(Plus 4)									
Employer of Contributor		•		Occupa	ation						
Employer Mailing Address/Principal Place of Business City				e Zip	Code(Plus 4)	Descri	ption of Contribution				
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00					

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period						
				From							
		DATE		AMOUNT							
To Whom Paid	мо	DAY	YEAR								
Mailing Address						\$	0.00				
City	Zip Code (Plus 4)) Description of Expenditure									
Enter Crand Tatal of Evnanditures	`				PAGE TOTAL						
Enter Grand Total of Expenditures (Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	0.00				