# **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 :	ion	2005	289		-	Repor Filed		CANDI	DATE	СОМІ	MITTEE	✓	LOBE	BYIST	
Name of Filing C	Committe	e, Candid	ate or L	obbyist:		Bryan (									
Street Address:															
City:								State:			Zip Co	de:			
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRID PRIMARY	AY PRE-	- 2.	30 DA PRIMA		POST- 3		AMENDN REPORT		Yes	No	$\checkmark$
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRID		- 5. <b>X</b>	30 DA ELEC		POST- 6		TERMINATION REPORT?		Yes	No	$\checkmark$
report type)	ANNUAL	REPORT	7.	<b>Year</b> 200	6			FILING METHOD ( ) CHECK ONE			PAPER		$\checkmark$	DISKE	ITE
Name of Office S	— Sought by	/ Candida	te:					DATE O	F ELEC	TION	District Number	Office Code	Par		County Code
REPRESENTAT								мо	DAY	YEAR		STH	REP		36
								11	7	2006		(SEE INS	STRUCTIO	ONS FOR C	ODES)
Summary of		s and	мо	DAY	YEAR	1		мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:			1	1	1	0	10	23	2006					
A. Amount Bro	ught Forv	ward Fron	n Last R	leport			\$		(1	3,825.16)	-				
B. Total Monet	ary Contr	ibutions /	And Rec	eipts (Fro	m Sche	dule I)	\$			0.00					
C. Total Funds Available (Sum Of Lines A and B)							\$		(1	3,825.16)					
D. Total Expen	ditures (I	From Sche	edule II	II)			\$			12.00					
E. Ending Cash	Balance	(Subtract	t Line D	From Line	e C)		\$		(13	3,837.16)	_				
F. Value Of In-	Kind Con	tributions	Receiv	ed (From	Schedu	le II)	\$			0.00					
G. Unpaid Deb	ts And Ob	ligations	(From S	Schedule 1	(V)		\$			0.00					
					AFF	IDAVI	T SE	CTION							
PART I - If this is		-	-	-							-				
I swear (or affirm correct and compl		report, incl	uding the	e attached s	chedules	s filed on	paper	or by elect	ronic med	ium, are to	the best o	of my knov	vledge	and belie	et , true
Sworn to and subs	cribed before day of	ore me this	5	20			_			Signature	e of Perso	n Submitt	ing Rep	ort	
		Signatu	re				_				Prin	ited Name			
My Commission E	xpires						_				Ema	nil			
		мо	D	AY	YR				Area	Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report	of a cand	lidate's	authorize	d Comn	nittee, O	Candid	ate shall	sign her	е.					
I swear (or affirm) No 320) as amende	ed.		ny knowl	edge and be	elief this	political	comm	ittee has n	ot violate	d any provis	ions of th	e act of Ju	ine 3,19	937 (P.L.	1333,
Sworn to and subso	cribed befo day of	re me this		20						S	ignature	of Candida	ite		
							_				Printe	ed Name			
My Commission Exp		Signature					-				Ema	nil			
	-	мо	D	ΑΥ	YR		_		Area Co	de	D	aytime Te	elephon	e Numbe	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: To: Bryan Cutler 10/23/2006 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:			1		
		·			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 Candidate Reporting Perio					eriod				
			Fror	rom: 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. \$ 0.0								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 Schedule I, Detailed Summary Page, Secti				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				Reporting Period					
From				n: To:					
				DATE AMOUNT				IOUNT	
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 Place of Business City				•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							PAGE 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	Name of Filing Committee or Candidate			Reporting Period						
			From:	m: To:						
				DATE				AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (	Plus 4)							
Receipt Description							•			
			o .:	PAGE TOTA			TAL			
Enter Grand Total of Part E on Sched	ule 1, Detailed Sum	mary 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:	To:	<u>10/23/2006</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	ſF)		
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			мо	DAY	YEAR				
Mailing Address						<b>7</b> \$	0.0		
City	State	Zip Code (Plus 4)							
Description of Contribution:	•	-	- <b>!</b>						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL			
						\$	0.0		

### 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					
						То:			
					DATE AMOUN				
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 Plac	City	State	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					
Bryan Cutler				From			<u>10/23/2006</u>			
· · · · · ·				DATE		AMOUNT				
To Whom Paid				DAY	YEAR					
Harrisburg Express			мо							
Mailing Address Unknown			10	3	2006	\$	12.00			
City	State	Zip Code (Plus 4)	Description of Expenditure							
	РА		Financia	Financial Report Notorization Fee						
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL			
							12.00			