### **Campaign Finance Report**

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

| Filer Identificati<br>Number :            | on 802                        | 56          |                      |            | Rep<br>File |      |       | CAN      | IDI   | DATE     | <b>√</b>    | СО          | MMITTEE                                   |                             | LOB     | BYIST   |            |          |  |  |
|---|-------------------------------|-------------|----------------------|------------|-------------|------|-------|----------|-------|----------|-------------|-------------|---|-----------------------------|---------|---------|------------|----------|--|--|
| Name of Filing C                          | ommittee, Candi               | date or L   | obbyist:             |            | Brya        | an C | utler |          |       |          |             |             |   |                             |         |         |            |          |  |  |
| Street Address:                           |                               |             |                      |            |             |      |       |          |       |          |             |             |   |                             |         |         |            |          |  |  |
| City:                                     | _                             |             |                      |            |             |      |       | State    | :     |          |             |             | Zip Cod                                   | e:                          |         |         |            |          |  |  |
| TYPE OF<br>REPORT                         | 6TH TUESDAY<br>PRE-PRIMARY    | 1.          | 2ND FRIDA<br>PRIMARY | AY PRE     | - 2         | 2.   | 30 DA |          | Р     | OST-     | 3. <b>X</b> |             | AMENDME<br>REPORT?                        | AMENDMENT Yes No<br>REPORT? |         |         |            |          |  |  |
| (place X to<br>the right of               | 6TH TUESDAY<br>PRE-ELECTION   | 4.          | 2ND FRIDA            | AY PRI     | E- !        | 5.   | 30 DA |          | Р     | OST-     | 6.          |             | TERMINAT<br>REPORT?                       | TION                        | Yes     | N       | 0          | <b>\</b> |  |  |
| report type)                              | ANNUAL REPORT                 | 7.          | <b>Year</b> 2008     | 1          |             |      |       | CHECK    |       |          |             |             | PAPER                                     | ETTE                        |         |         |            |          |  |  |
| Name of Office S                          | ought by Candida              | ate:        | -                    |            |             |      |       | DAT      | E OI  | F ELE    | CTIC        | ON          | District Office Party Code<br>Number Code |                             |         |         |            |          |  |  |
|   |                               |             |                      |            |             |      |       | МО       |       | DAY      | Y           | EAR         | 100                                       | STH                         | REF     | )       | Code<br>36 | -        |  |  |
| REPRESENTATI                              | VE IN THE GENE                | RAL ASS     | EMBLY                |            |             |      |       |          | 11    |          | 4           | 2008        |   | (SEE IN                     | STRUCTI | ONS FOR | CODES      | )        |  |  |
| Summary of                                |                               | МО          | DAY                  | YEAR       | 2           |      |       | МО       |       | DAY      | Y           | EAR         | FOI                                       | OFFI                        | CE USE  | ONLY    |            |          |  |  |
| Expenditures                              | from:                         |             | 1 1                  | 2          | 800         | Т    | 0     |          | 5     | :        | 12          | 2008        |   |                             |         |         |            |          |  |  |
| A. Amount Bro                             | ught Forward Fro              | m Last R    | eport                |            |             |      | \$    |          |       | (        | (13,7       | (66.52)     |   |                             |         |         |            |          |  |  |
| B. Total Monet                            | ary Contributions             | And Rec     | eipts (Fror          | n Sche     | dule        | I)   | \$    |          |       |          |             | 0.00        | 0   |                             |         |         |            |          |  |  |
| C. Total Funds                            | Available (Sum O              | f Lines A   | and B)               |            |             |      | \$    |          |       | (        | (13,7       | (66.52)     |   |                             |         |         |            |          |  |  |
| D. Total Expend                           | ditures (From Sch             | nedule II   | I)                   |            |             |      | \$    |          |       |          |             | 53.06       |   |                             |         |         |            |          |  |  |
| E. Ending Cash                            | Balance (Subtra               | t Line D    | From Line            | C)         |             |      | \$    |          |       | (        | 13,8        | 19.58)      |   |                             |         |         |            |          |  |  |
| F. Value Of In-                           | Kind Contribution             | s Receiv    | ed (From S           | Schedu     | le II       | )    | \$    |          |       |          |             | 0.00        |   |                             |         |         |            |          |  |  |
| G. Unpaid Debt                            | s And Obligations             | s (From S   | Schedule I           | <b>V</b> ) |             |      | \$    |          |       |          |             | 0.00        |   |                             |         |         |            |          |  |  |
|   |                               |             |                      | AFF        | IDA         | ١٧٧  | ΓSE   | CTIO     | N     |          |             |             |   |                             |         |         |            |          |  |  |
|   | a Committee rep               | •           |                      |            |             |      |       |          |       | •        |             | _           |   |                             |         |         |            |          |  |  |
| I swear (or affirm)<br>correct and comple | that this report, inc<br>ete. | cluding the | e attached so        | hedule     | s filed     | d on | paper | or by e  | lectr | onic m   | edium       | ı, are to t | he best of                                | my kno                      | wledge  | and bel | ief , tr   | ue       |  |  |
| Sworn to and subs                         | cribed before me th<br>day of | is          | 20                   |            |             |      |       |          | •     |          |             | Signature   | of Person                                 | Submit                      | ting Re | oort    |            | _        |  |  |
|   | Signat                        | ure         |                      |            |             |      | -     |          | •     |          |             |             | Print                                     | ed Name                     | •       |         |            | _        |  |  |
| My Commission Ex                          | pires                         |             |                      |            |             |      |       |          | -     |          |             |             | Email                                     |                             |         |         |            |          |  |  |
|   | мо                            | D           | AY                   | YR         |             |      |       |          |       | Arc      | ea Co       | de          | Daytime                                   | Teleph                      | one Nu  | mber    |            |          |  |  |
| Part II- If this is                       | a report of a can             | didate's    | authorized           | l Comr     | nitte       | e, C | andid | ate sh   | all s | sign he  | ere.        |             |   |                             |         |         |            |          |  |  |
| I swear (or affirm)<br>No 320) as amende  | that to the best of ed.       | my knowle   | edge and be          | ief this   | polit       | ical | comm  | ittee ha | as no | ot viola | ted ar      | ny provisi  | ions of the                               | act of J                    | une 3,1 | 937 (P. | L. 133     | з,       |  |  |
| Sworn to and subsc                        | ribed before me this          | i           |                      |            |             |      |       |          |       |          |             | Si          | ignature of                               | Candid                      | ate     |         |            | _        |  |  |
|   | day of                        |             |                      |            |             |      | -     |          |       |          |             |             | Printed                                   | l Name                      |         |         |            | -        |  |  |
| My Companies: 7                           | Signature                     |             |                      |            |             |      | -     |          | -     |          |             |             | Email                                     |                             |         |         |            | _        |  |  |
| My Commission Exp                         |                               |             |                      |            |             |      | _     |          |       |          |             |             |   |                             |         |         |            | _        |  |  |
|   | МО                            | D           | AY                   | YR         | 2           |      |       |          |       | Area     | Code        |             | Da  | ytime T                     | elephor | e Num   | ber        | -        |  |  |

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| Name of Filing Committee or Candidate  | Reporting | g Period |              |           |
|--|-----------|----------|--------------|-----------|
| Bryan Cutler   | From:     | 1/1/200  | <u>8</u> To: | 5/12/2008 |
| 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 an 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 Committee or Ca  | andidate | R                 | eporting | Period |      |    |        |
|---------------------------------|----------|-------------------|----------|--------|------|----|--------|
|                                 |          | F                 | rom:     |        | То   | :  |        |
|                                 |          | •                 |          | DATE   |      |    | AMOUNT |
| Full Name of Contributing Commi | ittee    |                   | 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.

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 Commit    | tee or Candidate |                   | Repo | orting P | eriod |      |            |        |
|--------------------------|------------------|-------------------|------|----------|-------|------|------------|--------|
|                          |                  |                   | From | n:       |       | To   | <b>)</b> : |        |
|                          |                  |                   |      |          | DATE  |      |            | AMOUNT |
| Full Name of Contributor |                  |                   |      | мо       | DAY   | YEAR |            |        |
|                          |                  |                   |      |          |       |      | ۱ ـ        | 0.00   |
| Mailing Address          |                  |                   |      |          |       |      | \$         | 0.00   |
| Mailing Address City     | State            | Zip Code (Plus 4) | )    |          |       |      | <b>*</b>   | 0.00   |

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 Candidate |                      |          | Reporting   | Period |     |      |    |         |      |
|---------------------------------------|----------------------|----------|-------------|--------|-----|------|----|---------|------|
|                                       |                      |          | From:       |        |     | То:  |    |         |      |
|                                       |                      |          |             | DA     | TE  |      | А  | MOUNT   |      |
| Full Name of Contributing Committee   |                      |          |             | мо     | DAY | YEAR | \$ |         | 0.00 |
| Mailing Address                       |                      |          |             |        |     |      | 7  |         | 0.00 |
| City                                  | State                | Zip Cod  | e (Plus 4)  |        |     |      |    |         |      |
|                                       |                      |          |             |        |     |      | -  | PAGE TO | TAL  |
| Enter Grand Total of Part C on Scheo  | lule 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 | 9                |         |              | Rep          | orting Pe | riod  |      |            |              |
|---------------------------------------|------------------|---------|--------------|--------------|-----------|-------|------|------------|--------------|
|                                       |                  |         |              | Fror         | n:        |       | To   | <b>)</b> : |              |
|                                       |                  |         |              |              | D         | ATE   |      |            | AMOUNT       |
| Full Name of Contributor              |                  |         |              |              | мо        | DAY   | YEAR | \$         | 0.00         |
| Mailing Address                       |                  |         |              |              |           |       |      | 7          |              |
| City                                  | State            | Zi      | p Code (Plus | s <b>4</b> ) |           |       |      |            |              |
| 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  | or Candidate              |                 | Report      | ing Peri | od  |      |          |            |
|---------------------------|---------------------------|-----------------|-------------|----------|-----|------|----------|------------|
|                           |                           |                 | From:       |          |     | To:  |          |            |
|                           |                           | <b>'</b>        |             |          | ATE |      |          | AMOUNT     |
| Full Name                 |                           |                 |             | мо       | DAY | YEAR | \$       | 0.00       |
| Mailing Address           |                           |                 |             |          |     |      | 7        |            |
| City                      | State                     | Zip Code (P     | Plus 4)     |          |     |      |          |            |
| Receipt Description       | <b>'</b>                  |                 |             |          |     |      | <u> </u> |            |
|                           | - C                       |                 | <b>.</b> .: | _        |     |      |          | PAGE TOTAL |
| Enter Grand Total of Part | E on Schedule I, Detailed | Summary Page, S | 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:            | <u>1/1/2008</u> <b>To:</b> | <u>5/12/2008</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 Candidate |                  |                      | Reporting | g Period |      |             |           |      |
|---------------------------------------|------------------|----------------------|-----------|----------|------|-------------|-----------|------|
|                                       |                  |                      | From:     |          |      | To:         |           |      |
|                                       |                  |                      |           | DATE     |      |             | AMOUNT    |      |
| Full Name of Contributor              |                  |                      | МО        | DAY      | YEAR |             |           |      |
| Mailing Address                       |                  |                      |           |          |      | <b>7</b> \$ |           | 0.00 |
| City                                  | State            | Zip Code (Plus 4)    |           |          |      |             |           |      |
| Description of Contribution:          | -                | <b>-</b>             | •         | •        | •    |             |           |      |
|                                       |                  |                      |           |          |      |             |           |      |
| Enter Grand Total of Part F on Sche   | dule II, In-Kind | d Contributions Deta | iled Sum  | mary Pag | ge,  |             | PAGE TOTA | L    |
| Section 2.                            |                  |                      |           |          |      | \$          |           | 0.00 |

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

| Name of Filing Committee or Candidate   |                  |      |                  | Rep    | orting | Period       |       |      |                     |      |
|---|------------------|------|------------------|--------|--------|--------------|-------|------|---------------------|------|
|   |                  |      |                  | Fro    | m:     |              | To:   |      |                     |      |
|   |                  |      |                  |        |        | DATE         |       |      | AMOUNT              |      |
| Full Name of Contributor                |                  |      |                  |        | мо     | DAY          | YEAR  |      |                     |      |
| Mailing Address                         |                  |      |                  | -      |        |              |       |      | \$                  | 0.00 |
| City                                    | State            | ;    | Zip Code(Plus 4) |        |        |              |       |      |                     |      |
| Employer of Contributor                 |                  |      |                  |        | Occup  | ation        |       |      |                     |      |
| Employer Mailing Address/Principal Plac | e of Business    | City | ′                | State  | e Zip  | Code(Plus 4) | Descr | ript | ion of Contribution | on   |
| Enter Grand Total of Part G on Scho     | edule II, In-Kir | nd C | ontributions De  | etaile | ed     |              |       |      | PAGE TOT            | ΓAL  |
| Summary Page, Section 3.                | <b></b>          |      |                  |        |        |              |       |      |                     | 0.00 |

### STATEMENT OF EXPENDITURES

| Name of Filing Committee or 0 | Candidate |                   | Reporti | ng Period   |          |     |            |
|-------------------------------|-----------|-------------------|---------|-------------|----------|-----|------------|
| Bryan Cutler                  |           |                   | From    | 1/          | 1/2008   | То: | 5/12/2008  |
|                               |           |                   |         | DATE        |          |     | AMOUNT     |
| To Whom Paid                  |           |                   | МО      | DAY         | YEAR     |     |            |
| Internet Web hosting          |           |                   | 140     |             | IEAK     |     |            |
| Mailing Address               |           |                   | 4       | 17          | 2008     | \$  | 19.95      |
| City                          | State     | Zip Code (Plus 4) | Descrip | tion of Exp | enditure |     |            |
| PA                            |           |                   |         | tler2008    |          |     |            |
| To Whom Paid                  |           |                   | мо      | DAY         | YEAR     |     |            |
| Internet Web hosting          |           |                   |         |             | IEAK     |     |            |
| Mailing Address               |           |                   | 4       | 27          | 2008     | \$  | 11.95      |
| City                          | State     | Zip Code (Plus 4) | Descrip | tion of Exp | enditure |     |            |
|                               | PA        |                   | ElectCu | tler2008    |          |     |            |
| To Whom Paid                  |           |                   | мо      | DAY         | YEAR     |     |            |
| Heavenly                      |           |                   | PIO     |             | ILAK     |     |            |
| Mailing Address               |           |                   | 4       | 28          | 2008     | \$  | 21.16      |
| <b>City</b> Quarryville       | State     | Zip Code (Plus 4) | Descrip | tion of Exp | enditure |     |            |
|                               | PA        | 17566             | Thank y | ou cards    |          |     |            |
|                               |           |                   |         |             |          |     | PAGE TOTAL |

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

53.06