### **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	20052	289			Rep File			CAND	DATE		СОМ	<b>4ITTEE</b>	<b>✓</b>	LOBE	YIST		
Name of Filing C	Committee, (	Candida	te or Lo	bbyist:		FRIE	ND:	S OF	BRYAN C	UTLER								
Street Address:	P O BO	X 624																
City:	QUARR	YVILLE							State:	PA			Zip Cod	de: 17	7566-1	104		
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDAY PRIMARY	/ PRE-	- 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	~	
(place X to the right of	6TH TUESDA PRE-ELECTION		4.	2ND FRIDAY ELECTION	/ PRE	- 5	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	~	
report type)	ANNUAL RE	EPORT	7. <b>X</b>	<b>Year</b> 2010					IG METH CHECK O				PAPER		$\checkmark$	DISKE	TTE	
Name of Office S	Sought by Ca	andidate	 e:						DATE C	)F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code	
									МО	DAY	YE	AR	Number	STH	REP		36	
REPRESENTATI	VE IN THE	GENER	AL ASSI	EMBLY					11		2	2010		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
Summary of		and	МО	DAY	YEAR				МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	irom:			1 1	2	010	T	0	12	2	31	2010						
A. Amount Bro	ught Forwa	rd From	Last Re	eport				\$			11,4	142.23						
B. Total Monet	ary Contribu	utions A	nd Rece	eipts (From	Sche	dule	I)	\$			ŗ	500.00						
C. Total Funds	Available (S	Sum Of	Lines A	and B)				\$			11,9	942.23						
D. Total Expen	ditures (Fro	m Sche	dule III	<b>()</b>				\$			8	808.48						
E. Ending Cash	Balance (S	ubtract	Line D	From Line (	C)			\$			11,1	.33.75						
F. Value Of In-	Kind Contrib	butions	Receive	ed (From So	hedu	le II)	)	\$				0.00						
G. Unpaid Debt	ts And Oblig	ations (	(From S	chedule IV	)			\$				0.00			1			
					AFF	IDA	VI	T SE	CTION									
PART I - If this is	s a Committ	ee repo	rt, treas	surer sign l	nere. I	[f thi	s is	a Can	ididate r	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple		ort, inclu	iding the	attached sch	edules	filed	on p	paper (	or by elect	tronic m	edium	, are to t	he best o	f my kno	wledge a	and belie	ef , true	
Sworn to and subs	cribed before day of	me this		20							S	Signature	of Perso	n Submit	ting Rep	ort		
		<u>.                                    </u>						- -					Prin	ted Name	e			
My Commission Ex		Signatur	е										Ema	il				
	мо	)	DA	·Υ	YR			-		Ar	ea Coc	le	Daytim	e Teleph	none Nui	nber		
Part II- If this is	a report of	a candi	idate's a	authorized	Comn	nittee	e, Ca	andida	ate shall	sign h	ere.							ĺ
I swear (or affirm) No 320) as amende		est of m	y knowle	dge and belie	ef this	politi	ical	commi	ittee has r	not viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L	1333,	1
Sworn to and subsc	ribed before r	me this										s	ignature o	of Candid	ate			
	day of							_										
	S:	natura						-					Printe	d Name				
My Commission Exp	_	nature											Ema	il				
		мо	DA	ΛΥ	YR			•		Area	Code		Da	aytime T	elephon	e Numb	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF BRYAN CUTLER	From:	1/1/201	<u>0</u> To:	12/31/2010
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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)			\$	500.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	) Period	(3)	\$	500.00
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			\$	500.00

#### **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 Candida	te		Reporting	Period			
			From:		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 Candida	te		Reporting Period						
			Fro	m:		To	):		
		•			DATE			AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)	)						

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

**PAGE TOTAL \$** 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 Per	iod		
FRIENDS OF BRYAN CUTLER	From:	1/1/2010	То:	12/31/2010

DATE AMOUNT

Full Name of Contributing Committee			МО	DAY	YEAR	
PPL PEOPLE FOR GOOD GOVERNMENT			1-10	DAI	ILAK	<b>\$</b> 500.00
Mailing Address TWO NORTH NINTH	STREET		12	26	2010	
City ALLENTOWN	State	Zip Code (Plus 4)			2010	
	PA	18101				

PAGE TOTAL

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

### 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			
				Fron	n:		т	o:	
					D.	ATE			AMOUNT
Full Name of Contributor					МО	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zip C	Code (Plus	s 4)					
Employer Name					Occupa	tion			
Employer Mailing Address/Principal Plac	e of Business	C	City		•	State		Zip (	Code (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	umma	ry 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:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address	_						$\neg$	
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•	•	•	
			<b>.</b>	_				PAGE TOTAL
Enter Grand Total of Part	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	iod	
FRIENDS OF BRYAN CUTLER	From:	<u>1/1/2010</u> <b>To</b> :	12/31/2010
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 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				Re	porting	Period				
				Fro	m:		To:			
						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 Per	riod		
FRIENDS OF BRYAN CUTLER	From	1/1/2010	То:	12/31/2010

DATE		
		AMOUNT
To Whom Paid  MO DAY YEAR		
AMY RINEER		
Mailing Address1568 SLATE HILL ROAD12222010	\$	369.56
City DRUMORE State Zip Code (Plus 4) Description of Expenditure		
PA 17518 REIMBURSEMENT FOR EXP	ENSES	
To Whom Paid MO DAY YEAR		
AL MARTIN		
Mailing Address         2124 BALD EAGLE ROAD         12         22         2010	\$	393.07
City DRUMORE State Zip Code (Plus 4) Description of Expenditure		
PA 17518 REIMBURSEMENT FOR EXP	ENSES	
To Whom Paid YAHOO  MO DAY YEAR		
	<u> </u>   \$	12.95
Mailing Address 701 FIRST AVENUE 11 29 2010		12.93
City SUNNYVALE State Zip Code (Plus 4) Description of Expenditure		
CA 94089 HOSTING FEES		
To Whom Paid YAHOO  MO DAY YEAR		
Mailing Address701 FIRST AVENUE12202010	\$	19.95
City SUNNYVALE State Zip Code (Plus 4) Description of Expenditure		
CA 94089 HOSTING FEES		
To Whom Paid YAHOO  MO DAY YEAR		
	\$	12.95
Mailing Address701 FIRST AVENUE12282010		
Mailing Address     701 FIRST AVENUE     12     28     2010       City     SUNNYVALE     State     Zip Code (Plus 4)     Description of Expenditure		
City SUNNYVALE State Zip Code (Plus 4) Description of Expenditure		PAGE TOTAL