

60-HR2  
**STATEMENT OF FINANCIAL INTERESTS**

PLEASE PRINT NEATLY

01 **LAST NAME** **FIRST NAME** **MI** **SUFFIX**  
CUTLER BRYAN D

02 **STREET ADDRESS** (work or residence) **City** **State** **Zip Code** **Area Code** **Phone**  
207 East State Street Quarryville PA 17566 (717) 786-4551

03 **STATUS** Check applicable block or blocks, more than one block may be marked. (See instructions on page 2)  
A  Candidate (including write-in) C  Public Official (Current) D Public Employee (Current) **Check this block if you are amending an original filing**  
B Nominee C Public Official (Former) D Public Employee (Former)

04 **PUBLIC POSITION OR PUBLIC OFFICE** (administrator, member, Commissioner, job title, etc.) **seeking**  **hold** **held**  
A STATE REPRESENTATIVE  **seeking** **hold** **held**  
B STATE REPRESENTATIVE

05 **GOVERNMENTAL ENTITY** in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept, agency, authority, borough, board, commission, county, school district, twp, etc.)  
A GENERAL ASSEMBLY LANCASTER 100  
B GENERAL ASSEMBLY LANCASTER 100

06 **OCCUPATION OR PROFESSION** (This may be the same as block 4) **07 YEAR** The information in blocks 8 through 15 below represents financial interests for the **PRIOR** calendar year indicated:  
Legislator/Attorney/X-ray technologist 2007

08 **REAL ESTATE INTERESTS** (See instructions on page 2) If **NONE**, check this box.

09 **CREDITORS** (See instructions on page 2). If **NONE**, check this box.   
Creditor **Interest Rate**  
See Attachment #1

10 **DIRECT OR INDIRECT SOURCES OF INCOME** including (but not limited to) all employment. (See instructions on pg. 2) **ONLY IF NONE, check this block.**  **(OFFICIAL USE ONLY)**  
Name **Address**  
See Attachment #2

11 **GIFTS** (See instructions on page 2) If **NONE**, check this box.   
Source of Gift **Value of Gift**  
Address of Source of Gift **Circumstances (including description) of Gift**  
2008 FEB - 8 A 11:40

12 **TRANSPORTATION, LODGING, HOSPITALITY** (See instructions on page 2) If **NONE**, check this box.   
Source (Name and Address) **Value**

13 **OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS** (See instructions on page 2) If **NONE**, check this box.   
Business Entity **Position Held**

14 **FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT** (See instructions on page 2) If **NONE**, check this box.   
Name and Address of Business **Interest Held**

15 **BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER** (See instructions on page 2) If **NONE**, check this box.   
Business (Name and Address) **Interest Held**  
Transferee (Name and Address) **Relationship**  
**Date Transferred**

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa.C.S. § 4904 (unsworn falsification to authorities) and the Public Official and Employees Ethics Act, 65 Pa.C.S. § 1109(b).

Signature Bryan D. Cutler Current Date 2-5-08

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED

## Attachment #1 CREDITORS

Citibank (South Dakota) N.A.  
PO Box 6191  
Sioux Falls, SD 57117-6161

Interest Rate: varied 8.00%

Discover Card  
PO Box 30395  
Salt Lake City, UT 84130-0395

Interest Rate: 14.99%

AES  
PO Box 2461 Consolidation  
Harrisburg, PA 17105-2461

Interest Rate: Fixed 3.25%

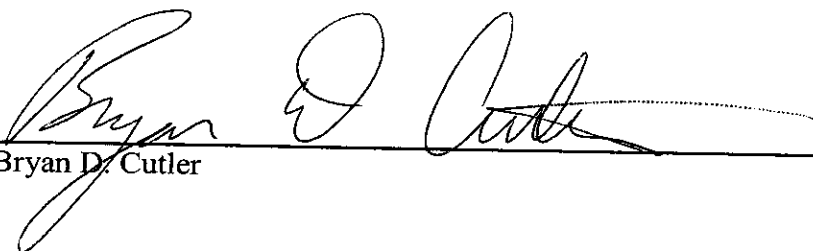
Bank of Lancaster County  
FIA Card Services  
PO Box 15026  
Wilmington, DE 19850-5026

Interest Rate: varied 12.72%

Fulton Bank  
PO Box 69  
East Petersburg, PA 17520

Interest Rate: 7.89%

2008 FEB - 8 A 11: 40  
STATE ETHICS  
COMMISSION

  
Bryan D. Cutler

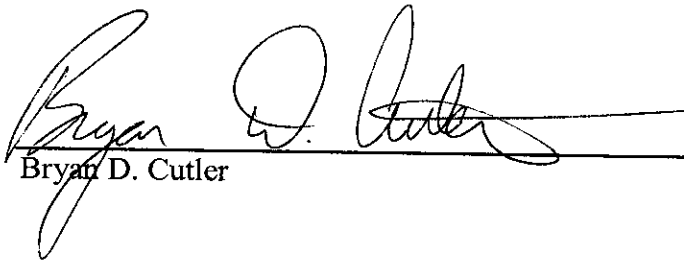
2/5/08

## Attachment #2 INCOME

Lancaster Regional Medical Center  
250 College Avenue  
Lancaster, PA 17603

Wachovia Securities, LLC  
401 S. Tryon Street-NC 0136  
Charlotte, NC 28288-0136

Pennsylvania House of Representatives  
House Box 202100  
Harrisburg, PA 17120-2100



Bryan D. Cutler

2-5-08

2008 FEB -8 A 11:40  
STATE ETHICS  
COMMISSION