		NSYLVANIA STATE ETHICS COMMISSION 7) 783-1610 • TOLL FREE 1-800-932-0936
01	LAST NAME FIRST NAME M; Lha	MI SUFFIX
02	ADDRESS office (business or governmental) or home City State Zip Code PA 13018	Area Code Phone (610) 41-2-3-357
N	OTE: IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FIN.	Annual Residence of the control of t
03	STATUS Check applicable box or boxes, more than one box may be marked. A Candidate (including write-in) C Public Official (Current) D Public Employee (Current) E Check this if you are as a solice.	filing are amending
04	PUBLIC OFFICE OR PUBLIC EMPLOYMENT (i.e. administrator, member, Commissioner, job title, etc.) seeking ho	ld held
A	DePuty Director uf Human	$ \begin{array}{c c} $
В	City Councilman	
05	GOVERNMENTAL BODY in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept, agency, authority, borough, board, commit	ssion, county, school district, twp, etc.)
Α	COUNTY OF WORTH UMPHON	
В	lity of Bath Gham	
06 D-7	OCCUPATION OR PROFESSION (This may be the same as block 4) 2 9 1-1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0 2 4
80	REAL ESTATE INTERESTS involved in transactions with the Commonwealth, any of its agencies, or a political subdivision	If NONE, check this box
09	CREDITORS TO WHOM IS OWED MORE THAN \$6,500 Name: Address:	If NONE, check this box
09		If NONE, check this box
09		If NONE, check this box Interest Rate
-	Name; Address:	If NONE, check this box
-	DIRECT OR INDIRECT SOURCES OF INCOME OF \$1,300 OR MORE, including (but not limited to) all employment	If NONE, check this box Interest Rate
10	DIRECT OR INDIRECT SOURCES OF INCOME OF \$1,300 OR MORE, including (but not limited to) all employment Name: Ounty of Northorpton Address: 659 Washington 14 [4] to 1907 GIFTS VALUED AT \$250 OR MORE IN THE AGGREGATE	If NONE, check this box Interest Rate If NONE, check this box (OFFICIAL USE ONLY) If NONE, check this box
10	DIRECT OR INDIRECT SOURCES OF INCOME OF \$1,300 OR MORE, including (but not limited to) all employment Name: Ounty of Northorpton Address: 659 Washington 14 [4] to 1907 GIFTS VALUED AT \$250 OR MORE IN THE AGGREGATE	If NONE, check this box Interest Rate If NONE, check this box (OFFICIAL USE ONLY) If NONE, check this box Value of Gift
10	DIRECT OR INDIRECT SOURCES OF INCOME OF \$1,300 OR MORE, including (but not limited to) all employment Name: Dan J. Darthorpton Address: 65 Washington 14 Easten PA 18 JYZ GIFTS VALUED AT \$250 OR MORE IN THE AGGREGATE Source of Gift	If NONE, check this box Interest Rate If NONE, check this box (OFFICIAL USE ONLY) If NONE, check this box Value of Gift
11	DIRECT OR INDIRECT SOURCES OF INCOME OF \$1,300 OR MORE, including (but not limited to) all employment Name: Address: hg Washington 14 GIFTS VALUED AT \$250 OR MORE IN THE AGGREGATE Source of Gift Address of Source of Gift Circumstances (including description) of GIFTS VALUED AT \$250 OR HOSPITALITY WHERE ACTUAL EXPENSES EXCEEDED \$650 IN THE AGGREGATE	If NONE, check this box Interest Rate If NONE, check this box (OFFICIAL USE ONLY) If NONE, check this box Value of Gift If NONE, check this box
11	DIRECT OR INDIRECT SOURCES OF INCOME OF \$1,300 OR MORE, including (but not limited to) all employment Name: Address: Circumstances (including description) of G TRANSPORTATION, LODGING OR HOSPITALITY WHERE ACTUAL EXPENSES EXCEEDED \$650 IN THE AGGREGATE Source (Name and Address) OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS	If NONE, check this box Interest Rate If NONE, check this box (OFFICIAL USE ONLY) If NONE, check this box Value of Gift If NONE, check this box
10	DIRECT OR INDIRECT SOURCES OF INCOME OF \$1,300 OR MORE, including (but not limited to) all employment Name: Dank of Dark or the Address: D.G. Washington 14 Eastern PA 18 Jy 2 GIFTS VALUED AT \$250 OR MORE IN THE AGGREGATE Source of Gift Circumstances (including description) of G TRANSPORTATION, LODGING OR HOSPITALITY WHERE ACTUAL EXPENSES EXCEEDED \$650 IN THE AGGREGATE Source (Name and Address)	If NONE, check this box Interest Rate If NONE, check this box (OFFICIAL USE ONLY) If NONE, check this box Value of Gift If NONE, check this box Value If NONE, check this box Position Held (i.e., officer, director, director
11 12 [13	DIRECT OR INDIRECT SOURCES OF INCOME OF \$1,300 OR MORE, including (but not limited to) all employment Name: Duny of Northorphon Address: 659 Washington 14 Eastern Pa 18 242 GIFTS VALUED AT \$250 OR MORE IN THE AGGREGATE Source of Gift Circumstances (including description) of G TRANSPORTATION, LODGING OR HOSPITALITY WHERE ACTUAL EXPENSES EXCEEDED \$650 IN THE AGGREGATE Source (Name and Address) OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS Business Entity (Name and Address) FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT Business (Name and Address) BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER	If NONE, check this box Interest Rate If NONE, check this box (OFFICIAL USE ONLY) If NONE, check this box Value of Gift If NONE, check this box Value If NONE, check this box If NONE, check this box If NONE, check this box Interest Held (i.e., 5%, 10%, etc.)
10 11 12 13 14	DIRECT OR INDIRECT SOURCES OF INCOME OF \$1,300 OR MORE, including (but not limited to) all employment Name: Ound of Northon Address: 69 Washington 14 GIFTS VALUED AT \$250 OR MORE IN THE AGGREGATE Source of Gift Circumstances (including description) of G TRANSPORTATION, LODGING OR HOSPITALITY WHERE ACTUAL EXPENSES EXCEEDED \$650 IN THE AGGREGATE Source (Name and Address) OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS Business Entity (Name and Address) Transportation for the including description of G FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT Business (Name and Address)	If NONE, check this box Interest Rate If NONE, check this box (OFFICIAL USE ONLY) If NONE, check this box Value of Gift If NONE, check this box Value If NONE, check this box Interest Held (i.e., 5%, 10%, etc.) If NONE, check this box Interest Held (i.e., 5%, 10%, etc.)

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOU'R RECORDS.

SIGN THE FORM USING CURRENT DATE. DO NOT BACK DATE SIGNATURE.

_ Enter Current Date.

Signature_

Statement of Financial Interests Additional Information

Colón, Michael G.

For Year: 2024

Date: 5/1/25

- 4. Public Position or Public Office:
 - C. Bethlehem Human Relations Commissioner Hold
 - D. Admissions Coordinator Held
- 5. Government Entity
 - C. City of Bethlehem Human Relations Commission
 - D. County of Northampton Gracedale Nursing Home
- 10. Director or Indirect Sources of Income

Name: City of Bethlehem

Address: 10 E. Church Street, Bethlehem, PA 18018

13. Officer, Directorship, or Employment In Any Business

Board Member for the Hispanic Chamber of Commerce of the Lehigh Valley

840 Hamilton Street, Suite 205

Allentown, PA 18101