COMMONWEALTH OF PENNSYLVANIA SEC-1 (Rev. 01/21)

STATEMENT OF FINANCIAL INTERESTS

PENNSYLVANIA STATE ETHICS COMMISSION (717) 783-1610 • TOLL FREE 1-800-932-0938

						Pl	LEASE	E PRIN	NT NEAT	LY											
01 LAST N	IAME , , ,								FIRST	NAME										SUFFI	<u>x</u>
MI	1 HE	LM							FI	6	P.	A			<u></u>	<u></u>	<u></u>				
	ss office (business 05 East	or govern Mark				6	City Be	eth	nleh	en	<u>1</u>	PA	State t		Code		Area C	ode 1)3		hone	<u> 195</u>
NOTE: IF YO	OU ARE INCLUDING	ATTACHM	ENTS, DO	том с	IN CLU DE	E ANYT	HING T	THAT G	BEARS YO	วบห รเ	OCIAL S	SECURI	ITY NU	JMBE	ROR	FINAN	CIAL	ACCO!	UNT I	NUM3	ERS.
03 STATUS	S Check applicable	le box or bo	xes, more	than or	ne box ma	ay be n	narked.	. (See i	instruction	ıs on pa	age 2)									ck this	
А) В [Candidate (includ	ding write-in	n) C		ublic Offic ublic Offic	•	,] a	II	•	loyee (Ci loyee (Fo	•	E		if you	k this b are fili solicitor	ing		are a	if you imend riginal	ing
04 PUBLIC	POSITION OR PU	BLIC OFFIC	CE (admini	istrator,	, member	, Comn	missione	er, job	title, etc.)	X 5	eeking			hold	_ -	口	held				
^ C l	TY	Col	u N	C	سالد	M	E	M	BE	P						$\overline{\perp}$					
										s	eeking			hold	_		held	1		_	
В						<u></u>							<u></u>	<u> </u>		<u></u>	<u>L</u>		-		
05 GOVER	NMENTAL ENTITY in	which you	are/were an	n Official	I, Employe	ee, Can	didate o	or Nomi	nee (e.g., o	dept, ag	jency, au	thority, b	porougi	h, boar	rd, com	nmissio	on, cour	nty, sch	ool dis	strict, tv	vp, etc.)
ACI	71	OF	B	E	HT	L	E	#	E M				\perp			<u></u>					
в	, ,	$\overline{}$		П		$\overline{\top}$					П	T	 	\overline{T}	1	T	T				
	ATION OF THE	eeicu -		<u></u>	<u> </u>	<u></u>		<u> </u>	07 VE**	, ,	E INOTE	HOTIC	Ne —	<u></u>				1,		<u> </u>	<u></u>
	ATION OR PROFE	•	-				٠			nation i	E INSTR	8 -15 re	eprese		<u></u>	2	0 .	210	5		
		ig Bo					AZII			sure fc	or the cal	endar y	year lis	ed he	я н : [
08 REALE	ESTATE INTEREST	ુ (၁၉၉ Insti	iucuons of	ıı hağe ;	∠j πNC	JIVE, CÌ	ieck th	X0Q en	~ K7												

00	rope /o- · ·	.ne :	. 0\ 0		20.5-1	4,1			heel- 41.		<u> </u>										
09 CREDIT	rors (See instruction	ons on page	2) Credito	or (Nam	ne and Ad	idress)) If NC		heck this	box.	ľΧ						Inter	rest Rat	te		
	ORS (See instruction	ons on page	2) Credito	or (Nam	ne and Ad	idress)	•		heck this	box.	ΙŻΥ						Inter	est Rat	.e		
Name:	ORS (See instruction						Addr	ress:		,		n page 2		ONE,	s box		<u></u>	rest Rat		E ONL	
Name:	OR INDIRECT SOL	JRCES OF I	INCOME in	ncluding	g (but not		Addr to) all e	ress:	ment. (See	e instrue	ctions or	:La	che NCA	ster	r, PF	1	<u></u>			E ONL	<u></u>
Name:		JRCES OF I	INCOME in	ncluding	g (but not		Addr to) all e	ress:	ment. (See	e instrue	ctions or	:La	che NCA	ster	r, PF	1	<u></u>			E ONL	.Y)
10 DIRECT	or INDIRECT SOL Fig Indu igh Valle (See instructions on	urces of i strie	income in S lebra	ant	g (but not	limited	Addr to) all e	ress:	ment. (See	e instrue	ctions or	:La	che NCA	ster	r, PF	1	(OI		AL USI	E ONL	<u></u>
10 DIRECT Name: F	or INDIRECT SOL Fig Indu igh Valle (See instructions on	urces of i strie	income in S lebra	ant	g (but not	limited	Addr to) all e	ress:	ment. (See	e instrue	ctions or	:La	che NCA	ster	r, PF	1	(OI	FFICIA	AL USI	E ONL	Y)
Name: Name: Name: Name: Source of	or INDIRECT SOL Fig Indu igh Valle (See instructions on	urces of i strie	income in S lebra	ant	g (but not	limited	Addr to) all e	ress:	ment. (See	e instrue	ee St Ale B	:La	che nCa ehen	sckthis ster n, A	176	702 018	(Of	FFICIA	AL USI	E ONL	.Y)
Name: Na	OR INDIRECT SOL	strie	INCOME IT	check t	g (but not	limited	to) all e	ress:	ment (Sec	e instru	circums	: Lai	che nCa ehen	sckthis ster n, A	176) of Gift	(Of	FFICIA	AL USI	E ONL	Y)
Name: Na	OR INDIRECT SOL	strie	INCOME IT	check t	g (but not	limited	to) all e	ress:	ment (Sec	e instru	circums	: Lai	che nCa ehen	sckthis ster n, A	176) of Gift	(OI	FFICIA	AL USI	E ONL	Y)
Name: Name: Name: Name: Address of 12 TRANS Source (t	GSE Instructions on of Gift SPORTATION, LOD Name and Address)	Strie Strie To page 2) GING, HOS	INCOME IT	check t	g (but not	limited Imited	to) all en	ress: Mariess: Maries	ment. (See	e instruction	Circums	stances (che NCA Elnen	ster Ster M, QA	176) of Gift	Value Positiv	FFICIA	L USI		
Name: Name: Name: Name: Name: Name: Table V 11 GIFTS Source of Address of 12 TRANS Source (t	OR INDIRECT SOL	ging, Hos	INCOME IT	check t	g (but not	limited son p	to) all e	ress: employr TR	ONE, che	Duk	Circums S box.	stances (che MCA Chen (includir	ng desc	r, PF	002 018	Value Position	FFICIA	IL USI	officer, c	
Name: Name: Name: Name: Name: Name: 11 GIFTS Source of Address of 12 TRANS Source (t) 13 OFFICE Busines Name:	GSE INDIRECT SOLITION (See instructions on of Gift FOURTH SOURCE OF GIFT FOURCE OF GIFT FOURTH SOURCE OF GIFT	GING, HOS	INCOME IT	check t	g (but not	imited in initial init	Address Addres	ress: employr T R If NO	one, che	Dukes 1	Circums S box. [stances (chen CA ehen (includir	ster ster M, 94	Cription)	002 018 0 of Gift	Value Posititi emplo	on Held	(i.e., o	onfficer, c	director,
Name: Name: Name: Name: Name: 10 DIRECT Name: 11 GIFTS Source of 12 TRANS Source (f	GSee instructions on of Gift SPORTATION, LODINAME and Address) E, DIRECTORSHIP,	GING, HOS OR EMPLO	INCOME IT	check t	g (but not	imited in initial init	Address Addres	ress: employr T R If NO	one, che	Dukes 1	Circums S box. [stances (chen CA ehen (includir	ster	Cription)	002 018 0 of Gift	Value Posititi emplo	FFICIA	(i.e., o	onfficer, c	director,
Name: Name: Name: Name: Name: 10 DIRECT Name: 11 GIFTS Source of Address of 12 TRANS Source (f) 13 OFFICE Busines Name: 14 FINANC Name an	Gee instructions or of Gift SPORTATION, LODINAME and Address) E, DIRECTORSHIP, SE Entity (Name and Address of Business	GING, HOS OR EMPLO	INCOME IT	check t	g (but not this box. instruction BUSINESS	ons on p	page 2) ee instruction Addree Addree	ress: remployr ress: 1 R if NO ructions rest: 105 (See in the content of t	ONE, che	Dukes 1	Circums S box. NONE, c St. La	stances (che NCA	ster A A A A A A A A A A A A A	r, Pf	002 003 0016in	Value Positive emplo	on Held	(i.e., o	onfficer, c	director,
Name: Name: Name: Name: Name: 10 DIRECT Name: 11 GIFTS Source of Address of 12 TRANS Source (I	GSee instructions on of Gift SPORTATION, LODINAME and Address) E, DIRECTORSHIP, as Entity (Name and Address) E, DIRECTORSHIP, as Entity (Name and Address)	GING, HOS OR EMPLO	INCOME IT	check t	g (but not this box. instruction BUSINESS	ons on p	page 2) ee instruction Addree Addree	ress: remployr ress: 1 R if NO ructions rest: 105 (See in the content of t	ONE, che	Dukes 1	Circums S box. NONE, c St. La	stances (che NCA	ster A A A A A A A A A A A A A	17(18)	box. Dox.	Value Positive emplo Interes	on Held	(i.e., o	onfficer, c	director,
10 DIRECT Name: 11 GIFTS Source of Address of 12 TRANS Source (f Business Name: 14 FINANC Name an 15 BUSINE Business Transfere	GSE instructions on of Gift SPORTATION, LODINAME and Address) E, DIRECTORSHIP, SS Entity (Name and Address of Business of Business of Rome and Address) ESS INTERESTS To s (Name and Address) The (Name and Address) The (Name and Address) The (Name and Address) The (Name and Address)	GING, HOS OR EMPLO ddress) ANY LEGA	INCOME IT	check t	g (but not S this box. instruction BUSINESS USINESS	ons on p	page 2) Dee Instruction Addre	ress: remployr ress: 1 R if NO cuctions rect ess: 15 (See	ONE, che	Duket / Ck this ck this ns on p	Circums Shox. [Shox.	stances (che NCA	ng desc	17(1) 17(1)	DX.	Value Positive emplo	on Held	(i.e., 5	position, constitution of the constitution of	Sirector,
Name: Name: Name: Name: Name: Name: 11 GIFTS Source of Address of 12 TRANS Source (t) 13 OFFICE Business Name: 14 FINANC Name an 15 BUSINE Business Transfer The undersign	Gee instructions or of Gift George OF GIFT G	GING, HOS OR EMPLO Address) ANY LEGA RANSFERF	INCOME in SS	check t (See i	g (but not this box. instruction BUSINESS ATE FAM	imited in initial init	page 2) ee instruction SM Addre PROFIT	ress: employr ress: 17 R If NO (See i	ONE, che son page 3 S. Dw instruction	Dukes 1	Circums Shox. [NONE, co page 2)	stances (che NCA (including this book star NE, chi	ng desc	17(1) 1800 1700 1700 1700 1700 1700 1700 1700	yo2 16) of Gift	Value Positive emplo Interes Value	on Held lue of Gl	(i.e., 5	position, constitution of the constitution of	Sirector,
10 DIRECT Name: 11 GIFTS Source of Address of 12 TRANS Source (f 13 OFFICE Busines Name: 14 FINANC Name and 15 BUSINE Business Transfers The undersign to the penaltic	(See instructions or of Gift SPORTATION, LOD Name and Address) E, DIRECTORSHIP, as Entity (Name and Address of Business ESS INTERESTS TIES (Name and Address) ee (Name and Address) ee (Name and Address) ee (Name and Address)	GING, HOS OR EMPLO ANY LEGA RANSFERF hat the fore Pa.C.S. §4	INCOME IT S If NONE, of BPITALITY DYMENT II A CS AL ENTITY RED TO IN BEGOING Info	Check t (See i	g (but not this box. instruction BUSINES CATCA JSINESS ATE FAM is true all sification to	ons on posses (Seache	page 2) ee instruction SM Addre PROFIT EMBER	If NO If NO (See in the best and the best and the second	ONE, che son page 3 S. Dw instruction et of said p	Dukes 1	Circums Shox. [Shox.	stances (che NCA (includir	ng desc PA eck th	17/18 box	box. post Helder Street Helder Helder Street Helder Helder Street Helder	Value Positive emplo for the form of the	on Held down the Held of the H	(l.e., o	position, constitution of the constitution of	Sirector,

2020 Statement of Financial Interests ADDENDUM

For: Kiera Wilhelm

Candidate, Bethlehem City Council

Refer to BLOCK 13:

Employer #2 Lehigh Valley Celebrants

<u>Address</u>

537 Prospect Avenue Bethlehem, PA 18018

Position Held

Independent Contractor