

STATEMENT OF FINANCIAL INTERESTS  
PLEASE PRINT NEATLY

19 LAST NAME: Callahan FIRST NAME: Bryan MI: PA ZIP: 18018

20 ADDRESS: 633 Main St Bethlehem, Pa. 18018 State: PA Zip Code: 18018 Phone: 610-730-8158

NOTE: IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARNS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS.

21 STATUS: A  Candidate (including election) B  Nonmember C  Public Official (Current) D  Public Official (Former) E  Public Employee (Current) F  Public Employee (Former) G  Check this box if you are filing as a lobbyist H  Check this box if you are amending an original filing

22 PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, etc.)  
A. Bethlehem City Council  seeking  held  held  
B. Teacher BASD  seeking  held  held

23 GOVERNMENTAL ENTITY (with which you perform an Official Employee, Candidate or Member (e.g., local agency activity through some commission or sub-committee, etc.)  
A. Bethlehem City Council  
B. Bethlehem Area School District

24 EDUCATION OR PROFESSION (This may be the same as box 22)  
A. Bethlehem City Council Teacher - BASD

25 YEAR: SEE INSTRUCTIONS  
Information in all blocks 25-32 represents the figure for the calendar year listed here: 2020

26 REAL ESTATE INTERESTS (See instructions on page 2). IF NONE, check this box   
729 Linden St Bethlehem, Pa. 18018

27 CREDITORS (See instructions on page 2). Creditors (Name of Lender) NAME, phone No. and %  
Chase Home Mortgage 703.646.2466 6.30%

28 OFFICIAL USE ONLY (OFFICIAL USE ONLY)  
Bethlehem Area School District 1500 Lehigh St Bethlehem, Pa.  
Bethlehem Area School District 10 E Church St Bethlehem, Pa.  
Bryan Callahan Driving School 633 Main St Bethlehem, Pa.

29 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): \_\_\_\_\_

30 TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2). IF NONE, check this box   
Source (Name and Address): \_\_\_\_\_ Value: \_\_\_\_\_

31 OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2). IF NONE, check this box   
Employer (Name and Address): Bethlehem Area School District 633 Main St Bethlehem, Pa.  
Bryan Callahan Driving School 633 Main St Bethlehem, Pa.  
Percent Held (or other interest): 50% owner / 100% owner

32 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: \_\_\_\_\_ Percent Held (or other interest): \_\_\_\_\_

33 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2). IF NONE, check this box   
Transferor (Name and Address): \_\_\_\_\_ Recipient (Name and Address): \_\_\_\_\_  
Name of Recipient: \_\_\_\_\_ Percent Held (or other interest): \_\_\_\_\_

34 SIGNATURE: \_\_\_\_\_ DATE: 4/18/20