COMMONWEALTH OF PENNSYLVANIA SEC-1 REV. 01/20

STATEMENT OF FINANCIAL INTERESTS

PENNSYLVANIA STATE ETHICS COMMISSION (717) 783-1610 • TOLL FREE 1-800-932-0936

PLEASE PRINT NEATLY

_	
01	LAST NAME FIRST NAME MI SUFFIX
	Relynolds J. William
02	ADDRESS office (business or governmental) or home City State Zip Code Area Code Phone PA 18018 (610) 428-8692
N	OTE: IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS.
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) E Check this block if you are amending
_	B Nominee C Public Official (Former) D Public Employee (Former) as a solicitor an original filing
04 [PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.) seeking V hold held
Α	Bethlehem City Councilman
1	seeking hold held
В	
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.)
Α	City of Bethlehem
В	
06	OCCUPATION OR PROFESSION (This may be the same as block 4) 07 YEAR SEE INSTRUCTIONS.
•	Information in Blocks 8 -15 represents
08	REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box.
09	CREDITORS (See instructions on page 2) Creditor (Name and Address) If NONE, check this box.
UU	Name: Bethlehem Federal Credit Union Address: 2317 Faston Avenve
	Bethlehom, PA 18017 2.24 (car)
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.
	Name: See Attached Address:
11	GIFTS (See instructions on page 2) If NONE, check this box. Source of Gift Value of Gift
	Source of Gift Value of Gift
ļ	Address of Source of Gift Circumstances (including description) of Gift
12	TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2) If NONE, check this box. Value
	Source (Name and Address)
	Position Hold (i.e. officer director
13	OFFICE, DIRECTORSHIP, OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box. Business Entity (Name and Address) Position Held (i.e., officer, director, employee, etc.)
_	Name: Moravian College Board of Trustees Address: 1200 Main St Bethlehem, PA Trustee
14	FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box. Interest Held (i.e., 5%, 10%, etc.) Name and Address of Business
<u>B</u>	ethlehem Food Co-operative 717 New Street Bethlehem, PA 18018 Ishare 1/65
15	BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box. Interest Held
-	Transferee (Name and Address) Relationship Date Transferred Date Transferred
	e 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 the penalties prescribed by 18 Pa.C ^ *** isification to are prices and the Public Official and Employee Ethics Act, 65 Pa.C.S. §1109(b).
	Signature Enter Current Date
	THIS FORM IS CO. ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.

J. William Reynolds Attachment Statement of Financial Interests – 2019

Block 10) Direct or Indirect Sources of Income -

Allentown School District

31 S Penn Street

Allentown, PA

City of Bethlehem

10 E Church Street

Bethlehem, PA

Rental Property (with Natalie Bieber) 34 W Elizabeth Ave Bethlehem, PA