

"SEE ATTACHMENT"

STATEMENT OF FINANCIAL INTERESTS

PLEASE PRINT NEATLY

01 LAST NAME: DONCHEZ FIRST NAME: ROBERT MI: J SUFFIX:

02 ADDRESS office (business or governmental) or home: 377 DEVONSHIRE DRIVE BETHLEHEM PA State Zip Code: 18017 Area Code: 610 Phone: 8684680

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

03 STATUS: Check applicable box or boxes, more than one box may be marked. (See instructions on page 2) A Candidate (including write-in) B Nominee C Public Official (Current) D Public Official (Former) E Check this box if you are filing as a solicitor

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

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 BETHLEHEM B

06 OCCUPATION OR PROFESSION (This may be the same as block 4) MAYOR - CITY BETHLEHEM 07 YEAR SEE INSTRUCTIONS. Information in blocks 8 - 15 represents disclosure for the calendar year listed here: 2020

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. 1 US BANK 4801 FREDERIC AVE OWENSBORO KY 40204 31,777.00 4.75% 2 BEST LINE CREDIT 1800 AVE BETHLEHEM PA 600.00 4.5% 3 SWABU FINANCIAL 11920 \$12,200.00

10 DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment. (See instructions on page 2) If NONE, check this box. 1 Mayor - BETHLEHEM - 10 E. CHURCH ST BETHLEHEM PA 18018 2 PERS (TEACHING PENSIV) HARRISBURG PA 3 PERS (PENSIV) HARRISBURG PA 4 SOCIAL SECURITY CHECK 5 WIPAC SALARY - RN ST LUKES 6 DIVIDENDS MUTUAL FUNDS

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

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 (Name and Address) Position Held (i.e., officer, director, employee, etc.) Name: SEE ATTACHMENT Address:

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

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

The undersigned hereby affirms that the content of this statement is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the Public Official and Employee Ethics Act, 65 Pa.C.S. §1109(b).

Signature: _____ Enter Current Date: 1/18/21

THIS FORM IS CONSIDERED DEFICIENT IF A) IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.

Robert J Donchez- Attachment

Statement of Financial Interests- 2020

As Mayor, I serve on the Boards of the following Organizations:

1. Lehigh Valley Industrial Park- 1720 Spillman Dr. Bethlehem, PA 18015
2. Artsquest- 25 W. 3rd St. Bethlehem, PA 18015- Resigned 2019
3. LVEDC -2158 Avenue C Bethlehem, PA 18017
4. BEDCO-City of Bethlehem
5. Lehigh Valley Partnership- Allentown, PA
6. Representative on the Lehigh Valley Planning Commission- Allentown, PA
(Serving of the Lehigh Valley Freight Advisory Committee)
7. Community Action Committee of Lehigh Valley-1337 E. 5th St. Bethlehem, PA
18015-(Representative)
8. Southside Vision- Co- Chair - Bethlehem, PA
9. Honorary Member of the Board of Directors-Hispanic Center of the Lehigh
Valley 2016- Present
10. Member of Bethlehem Food Co-Op
11. Northside 2027- Co-Chair
12. Member of NAACP