

STATEMENT OF FINANCIAL INTERESTS

PLEASE PRINT NEATLY

01 LAST NAME FIRST NAME MI SUFFIX

C O L O N M I C H A E L

02 ADDRESS office (business or governmental) or home City State Zip Code Area Code Phone

215 W. BROAD ST. APT 4 BETHLEHEM PA 18018 (610) 462-8857

NOTE: 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 filing as a solicitor

B Nominee C Public Official (Former) D Public Employee (Former)

Check this block if you are amending an original filing

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

A C O U N C I L M A N

seeking hold held

B A L T E R N A T E M E M B E R

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 B E T H L E H E M C I T Y C O U N C I L

B B E T H L E H E M C I V I L S E R V I C E B O A R D

06 OCCUPATION OR PROFESSION (This may be the same as block 4)

COORDINATOR OF VOLUNTEERS

07 YEAR Indicate calendar year for which form is being filed. SEE INSTRUCTIONS.

2014

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.

Name: AMERICAN EDUCATION SERVICES Address: P.O. BOX 2467 HARRISBURG, PA 17105 Interest Rate: 3.66%

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: County of Northampton Address: 669 WASHINGTON ST. EASTON, PA 18042 (OFFICIAL USE ONLY)

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

Name: BETHLEHEM HUMAN RELATIONS COMMISSION Address: 10 E. CHURCH ST, BETHLEHEM PA 18018 MEMBER

14 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 Interest Held

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box.

Business (Name and Address) Interest Held Relationship Date Transferred

Transferee (Name and Address)

The undersigned certifies that the information provided herein is true and correct to the best of his/her knowledge, information and belief; said affirmation being made subject to the provisions of the Official and Employee Ethics Act, 65 Pa.C.S. §1109(b).

Enter Current Date 3/9/15

COMPLETED. MAKE A COPY FOR YOUR RECORDS.

STATEMENT OF FINANCIAL INTEREST

ADDITIONAL INFORMATION

COLÓN, MICHAEL

FOR YEAR 2014

DATE: 3/9/15

9. CREDITORS

NAME. U.S. DEPARTMENT OF EDUCATION

ADDRESS: 400 MARYLAND AVE SW, WASHINGTON, D.C. 20202

INTEREST RATE: 6.05%

NAME: U.S. DEPARTMENT OF EDUCATION

ADDRESS: 400 MARYLAND AVE SW, WASHINGTON, D.C. 20202

INTEREST RATE: 4.00%

16. OFFICE, DIRECTORSHIP, OR EMPLOYMENT IN ANY BUSINESS

NAME: SOCIETY OF VOLUNTEER ADMINISTRATORS OF THE LEHIGH VALLEY

ADDRESS: 4319 NEWBURG ROAD, BETHLEHEM, PA 18020

POSITION HELD: TREASURER