

# STATEMENT OF FINANCIAL INTERESTS

PLEASE PRINT NEATLY

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

02 ADDRESS **3177 DEVONSHIRE DRIVE** City **BETHLEHEM** State **PA** Zip Code **18017** Area Code **(610)** Phone **8684680**

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 **CITY COUNCIL** seeking  hold  held  
B **LEGISLATIVE ASSISTANT** seeking  hold  held

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 **COMMONWEALTH PA REP. BRENNAN**

06 OCCUPATION OR PROFESSION (This may be the same as block 4)  
**CITY COUNCILMAN - CITY BETHLEHEM**  RETIRED  
**LEGISLATIVE ASSISTANT - REP JOE BRENNAN**  TEACHER  
07 YEAR The information in blocks 8 through 15 below represents financial interests for the **PRIOR** calendar year indicated: **2010**

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.   
**DVS BANK - MORTGAGE - BALANCE 122,000** 1575S **42301**  
**CITY LOAN - KRBST BALANCE 67,000** Address: **4801 FREDERICK ST CLEVELAND KY.** Interest Rate **7.75%**  
**ABC CREDIT KRBST BALANCE 34,000** Address: **LINDUS ST + MACDON RD BETHLEHEM PA 18017** **6.99%**  
**3.0%**

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.  (OFFICIAL USE ONLY)  
**TEACHER - PENSION - PSEAS - HARRISBURG PA**  
**CITY COUNCIL - CITY BETHLEHEM 10 E CHURCH ST BETHLEHEM PA 18017** **WIFE INVALE ST LUKES HOSPITAL**  
**LEGISLATIVE ASSISTANT / REP BRENNAN HARRISBURG PA** **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.  Value \_\_\_\_\_  
Source (Name and Address) \_\_\_\_\_

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: \_\_\_\_\_ Address: \_\_\_\_\_

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 \_\_\_\_\_  
Transferee (Name and Address) \_\_\_\_\_ Relationship \_\_\_\_\_  
Date Transferred \_\_\_\_\_

The 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 to the penalties prescribed by 18 Pa.C.S. §4904 (unsworn declaration to authorities) and the Public Official and Employee Ethics Act, 65 Pa.C.S. §1109(b).

Signature: \_\_\_\_\_

Enter Current Date: **2/7/11**