

UNITED STATES HOUSE OF REPRESENTATIVES 2015 FINANCIAL DISCLOSURE STATEMENT Name GUS MICHAEL BILLIOUKISDay	<u> </u>	Form A lembers, Officers,		I6 MAY 13 (Office	PM 3: 28 y subsection of the control	ь М( ]
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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Gus Michael Billrakis

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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Gus Michael Bilirakis

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## SCHEDULE D - LIABILITIES

Gus Michael Bilirakis

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SCHEDULE E - P. SITI, NS

Report all positions, compensated or uncompensated, held during the current or prior ralendar year as an officer, director, incisee of an organi-sitor, partner, proprietor, representative, employee, or constitution of any conporation, firm, partnership, or other business enterprise, norporati organi-sitor, labor organi-sitor, or educations or other institution other than the mitted "tales. E""tu"s. "ceitors held in any religious, social, fratemal, or political entities (such as political parties and campaign organi-zitors (zinos social, fratemal, or political entities (such as political parties and campaign organi-zitor positions social, or an honorary nature.

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SCHEDULE F - AGREEMENTS

Gus Michael Bilirakis

Page 13 of 15

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	Age	Rengion Plan (Defined Pension)	service. Penefit-Jamount and total
· · · · ·	<u>ب</u>	Plan-Not self-directed).	value of pension and not be
			determined at the present time.
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## SCHEDULE G - GIFTS

, E Report the source (by name), a brief description, and the value of all gifts totaling more than "..."; received by you, your apouse, or your dependent child from any source during the year. Exc." e from relatives, gifts of personal hospitaty from an individual, local meals, and gifts to a spouse of dependent child that are totally independent of his or her relationship to you. "If swith a velue of less need not be added towards the "..." disclosure threshold. Note: "he gift nile ( ouse Rule ), clause ) prohibits acceptance of cifts a specifically provided in the rule.

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	So ree	Descri tion	о П
Erample:	. 3r Oseph Smith, Flington	Stream tables (determination of patencial franciating received from the "flees" connected?	

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## SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

	Gus Michael Bilirakis	Page 14 of 16
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identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more then \$375 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler of the sponsor's expense. Cledosure is re-lated regardless of whether the expenses were paid directly by the sponsor or were peld by you and reimbursed by the sponsor.

EXCLUDE\_invel-related expenses provided by federal, state, and local governments, or by a foreign government relatived to be separately reported under the unreign utilits and usconstions uct up in § 73-000 positions from the unifer the aderal lection ampalign uct its available to a spouse or dependent child that is totally independent of his or her relationship to the filer.

	Spurce	Do # :.	Cuttof the application, ending the Tof Sound	Undgiag Yati2	ood: YW	Janes Manga Vandadi YN
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## SCHEDULE I - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Gus Michael Bilirakis	Page 15 or 16
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	Source	Activit	Date	Amou t
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FILER NOTES (Optional)

GUS MICHAEI BILITAKIS PAGE 16 of 16

NOTE NUMBER	NOTES
	Schoolule A- IT Prudential Financial The stock removed
	due to sale - see Schedule B
2	Schedule A- Dr-1, Dc-2, Dc-3, Dc-4 Regions
	Financial Corn strik removed due to volve
	falling below \$1,000.
જ	Schedule A- JT Prudential Financial Inc montal
	agin from stock sole reported dup to salp-
+	$ \Delta $
	asset due to value excepting \$ 1,000.

Use additional sheets if more space is required.