SEP 19 2016

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UNITED S	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	FORM B For New Members, Candidates, and	FORM B Candidates, and New Employees		Page 1 of <u>8</u>
Name:	Mark Bircher	Daytime Telephone	ne:	2016 SE	2016 SEP 26 AM 11: 14
FLER	New Member of or Candidate for State: Floric U.S. House of Representatives District: 13 Candidates – Date of Election: AWG us { 30	orida 30, 2016	Check if Amendment	U.S. Höbse (Office	U.S. HOUSE OF REPRESENTATIVES (Office Use Only)
STATUS	New Officer or Employee Employing Office:		Period Covered: January 1, 2016 to Ava ust 30, 2016	A \$200 penalty shall b Individual who files m	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMIN	PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	OF THESE QUEST	IONS		
A. Did you, you a. Own any r end of the b. Make mor asset duri	Did you, your spouse, or your dependent child: Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Make more than \$200 in unearned income from any reportable asset during the reporting period?	No	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?		Yes No X
C. Did you or you honoraria, or pen reporting period?	C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes reporting period?	№	F. Do you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?		Yes
D. Did you, you liability (more t	D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	™	Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	n \$5,000 from a single	Yes No
	THIS FORM INCLUDES ONLY THE SCHEDULE IF YO	ATTACH THE CORRESPONDING SCHEDULE IF YO	THAT YOU ARE REQUIRED TO COMPLETE	S" SOMPLETE	
EXCLUSI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>BOTH</u> OF THESE QUESTIONS	T INFORMATION	- ANSWER <u>BOTH</u> OF THESI	E QUESTIONS	
TRUSTS - Det this report deta	TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?	e on Ethics and certain other	r "excepted trusts" need not be disclosed. Ha]	Yes No X
EXEMPTION - exemption? D	EXEMPTION – Have you excluded from this report any other assets, "uneamed" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	income, or liabilities of a sp nittee on Ethics.	ouse or dependent child because they meet		Yes No

SCHEDU

)ULE A ASSETS &	DULE A ASSETS & "UNEARNED INCOME"	Name: Mac	Mark Bircher Page 2	Page 2 of 8

BLOCK A	BLCCK B	BLOCK C	BLOCKD	
and/or income Sources	Value of Asset	Type of Income	Amount of income	
each asset held for investment or income and with a fair market value you 000 at the end of the reporting period, plu other reportable asset or source of the period perio	each asset held for investment or Indicate value of asset at close of the reporting period. If Check all columns that apply. For accounts for assets for which you checked income and with a fair market value you use a valued on market of the reporting period income (such as other assets indicate the category colors and other reporting period please specify the method used. 401(I), II, A. 528 accounts), you may check and capital gains, even if rein the generated more than \$200 in included only because it generated income, the value interest, and capital gains, even if normal period only because it generated income, the value interest, and capital gains, even if normal period only because it generated income, the value interest, and capital gains, even if normal period only because it generated income, the value interest, and capital gains, even if normal period only the period only because it generated income, the value interest, and capital gains, even if normal period in the saset generated income counts. 500 in the reporting period, in the saset generated income counts, between the period in the period only the reporting period. 60 assets held in which you have no interest.	Check ell columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, 529 accounts), you may check the Tax-Deferred column. Dividends, interest, and capital gains, even if rehivested, must be disclosed as income for essets held in taxable accounts. Check 'None' if the asset generated no income during the reporting period.	each asset held for investment of Indicate value of asset at doze of the reporting period. If Check all columns that apply. For accounts for assets for which you checked "Tax-Deferred" in Block C, you may check the "Nore" column. For all income and with a feir market value by use a valuation method other than fair market value, that generate tax-deferred income (such as other assets indicate the category of income by checking the appropriate tox below. Dividends, interest, and capital gains, even if reinvested, must be disadesed as income for assets held in taxable accounts. On the capital gains, even if reinvested, must be disadesed as income for assets held in taxable accounts. Check "Nore" if no income was earned or generated to generated. Tax-Deferred column. Dividends, even if reinvested, must be disadesed as income for assets held in taxable accounts. Check "Nore" if one assets held in which you have no interest. Tax Deferred column XII is for assets held by your spouse or dependent Check "Nore" if the asset pendent normal forms. Tax Deferred column XII is for assets held by your spouse or dependent Check "Nore" if the asset pendent normal forms. Tax Deferred column XII is for assets held by your spouse or dependent Check "Nore" if the asset pendent normal forms. Tax Deferred column XII is for assets held by your spouse or dependent Check "Nore" if the asset pendent normal forms. Tax Deferred column XII is for assets held by your spouse or dependent Check "Nore" if the asset pendent normal forms. Tax Deferred column XII is for assets held by your spouse or dependent Check "Nore" if the asset pendent normal forms.	the "None" column. For all below. Dividends, interest, for assets held in taxable have no interest.

Ed. Costit U. Rod	Fed.		Nowy Fed. Corpet W. CD	Navy Fed. CreLt U. CD	L	Examples:	SP, Linguis Corp Stock Epr	income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction bookel.	If you have a privately raced fund that is an excepted investment Fund, please check the "EIF" box.	Exclude: Your personal residence, including second fromes and vacation homes (unless there was rental home during the reporting period); and any financial income during the reporting period; from, a federal interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental and other real property held for investment provide a complete address or description, e.g. rental property," and a city and state.	For bank and other cash accounts, total the amount in all interest-beating accounts, if the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	the account that exceeds the reporting thresholds.	For all FLAs and other retirement plans (such as	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	uneamed moons during are year.	and (b) any other reportable asset or source of moome which generated more than \$200 in	Identify (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period,	Assets and/or income Sources	BLOCK A
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					Partnership Income	Royalties		Other Type of Incom	(Specify:	e.g., Partnership Inc	ome or Farm Inc	ютте)				nerated r d.	for assets held in taxable accounts.	DIVIDENCE	Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, 529 accounts), you may check	Ī	
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SCHEDULE A -- ASSETS & "UNEARNED INCOME"

Name: Mark Bircher

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SCHEDULE II -- ASSETS AND "UNEARNED" INCOME

Contin	SCHEDULE II — ASSE IS AN Continuation Sheet (if needed)	ed)	•	Name Mark Blocher	Page 4 of 8
	BLOCK A	вгоск в	вгоск с	вгоск р	
	Asset and/or Income Source	Value of Asset	Type of Income	Amount of Income	come
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	Amgen Inc. Stack	Х	X	×	×
	Would Disney Co. Stack	×	×	×	×
	Microsoft Corp. Stock	×	>	×	×
	Walmust Corp. Stack	×	×	×	×
	Mc+life Trust	×	×	× × ×	
	USAA Money Market	×	×	× ×	
	USAA International Term	X	*	>	×
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Name Mark Bircher

Page 5 of 8

Continuation Sheet (if needed) Rock Ro			None None	None	None S1 - \$1,000 C	_	> 7	7 2			<u></u>	2	_	DC 74 SB			Continua
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SCHEDULE C - EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the file and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2015 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,225. The 2016 limit is \$27,495. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

		Am.	Amount
Source (include date of receipt for nonoraria)	Type	Current Year to Filing	Preceding Year
_	Honorarium Salary	\$20,000	\$500 \$76,000
EXAMPLES: Civil War Roundtable (Cct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$0 N/A	\$1,000 N/A
Dolta Air Lines Inc. Atlanta, CA	Sulary	248,506.93	380,690.97
)		
			55 55 55 55 55 55 55 55 55 55 55 55 55

SCHEDULE D - LIABILITIES

Name:	
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Bircher	
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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

				ර 1 විදු		
		None	Ехатрію			
		o.	First Bank of Wilmington, DE	Creditor		
			5/98	Date Liability Incurred MO/YR		
			Mortgage on Rental Property, Dover, DE	Type of Liability		
				\$10,001- \$15,000	>	
				\$15,001- \$50,000	G 9	
				\$50,001- \$100,000	c	
			×	\$100,001- \$250,000	0	\
				\$250,001- \$500,000	m	moun
				\$500,001- \$1,000,000	71	Amount of Liability
				\$1,000,001- \$5,000,000	ဓ	ability
				\$5,000,001- \$25,000,000	I	
				\$25,000,001- \$50,000,000	_	
<u>.</u>	1	1		Over \$50,000,000	ر	
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SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

		Employer Pilot	Position
		Delta Air Lines, Inc.	Name of Organization

SCHEDULE F - AGREEMENTS

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Name:	
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8 of 8	
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Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties to Agreement	Terms of Agreement
7/1/2012	Delta his Lines, Irc. and the	Delta Pilot Working Agreement
-143/2015	5 And Line Pilots in service to	
	by ALPA)	
	•	

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services