

FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Dr. David Michael Gill Status: Congressional Candidate

State/District: IL13

FILING INFORMATION

Filing Type: Candidate Report

Filing Year: 2017

Filing Date: 05/4/2017

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
American Balanced Fund	SP	\$1,001 - \$15,000	Tax-Deferred		
Citizens Equity First Credit Union	JT	\$15,001 - \$50,000	Interest	\$1 - \$200	\$1 - \$200
Domini Social Equity Fund	JT	\$15,001 - \$50,000	Tax-Deferred		
Invesco Corporate Bond Fund		\$1,001 - \$15,000	Tax-Deferred		
Invesco Diversified Dividend Fund		\$15,001 - \$50,000	Tax-Deferred		
Invesco U.S. Government Fund		\$15,001 - \$50,000	Tax-Deferred		
Parnassus Core Equity Fund	JT	\$15,001 - \$50,000	Dividends	\$1 - \$200	\$201 - \$1,000
Parnassus Core Equity Fund	DC	\$15,001 - \$50,000	Dividends	\$1 - \$200	\$201 - \$1,000
State Bank of Lincoln (IRA's)		\$15,001 - \$50,000	Tax-Deferred		
State Farm 401(k)	SP	\$100,001 - \$250,000	Tax-Deferred		

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
State Farm Federal Credit Union	SP	\$100,001 - \$250,000	Interest	\$201 - \$1,000	\$1,001 - \$2,500
State Farm Mutual Growth Fund	SP	\$15,001 - \$50,000	Dividends	\$201 - \$1,000	\$201 - \$1,000
Vanguard Target Retirement 2025 Fund		\$15,001 - \$50,000	Tax-Deferred		

SCHEDULE C: EARNED INCOME

Source	Туре	Amount Current Year to Filing	Amount Preceding Year
All-Inclusive Medical Services, Inc.	wages	\$67,438.69	\$254,227.13
DRWanted	wages	\$15,120.00	N/A

SCHEDULE D: LIABILITIES

None disclosed.

SCHEDULE E: Positions

None disclosed.

SCHEDULE F: AGREEMENTS

None disclosed.

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

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

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 benefiting you, your spouse, or dependent child?

C Yes No

Exemption: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

○ Yes ○ No

CERTIFICATION AND SIGNATURE

 $\overline{\mathbb{M}}$ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

 $\textbf{Digitally Signed:} \ \text{Dr. David Michael Gill} \ , \ 05/4/2017$