



Filing ID #10004595

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • B-106 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Paul Kyrillidis
Status: Congressional Candidate
State/District: NY04

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2014
Filing Date: 11/12/2014

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

None disclosed.

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
metlife, medicare insurance, health insurance	commissions	\$45,000	\$45,000
nassau university medical center	spouce salary	\$120,000	\$120,000

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
JT	wells fargo bank	2009	home mortgage	\$100,001 - \$250,000
JT	bank of america	2007	heloc loan	\$100,001 - \$250,000
SP	nissan motors	01/2012	car loans	\$50,001 - \$100,000
JT	wydhams resorts	6/2006	vacation	\$15,001 - \$50,000

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?

☐ 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

COMMENTS

CERTIFICATION AND SIGNATURE

☒ 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.

Digitally Signed: Paul Kyrillidis , 11/12/2014