



Filing ID #10005824

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

**Name:** Hon. Michael F. Doyle  
**Status:** Member  
**State/District:** PA14

## FILING INFORMATION

**Filing Type:** Annual Report  
**Filing Year:** 2014  
**Filing Date:** 05/13/2015

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
1916 Monongahela Avenue		\$100,001 - \$250,000	Rent	\$15,001 - \$50,000	<input type="checkbox"/>
LOCATION: Pittsburgh, PA, US					
Eastgate Insurance Agency, Inc., 45% Interest		None	None		<input type="checkbox"/>
LOCATION: Pittsburgh, PA, US					
DESCRIPTION: There was no transactions involving money.					
Structured Capital Strategies Russell 2000 3yr - 10%		\$15,001 - \$50,000	None		<input type="checkbox"/>
Structured Capital Strategies Russell 2000 5yr - 10%		\$15,001 - \$50,000	None		<input type="checkbox"/>
Structured Capital Strategies S&P 500 3yr - 10%		\$15,001 - \$50,000	None		<input type="checkbox"/>
Structured Capital Strategies S&P 500 5yr - 10%		\$15,001 - \$50,000	None		<input type="checkbox"/>

## SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE C: EARNED INCOME

Source	Type	Amount
Doyle For Congress Committee	Spouse Salary	N/A
SERS	Pension Distribution	\$10,935

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	Allegheny Valley Bank of Pittsburgh	November 2005	Mortgage on 1916 Monongahela Avenue.	\$50,001 - \$100,000
	Dollar Bank	August, 2014	Mortgage on personal residence - not rented. Pittsburgh, PA	\$100,001 - \$250,000
	Sallie Mae	December 2002	Parent Plus College Loan	\$15,001 - \$50,000
	Flagstar Bank	August 2012	Mortgage on personal residence - not rented. Pittsburgh, PA	\$100,001 - \$250,000
COMMENTS: Personal residence was refinanced with Dollar Bank in August, 2014 and this mortgage was paid in full at the same time. This liability will no longer appear on my report				

SCHEDULE E: POSITIONS

Position	Name of Organization
Board of Directors (uncompensated)	Howard Hanna Children's Free Care Fund Foundation
Secretary/Treasurer	Eastgate Insurance Agency, Inc.

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

Trip Details					Inclusions		
Source	Start Date	End Date	Itinerary	Days at Own Exp.	Lodging?	Food?	Family?
The Ripon Society & The Franklin Center	11/5/2014	11/11/2014	Washington, DC - Rome, Italy - Washington, DC	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

## SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

## EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

**IPO:** Did you purchase any shares that were allocated as a part of an Initial Public Offering?

☐ Yes ☒ No

**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

## 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:** Hon. Michael F. Doyle , 05/13/2015