



Filing ID #10028497

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

**Name:** Dr. Richard Dean McCormick  
**Status:** Congressional Candidate  
**State/District:** GA07

## FILING INFORMATION

**Filing Type:** Candidate Report  
**Filing Year:** 2019  
**Filing Date:** 08/7/2019

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

None disclosed.

## SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
Gwinnett Emergency Specialists	ED Physician salary	\$362,008.16	\$86,777.43
Defense Finance and Accounting Service	Military Retirement pay	\$55,590.52	\$15,113.83
Suburban Oncology	Spouse salary oncologist	\$379,551.42	\$133,163.53
Southeastern Medical Oncology	Spouse salary oncologist	N/A	\$162,500.00
DFAS (US Navy)	Salary, Naval Officer	N/A	\$1,352,014.95
USAA Federal Savings Bank	Distribution	N/A	\$5,500.00

## SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
SP	AIG	Sep 2017	Mortgage	\$500,001 - \$1,000,000

## SCHEDULE E: POSITIONS

Position	Name of Organization
Physician	Evision Medical
Physician	Suburban Oncology

## 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

## 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:** Dr. Richard Dean McCormick , 08/7/2019