

HAND DELIVERED

Page 1 of 44

UNITED STATES HOUSE OF REPRESENTATIVES

2021 FINANCIAL DISCLOSURE STATEMENT

Form A
For Use by Members, Officers, and Employees

mV

LEGISLATIVE RESOURCE CENTER

2023 JURISPRUDENCE

✓

Name **Rep. Michael B. Bilezikian** Daytime Telephone: **(202) 225-5755**

OFFICE: U.S. HOUSE OF REPRESENTATIVES
A \$200 per-page fee shall be assessed against any individual who files more than 30 days late.

FILER STATUS	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>FL</u>	Office or Employee: _____	Staff Filer Type: (If Applicable) <input type="checkbox"/> Shared <input type="checkbox"/> Principal Assistant <input type="checkbox"/>
REPORT TYPE	<input type="checkbox"/> 2021 Annual (Due: May 18, 2022)	<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Date of Termination: _____

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? <input checked="" type="checkbox"/> b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	F. Did 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? G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$415 in value from a single source during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$415 in value from a single source during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRAs, distributions) of \$200 or more during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		

IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS

IPO – Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "accepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or your dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: **Fus Michel Bilarac**

Page 2 of 11

BLOCK A												BLOCK B												BLOCK C												BLOCK D																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
Assets and/or Income Sources												Value of Asset												Type of Income												Amount of Income												Transaction																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
<p>Identify (a) each asset held for investment or production or income and with a fair market value exceeding \$1,000 at the end of the reporting period; and (b) any other reportable asset or source of income that generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use only dollar symbols).</p> <p>For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting threshold.</p> <p>For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$2,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.</p> <p>For rental and other real property held for investment, provide a complete address or description, e.g., "Turner property," and a city and state.</p> <p>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.</p> <p>Residence: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); and any charitable program, including the Thrift Savings Plan.</p> <p>If you report a privately-held fund that is an Expected Investment Fund, please check the "EMP" box.</p> <p>If you so choose, you may indicate that an asset or income source is that of your spouse (SPO) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the left.</p> <p>For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.</p>																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT</

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: *Gus Michael Bolicakis*

Page *3* of *11*

BLOCK A ASSETS AND/OR INCOME SOURCES	BLOCK B Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
ASSET NAME	EF			
TIAA/CREF Money Market	X			
Wells Fargo Savings	X			
Prudential Whole Life				
HSBC Retirement (HSA)	X	X	X	
Bank of America Check	X	X	X	
Bank of America Banking		X	X	
Wells Fargo IRAs Stock	X	X	X	
National Grid Corp Stock	X	X	X	
Corporation Stock Trans	X			
+Trust Co				

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: Eric Michel Blasberg

Page 4 of 11

SCHEDULE B – TRANSACTIONS

Report any purchases, sales, or exchange transactions that exceeded \$1,000 in the reporting period of any security or real property held by you, your spouse, or your dependent child for investment or the production of income. Include transactions first recorded in a capital item. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse, or dependent children, or the purchases or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose "partial sale" as the type of transaction.

exception clause, if a asset transaction resulted in a Capital gain in excess of \$200, check the "Capital gains" box, unless it was an asset in a tax-deferred account, and calculate the capital gain income on Schedule A.

SP, DC, JT

Name: Gus Michael Bilirakis

Page 5 of 11

Use additional sheets if more space is required.

SCHEDULE D - LIABILITIES

Name: **Gus Michael Bilianakis**

Page **7** of **11**

Report liabilities of over \$1,000 owed to any one creditor at any time during the reporting period. 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.

SP. DC,IT	Creditor	Date Incurred MO/YR	Type of Liability	Amount of Liability										
				A	B	C	D	E	F	G	H	I	J	K
	First Bank of Wilmington, DE	6/20	Mortgage on Rental Property, Dover, DE	\$10,001-\$15,000										
Prudential		11/2014	Loan on Life Insurance		\$15,001-\$50,000									
JT Wells Fargo		7/2014	Personal Residence	X		X								
Sallie Mae (See Note)		8/2014	Student Loan (State)				X							
US DOE		8/2017	Gov't Student loan (FSAE)				X							
#452	Bank of America Credit Card	10/2021	Credit Card	X										

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year 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.

Position

Name of Organization

Advisory	New Port Richey Marine Institute (<i>non profit, uncompensated position</i>)
Advisory	Lighthouse of Naples (<i>non-profit, uncompensated position</i>)
Advisory (Honorary Chair)	Creek Children's Fund, All Children's Hospital (<i>non-profit, uncompensated position</i>)
Advisory (Honorary Chair)	Veterans Legacy Initiative, Archiver, St. Petersburg College (<i>non-profit, uncompensated position</i>)

SCHEDULE F – AGREEMENTS

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.

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
10/01/2010 Retirement	Gus Michael Bilirakis & State of FL. Legislator Benefit Plan (defined pension plan, not self-directed)	Upon retirement age, benefit to be paid based upon age + years of service. Benefit amount + total value of pension can't be determined at the present time

SCHEDULE G – GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$415 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an individual (which may not include a registered lobbyist or foreign agent), local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$100 or less need not be added towards the \$415 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Ethics.

SCHEDULE H – TRAVEL PAYMENTS and REIMBURSEMENTS

Name _____

Page _____ of _____

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$415 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

EXCLUDE: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

Source	Date(s)	City of Departure-Destination-City of Return	Lodging? (Y/N)	Food? (Y/N)	Family Member traveled? (Y/N)	Comments	
						Comments	Comments
Government of China (PEOP)	Aug. 6-11	DC-Bangkok-DC	Y	Y	N		
Habitat for Humanity (Charity Partner)	Mar. 3-4	DC-Bangkok-DC	Y	Y	Y		

**SCHEDULE I – PAYMENTS MADE TO CHARITY IN
LIEU OF HONORARIA**

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of paying an honorarium to you. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.

Name: Bus Michael Bihanic Page 10 of 11

Use additional sheets if more space is required.

**FILER NOTES
(Optional)**

Name: Gus Myrac/Bilato Page 71 of 111

NOTE NUMBER	NOTES
1	Dependent 3 on former returns is now an adult who claims himself on his own return. Therefore, he is no longer a dependent on the Congressman's tax return & his financial info is no longer included in this disclosure.
2	Even though the Congressman's eldest sons are no longer dependents (as previous disclosures show, they were listed as D1 & D2), the Congressman did personally sign to guarantee their loans/credit card. As such, those loans are listed as a liability.
3	GE stock has a reverse split impacting D4's asset. This reverse split is listed as an exchange on the transactions tab.
4	The Congressman realized he forgot to include his Congressional Federal Credit Union Checking Act on this report. As of Dec. 31, 2021, the balance was \$1,529.00. This report is being amended to add this asset.
5	The Congressman realized he forgot to disclose his Bank of America Credit Card whose limit exceeded the 10,000 threshold in December of 2021. This has been reported has been amended to add this liability.