

HAND DELIVERED

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UNITED STATES HOUSE OF REPRESENTATIVES 2019 FINANCIAL DISCLOSURE STATEMENT

For Use by Members, Officers, and Employees

Form A

LEGISLATIVE RESOURCE CENTER

2023 JUN 13 PM 10:19
(Office Use only)

OFFICE OF THE CLERK

A \$200 penalty shall be assessed against any individual who files more than 30 days late.

Name: Gus Michael Biracki Daytime Telephone: (202) 225-5755

FILER STATUS	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>FL</u> District: <u>12</u>	<input type="checkbox"/> Officer or Employee	Employing Office: _____	Staff Filer Type: (If Applicable) <input type="checkbox"/> Shared <input type="checkbox"/> Principal Assistant
REPORT TYPE	<input type="checkbox"/> 2019 Annual (Due: May 15, 2020)	<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? <u>or</u> 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?	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"/>	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$350 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/IRA distributions) of \$200 or more 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 \$350 in value from a single source during the reporting period?	Yes <input checked="" type="checkbox"/> No <input 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"/>	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"/>
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"/>	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	

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 - Debate 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 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"/>

Name Gus Michael Bilyalov Page 2 of 12

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Gus Michael Bilirakis Page 3 of 12

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		
SP, DC, JT	ASSET NAME	A	B	C	D	E	F	G	H	I	J	K	L	M	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income (Specify, e.g., Partnership Income or Farm Income)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	P, S, S/S, JT, or E	
			\$1-\$1,000	\$1,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$250,000	\$250,001-\$500,000	\$500,001-\$1,000,000	\$1,000,001-\$5,000,000	\$5,000,001-\$25,000,000	\$25,000,001-\$50,000,000	Over \$50,000,000	Spouse/DC Asset over \$1,000,000*										\$1-\$200	\$201-\$1,000	\$1,001-\$2,500	\$2,501-\$5,000	\$5,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$1,000,000	\$1,000,001-\$5,000,000	Over \$5,000,000	Spouse/DC Asset with Income over \$1,000,000*		
	TRACRET Money																																			
	Market Acct																																			
	SP Wells Fargo																																			
	Savings Acct																																			
	Prudential Whole																																			
	Life Ins.																																			
	Transamerica																																			
	Ret. Acct 157-411A																																			
	SP Bank of America																																			
	Checking Acct																																			
	SP Bank of America																																			
	Checking Acct																																			
	Walt Disney Co																																			
	(IRA Stock)																																			
	National Commerce																																			
	Corp Stock																																			

Name: Gus Michael Bilirakis Page 4 of 12

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

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BLOCK A Assets and Income Sources		BLOCK B Value of Asset										BLOCK C Type of Income						BLOCK D Amount of Income										BLOCK E Transaction																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
SP	ASSET NAME	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	AB	AC	AD	AE	AF	AG	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ	AR	AS	AT	AU	AV	AW	AX	AY	AZ	BA	BB	BC	BD	BE	BF	BG	BH	BI	BJ	BK	BL	BM	BN	BO	BP	BQ	BR	BS	BT	BU	BV	BW	BX	BY	BZ	CA	CB	CC	CD	CE	CF	CG	CH	CI	CJ	CK	CL	CM	CN	CO	CP	CQ	CR	CS	CT	CU	CV	CW	CX	CY	CZ	DA	DB	DC	DD	DE	DF	DG	DH	DI	DJ	DK	DL	DM	DN	DO	DP	DQ	DR	DS	DT	DU	DV	DW	DX	DY	DZ	EA	EB	EC	ED	EE	EF	EG	EH	EI	EJ	ЕК	EL	EM	EN	EO	EP	EQ	ER	ES	ET	EU	EV	EW	EX	EY	EZ	FA	FB	FC	FD	FE	FF	FG	FH	FI	FJ	FK	FL	FM	FN	FO	FP	FQ	FR	FS	FT	FU	FV	FW	FX	FY	FZ	GA	GB	GC	GD	GE	GF	GG	GH	GI	GJ	GK	GL	GM	GN	GO	GP	GQ	GR	GS	GT	GU	GV	GW	GX	GY	GZ	HA	HB	HC	HD	HE	HF	HG	HH	HI	HJ	HK	HL	HM	HN	HO	HP	HQ	HR	HS	HT	HU	HV	HW	HX	HY	HZ	IA	IB	IC	ID	IE	IF	IG	IH	II	IJ	IK	IL	IM	IN	IO	IP	IQ	IR	IS	IT	IU	IV	IW	IX	IY	IZ	JA	JB	JC	JD	JE	JF	JG	JH	JI	IJ	JK	KL	LM	LN	LO	LP	LQ	LR	LS	LT	LU	LV	LW	LX	LY	LZ	MA	MB	MC	MD	ME	MF	MG	MH	MI	IJ	MK	ML	MM	MN	MO	MP	MQ	MR	MS	MT	MU	MV	MW	MX	MY	MZ	NA	NB	NC	ND	NE	NF	NG	NH	NI	IJ	NK	NL	NM	NN	NO	NP	NQ	NR	NS	NT	NU	NV	NW	NX	NY	NZ	OA	OB	OC	OD	OE	OF	OG	OH	OI	OJ	OK	OL	OM	ON	OO	OP	OQ	OR	OS	OT	OU	OV	OW	OX	OY	OZ	PA	PB	PC	PD	PE	PF	PG	PH	PI	IJ	PK	PL	PM	PN	PO	PP	PQ	PR	PS	PT	PU	PV	PW	PX	PY	PZ	QA	QB	QC	QD	QE	QF	QG	QH	QI	QJ	QK	QL	QM	QN	QO	QP	QQ	QR	QS	QT	QU	QV	QW	QX	QY	QZ	RA	RB	RC	RD	RE	RF	RG	RH	RI	IJ	RK	RL	RM	RN	RO	RP	RQ	RR	RS	RT	RU	RV	RW	RX	RY	RZ	SA	SB	SC	SD	SE	SF	SG	SH	SI	IJ	SK	SL	SM	SN	SO	SP	SQ	SR	SS	ST	SU	SV	SW	SX	SY	SZ	TA	TB	TC	TD	TE	TF	TG	TH	TI	IJ	TK	TL	TM	TN	TO	TP	TQ	TR	TS	TT	TU	TV	TW	TX	TY	TZ	UA	UB	UC	UD	UE	UF	UG	UH	UI	IJ	UK	UL	UM	UN	UO	UP	UQ	UR	US	UT	UU	UV	UW	UX	UY	UZ	VA	VB	VC	VD	VE	VF	VG	VH	VI	IJ	VK	VL	VM	VN	VO	VP	VQ	VR	VS	VT	VU	VV	VW	VX	VY	VZ	WA	WB	WC	WD	WE	WF	WG	WH	WI	IJ	WK	WL	WM	WN	WO	WP	WQ	WR	WS	WT	WU	WV	WW	WX	WY	WZ	XA	XB	XC	XD	XE	XF	XG	XH	XI	IJ	XK	XL	XM	XN	XO	XP	XQ	XR	XS	XT	XU	XV	XW	XX	XY	XZ	YA	YB	YC	YD	YE	YF	YG	YH	YI	IJ	YK	YL	YM	YN	YO	YP	YQ	YR	YS	YT	YU	YV	YW	YX	YY	YZ	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW	ZX	ZY	ZA	ZB	ZC	ZD	ZE	ZF	ZG	ZH	ZI	IJ	ZK	ZL	ZM	ZN	ZO	ZP	ZQ	ZR	ZS	ZT	ZU	ZV	ZW</

SCHEDULE B - TRANSACTIONS

Name: Grus Michael Bilirakis Page 6 of 12

Report any purchase, sale, 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 that resulted in a capital loss. Provide a brief description of an exchange transaction. Exclude transactions between you, your spouse, or dependent child, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please include "partial sale" as the type of transaction.		Type of Transaction				Date (month, day, or year, if applicable)	Amount of Transaction										
SP, DC, JT	Asset	Purchase	Sale	Partial Sale	Exchange	Check Box if Capital Gain Exceeded \$250	A \$1,001-\$15,000	B \$15,001-\$50,000	C \$50,001-\$100,000	D \$100,001-\$250,000	E \$250,001-\$500,000	F \$500,001-\$1,000,000	G \$1,000,001-\$5,000,000	H \$5,000,001-\$25,000,000	I \$25,000,001-\$50,000,000	J Over \$50,000,000	K Over \$1,000,000* (Optional DC Asset)
SP	Example Mega Corp. Stock			X		X											
JT	Corning Inc. (stock)	X					X										
JT	FL Bancshares, Inc (stock)				X		X										
JT	Primary Residence at 3888 Woodridge Place, Palm Harbor, FL 34684 (1,675,000)		X														
JT	Primary Residence - 1558 Larelda Dr, Palm Harbor, FL 34683 (purchased 1,650,000)	X															

Use additional sheets if more space is required.

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EXCLUDES: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME: The 2015 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$25,400. The 2020 limit is \$28,340. In addition, certain types of income (notably barter, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.

[illegible]

SCHEDULE D - LIABILITIES

Name Gris Michael B. Wells Page 8 of 12

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed 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, JT	Creditor	Date Liability Incurred MO/YR	Type of Liability	Amount of Liability										
				A	B	C	D	E	F	G	H	I	J	K
				\$10,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$250,000	\$250,001-\$500,000	\$500,001-\$1,000,000	\$1,000,001-\$5,000,000	\$5,000,001-\$25,000,000	\$25,000,001-\$50,000,000	Over \$50,000,000	Over \$1,000,000* (Spouse/DC Liability)
Example	First Bank of Wilmington, DE	5/15	Mortgage on Rental Property, Dover, DE				X							
	Prudential	11/2014	Loan on Life Insurance		X									
	DL Sake-mae	8/2014	Student Loans				X							
	D2 USDOE	8/2017	Student Loans				X							
	JT Wells Fargo	7/2019	Personal Residence					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 (non-profit, uncompensated position)
Advisory	Lighthouse of Florida (non-profit, uncompensated position)
Advisory (Honorary Chair)	Great Children's Fund, My Child's Legacy (non-profit, uncompensated position)
Advisory (Honorary Chair)	Veterans Legacy Alliance (non-profit, uncompensated position)
	(non-profit + uncompensated position)

SCHEDULE F - AGREEMENTS

Name: Gus Michael Bivett page 9 of 12

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 certifying participation in an employee's welfare or benefit plan maintained by a former employer.

Date	Parties to Agreement	Terms of Agreement
<u>Agreement 8/1/08</u>	<u>Gus Michael - the State of Florida</u>	<u>Upon Retirement age, benefit to be paid based on age and years of service. Benefit amount and total value of pension cannot be determined at present time.</u>
	<u>Legislators Benefit Plan (defined Pension Plan (not self-directed))</u>	

SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$300 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 solely independent of this or her relationship to you. Gifts with a value of \$100 or less need not be added towards the \$300 disclosure threshold. Note: The gift rule (House Rule 25, clause D) prohibits acceptance of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Ethics.

Source	Description	Value
<u>Example: Mr. Joseph Smith, Arlington, VA</u>	<u>Silver Platter (prior determination of presentethics received from the Committee on Ethics)</u>	<u>\$400</u>
	<u>N/A</u>	

Use additional sheets if more space is required.

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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.

Use additional sheets if more space is required.

FILER NOTES
(Optional)

Name: Eric M. Michael Page 12 of 12

NOTE NUMBER	NOTES
1	FI Bancshares Inc. (Stock) merged into Centerstate Bank
2	Dependent Child 1 sold his shares in Corning, Inc.
3	Cong. Bilirakis sold his primary residence of 3686 Woodridge Place, Palm Harbor, FL 34684. Proceeds from sale of home were used to pay off prior mortgage (PNC Bank) and line of credit (Synovus Bank). Remaining proceeds were applied to purchase of new home (1588 Lovell Ln. Palm Harbor, FL
4	Primary Residence was purchased with proceeds from sale of prior residence. New mortgage for remaining cost of new home is held by Wells Fargo.
5	The Congressman forgot to include his Congressional Credit Union Checking Acct on this disclosure on 12/31/2019, the balance was \$338.00. This report is being amended to include this asset.

Use additional sheets if more space is required.

New Note →