



FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: John Bergman
Status: Congressional Candidate
State/District: MI01

FILING INFORMATION

Filing Type: Amendment Report
Filing Year: 2016
Filing Date: 10/3/2016

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
Delta Stock Fund DAL		\$50,001 - \$100,000	Dividends	\$1,001 - \$2,500	\$1,001 - \$2,500
DIVERSIFIED BOND TP4N		\$15,001 - \$50,000	None		
DESCRIPTION: Part of Delta Pilot Savings Plan					
FID CONTRAFUND 31617E851		\$250,001 - \$500,000	Dividends	None	None
DESCRIPTION: Part of Delta Pilots Savings Plan					
FIMM MMKT INST FNSXX		\$1,001 - \$15,000	Dividends	None	None
DESCRIPTION: Part of Delta Pilots Savings Plan					
INTERNATIONAL EQUITY TP4P		\$15,001 - \$50,000	None		
DESCRIPTION: Part of Delta Pilot Savings Plan					
LARGE CAP GROWTH TP4Q		\$250,001 - \$500,000	None		
DESCRIPTION: Part of Delta Pilot Savings Plan					
LARGE CAP VALUE TP4R		\$15,001 - \$50,000	None		

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
DESCRIPTION: Part of Delta Pilots Savings Plan					
LIFECYCLE RETIREMENT TP5C		\$1 - \$1,000	None		
DESCRIPTION: Part of Delta Pilot Savings Plan					
WINGS Medical Technologies, LTD, 100% Interest		None	None		
LOCATION: Watersmeet, MI, US					
DESCRIPTION: Consulting					

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
Delta Airlines Defined Pension Plan	Retirement	\$92,000.00	\$92,000.00
Danaher Corp	Defined Benefit Pension Plan	\$14,800.00	\$14,800.00

SCHEDULE D: LIABILITIES

None disclosed.

SCHEDULE E: POSITIONS

Position	Name of Organization
School board member	NOMMA
Outside Director	International Shipbreaking, LLC
Owner	WINGS Medical Technologies, LTD

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: John Bergman , 10/3/2016