



Filing ID #10067509

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

**Name:** Hon. Derrick F Mr Van Orden  
**Status:** Member  
**State/District:** WI03

## FILING INFORMATION

**Filing Type:** Annual Report  
**Filing Year:** 2024  
**Filing Date:** 05/14/2025

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
CUNA Mutual Whole Life Policy [WU]		\$1,001 - \$15,000	None		<input type="checkbox"/>
Navy Federal Credit Union Accounts [BA]	JT	\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>
Navy Mutual Whole Life Policy [WU]		\$50,001 - \$100,000	None		<input type="checkbox"/>
USAA Checking Account [BA]	JT	\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>

\* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

## SCHEDULE B: TRANSACTIONS

None disclosed.

## SCHEDULE C: EARNED INCOME

None disclosed.

## SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
JT	Mr. Cooper Group	January 2021	Mortgage on Personal Residence	\$100,001 - \$250,000
JT	American Express	December 2024	Revolving charge account	\$10,000 - \$15,000

**SCHEDULE E: POSITIONS**

None disclosed.

**SCHEDULE F: AGREEMENTS**

None disclosed.

**SCHEDULE G: GIFTS**

None disclosed.

**SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS**

None disclosed.

**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. Derrick F Mr Van Orden , 05/14/2025