HAND DELIVERED

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UNITED STATES HOUSE OF REPRESENTATIVES 2013 FINANCIAL DISCLOSURE STATEMENT	S For Use by Members, Officers, and Employees	/ 2014 NOV -6 AM IO: 35
Name: Marlin Andrew Stutzman	Daytime Telephone: 202-225-4436	U.S. HOUSE OF REPRESENTATIVES
FILER X Member of or Carolidate for State: IN U.S. House of Representatives District: 3rd	Officer or Employing Officer Employee	
REPORT X 2013 Annual (Due: May 15, 2014)	X Amendment Termination	nation Date:
PRELIMINARY INFORMATION - ANSWER EACH OF TH	THESE QUESTIONS	
A. Did you, your spouse, or your dependent child: a. Own any reportable seest that was worth more than \$1,000 at the end of the reporting period? or b. Make more than \$200 in unserned income from any reportable seest during the reporting period?	Yes X No 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?	n the current calendar Yes X No
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 X No 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?	situs from a single Yes No X
C. Did you or your spouse have "earned" income (e.g., salarise, honoraris, or pension/IRA distributions) of \$200 or more during the reporting period?	100	travel totaling more than Yes X No
D. Did you, your spouse, or your dependent child have any reportable flability (more then \$10,000) at any point during the reporting period?	Yes X No L. Dit any Individual or organization make a class or paying you for a speech, appearance, reporting period?	tes a donation to charity in Yes No X
E. Did you hold any reportable positions during the reporting period or in the current celender year up through the date of \$hg?	E CORRESPON	DING SCHEDULE IF YOU ANSWER "YES"
IPO, EXCLUSION OF SPOUSE, DEPENDENT, OF	DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF T)F 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" the Committee on Ethics for further guidance.	5	this question, please contact Yes No X
TRUSTS - Details regarding "Clusified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be declose this report details of such a trust that benefits you, your apouse, or dependent child?	Ethics and certain other "excepted trusts" need not be disclose	ed. Have you excluded from Yes . No X
EXCENTION — Have you excluded from this report any other assets, "ungerned" income, transactions, or sabilities of a spouse or dependent child tests for examption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.		because they meet all three Yes No X

SCHEDULE A - ASSI

E S & "UNEARNED INCOME"	
Name: Martin Andrew Stutzman	
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OFF O G. UNEAKNED INCOME.	
Name: Martin Andrew Stutzman	
Page 2 of 9	
	Marlin Andrew Stutzman

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Poster PER 100% Conscioned Rethament Investment Fund	verx	опралу	lloCap	ms	College Choice Indiana 529 Plan	ABC Heelge Fund	Simon & Schweler	Mega Corp. Stock	for a detailed discussion of Schedule requirements, please refer to the instruction bookled	if you to choose, you may indicate that an exact or income sounce is that of your spouse (SIP) or dependent chief (OC), or jointly leds with environ (JT), in the optional column on the tar left.	you have a privately-insided fund that is capted investment Fund, please check the "sk.". K.	Exclusion: Your personal residence, including second homes and vecation homes (unless there was trais income during the reporting period); and any financial interest in, or income derived from, a federal revisement program, including the Thirll Swrings Plan.	a privately-hald busing state. The name of the activities, and A.	For rental and other real property held for investment, provide a complete address or description, e.g., rental property," and a city and state.	For bank and other cash accounts, loss the amount or all frivated-bearing accounts, if the loss is over \$5,000, let every transcal feetbarton where there is more than \$1,000 in therest bearing accounts.	For all IRAs and other retirement plans (such as 401(t) plans) provide the value for each asset held in the account that accuents the apporting thresholds.	Provide complete names of stocks and mutual funds (do not use only Scient symbols).	accepting \$1,000 at the end of the reporting peace, and (b) any other reportable asset or source of income that generated more than \$200 in 'unearned' hooms thatigment than year.	production of income and with a fair market value	Asset and/or income Source
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SCHEDULE B - TRANSACTIONS

Name:	
Marlin Andrew Stutzman	
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													4	SP 00. 11	the capital gain income on Schedule A. Column K is for seaets solely held by	Capital Gaims: If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asser in a lax-deferred account, and disclose	unchage o	dependent child for investment or the production of income, include inmeations that resulted in a capital loss. Provide a brief description of an auchange tarraction. Exclude transactions between you, your spouse, or dependent children, or this	Roport any purchase, sale, or esichange transactions that exceeded \$1,000 in the reporting period of any security or mail property held by you, your spouse, or your
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SCHEDULE C - EARNED INCOME

Name: Martin Andrew Stutzman	
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List the source, type, and amount of earned income from any source (other than the flier's current employment by the U.S. government) totaling \$200 or more during the reporting period. For a spouse, figt

List the source, type	List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For a spouse, list the source and amount of any honoraria: list only the source for other spouse earned income accepting \$1,000. See examples below	ment) totaling \$200 or more during the	reporting period. For a spouse, fist
EXCLUDE: Military INCOME LIMITS a types of income (no	EXCLUDE: 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 2013 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited.	iocial Security Act. sated at or above the "senior staff" rate totally prohibited.	was \$25,955. In addition, certain
	Source (include date of receipt for honoraria)	Туре	Amount
Examples:	Keene State State of Maryland Chill Wer Roundtable (Oct. 2)	Approved Teaching Fee Legislating Perseon Spouse Speech	\$1,000 \$19,000 \$1,000
NONE			

SCHEDULE D - LIABILITIES

	Name:	
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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 flable); and liabilities owed to you by a spouse or the child, perent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of reporting period exceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

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Phil &	Wells F	Fifth 1	Wells F	Indiana PERF	Example	H		
Phil & Dorothy Yunker	Wells Fargo Bank	Fifth Third Mortgage	Wells Fargo Bank	PERF	First Bank of Wilmington, DE	Creditor		
03/2013	06/2011	02/2011	05/2009	04/2009	5/98	Date Liability Incurred MO/YR		
Mortgage on real property in Howe, IN	Home Equity	Virginia Mortgage	Indiana Mortgage	Borrowed on Retirement Funds	Mortgage on Renial Property, Dover, DE	Type of Liability		
						\$10,001- \$15,000	>	
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						Over \$50,000,000	_	
						Over \$1,000,000* (Spouss/DC Liability)	*	

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 exponention, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions instead in Schedule C; positions held in any religious, social, fraternal, or political entitles (such as political parties and campaign organizations); and positions solely of an honorary nature.

Position	Name of Organization
Proprietor	Stutzman Farms
Chairman of the Board	Ave Laurenne, LLC
Board Member	Stutzman Farms, LLC (Michigan)

SCHEDULE F - AGREEMENTS

Name: Marlin Andrew Stutzman Page 7 of 9

Identify the da	ite, parties to, and general terms of any agreement or arrangement that you hav w deferral of payments by a former or current employer other than the U.S. gove	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
Nov. 2002	Myself and State of Indiana	Public Employee/Legislative Retirement Fund - for Service in State Legislature

SCHEDULE G - GIFTS

Report the source (including name, city, and state), a brief description, and the value of all gifts totaling more than \$350 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an inclividual, local meaks, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts withe or \$140 or less need not be added towards the \$350 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

rule.			
	Source	Description	Value
Example:	Mr. Joseph Smith, Arlegton, VA	Shear Plattar (defermination of parsonal intendably received from the Ethics Committee)	\$400
NONE			

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name: Martin Andrew Stutzman	
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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 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: Privately-sponsored travel approved by the Ethics Committee, if post-travel disclosure was filed with the Clerk; 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	Defa(s)	City of Departure - Departmenton City of Redum	Lodging? (Y/N)	Food? (YM)	Family Momber Included? (YIN)
	Government of China (MECEA)	Aug 5-11	OC-Belling, China - DC	۲	۲	Ż
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The Her	The Heritage Foundation	Feb 7-8	DC - Baltimore, MD - DC	Υ	γ	Υ
The Her	The Heritage Foundation	Nov 9-10	Orlando - San Diego Atlanta	Y	*	Z
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NOTE:	NOTE: Post Travel Certifications filed for					
	each trip within 30 days of return.					

SCHEDULE I – PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

	Name: Martin Andrew Stutzman	
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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 filled directly with the Committee on Ethics.	of an event to a charitable organ	ization in lieu of paying an	honorarium to you. A
Source	Activity	Date	Amount
Examples: Association of American Associations, Washington, DC XYZ Magazine	Speech Article	Feb. 2, 2013 Aug. 13, 2013	\$2,000 \$500
NONE			
	;		