₹ X	Yes S	ependent child	ent child? ilities of a spouse or dependent child Committee on Ethics.	enefiting you, your spouse, or a depende "unearned" income, transactions, or liabi unless you have first consulted with the	ting you, your arned" income ss you have fir	h a trust benefi er assets, "une wer "yes" unle	disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a depender EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liability because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the C
]	not be	xcepted trusts" need r	s and certain other "e)	nittee on Ethic	d by the Comr	TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be
S	QUESTION	OF THESE	SWER EACH OF THESE QUESTIONS	MATION — AN	TINFOR	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	response.	each "Yes"	dule attached for	ppropriate sched	and the a	e answered	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response
<u>8</u>	Yes 🛛	1 \$5,000 from	VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Schedule VI.	VI. Did you receive compensation of n a single source in the two prior years? If yes, complete and attach Schedul	S □	Yes	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III.
N _O	Yes	ırrangement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	V. Did you have any rep with an outside entity? If yes, complete and at	□ S	Yes	II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule II.
N _S	Yes 🔀	before the date ior two years?	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	IV. Did you hold any re of filing in the current or if yes, complete and a	8	Yes 🔯	I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.
			3	E QUESTIONS	OF THESE	EACH	PRELIMINARY INFORMATION — ANSWER
İ			(In all sections, please type or print clearly in blue or black ink.
who files	against any individual more than 30 days late.	against ar more than	Amepana		Clecuon.	Office:	Status New officer or employee Employing Office:
assessed	\$200 penalty shall be assessed	A \$200 per	Check if	100. 2012	Date of	N. N.	
ATIVES	U.S. HOUSE OF REPRESENTATIVES (Office Use Only)	U.S. HOUSE					
:52 V	2012 DEC 26 AM 10: 52	2012 DE	10 10 10 10 10 10 10 10 10 10 10 10 10 1	Daytime Telephone:	Daytime		Name: Allen Lucas Messer
Page 1 of 5	DEC 2 0 2012 age 1 of 5	DE(M B and new employees	FORM For use by candidates		ATIVES	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, シリー・ハミットラーション

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Allen Lucas Messer

Page 2 of 5

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and be	retirement programs, and benefits	nefits received under the Social Security Act	Security Act.
Source (include date of receipt for honoraria)	Type	Amount	ount
(include date of levelpt for inclination)	·ypc	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Examples: First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
Housiers for Economic Growth	Sabry	\$14,000	\$ 31,500
Educational Choice Charitable Trust	Salary	\$ 8,000	\$ 24,000
School Choice Indiana, Inc	Sabriu	\$ 26,000	\$ 63,000
School Choice Indiana Network	Salara		\$ 16,000
Ice Miller LLP	Salary	\$ 10,000	\$ 30,000
Community Hospital Network	Salary	\$ 10,000	\$ 46,000
Unspain Technology	Salary	¥ 10,000	\$ 38,00
LNST CS	Salare	\$0	\$10,000
Church, Church Hittle & Antim	Spouse Salary	A/N	N/A
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Mainsource But	١.	Str Sid Bank	College Choice Advisor	Edward Jours	Northwestern Mutual	Vanayard	1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP Mega Corp. Stock	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. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule II requirements, please refer to the instruction booklet.	For rental or other real property held for investment, provide a complete address.	Asset and/or Income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearmed" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401 (k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.
							žinis			ness susi- phic cond cond mall cond ings one ding ding rings one ding rings	Tent,	ction OO at
										None		> _==0== ===
										\$1 - \$1,000		Value of Asset Value of Asset Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."
L							L	ᇗ		\$1,001 - \$15,000		o le ", as od cet attornation de la cetta
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										CAPITAL GAINS	· · · · · · · · · · · · · · · · · · ·	Grand Con the B
										EXCEPTED/BLIND TRUST		erio
			\times	X	X	X				TAX-DEFERRED	<u> </u>	BLOCK C e of Inc lumns the accounts accounts choose sp that ger ome (suc s), you ma d' column d capital d, must b Check " period.
		·				,		Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Income	i	ELOCK C Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "lax-Deferred" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
L×	<u>\</u>	<u> </u>	×	X	ス	X				None -		
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L			<u> </u>					i i		Over \$5,000,000 ≚		

SCHEDULE III — LIABILITIES

Name Allen Lucas Messel

Page 4 of 5

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furniling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000. ture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sib-

				니	
		Nelnet	Example: First Bank of Wilmington, DE	Creditor	
		May 1994	May 1998	Liability Incurred mo/year	, ,
		student loar	Mortgage on 123 Main Street, Dover, DE	Type of Liability	
		. :		\$10,001 \$15,000	
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				\$25,000,000 \$25,000,000 \$50,000,000	
 		 		Over \$50,000,000	1 1

SCHEDULE IV — POSITIONS

Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

and positions solely of an honorary nature Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

and positions solely of an incliniary nature.	inature.
Position	Name of Organization
President 6 CEO	Educational Choice Cheritable Trust
President (CEO	Hoosiess for Elenomic Goowth
President of LEO	School Choice Indiana
Bourd Member	Inclience Foster Care Association
President	Child Share Indiana

SCHEDULE V — AGREEMENTS

Name
Allen
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Page 5 of 5

Identify the date, parties to, and general terms of any agreement or arrangement 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)			
	None			
Parties To				
	-			
Terms of Agreement				
ement				

SCHEDULE VI — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the *two* prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than \$5,000. **Exclude:** Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship recognized by law. **Do not repeat information listed on Schedule I.**

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
Wireless Generation, New York New York	Consulting Services
	Q A