INVIED STATES HOUSE OF REDRESENTATIVES	Para	2
FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2011 - May 15 2012 For use by candidates and new employees	MAY 1 8 2017	1
	2012 15 29 21 20 57	
Name: Allew Lucas Messer Daytime Telephone:		<u>.</u>
	(Office Use Only)	į.
Filer Candidate for the State: 12 Date of Nov. 20/2 Check if A	- 1	1 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
Employing Office:	more than 30 days late	
in all sections, please type or print clearly in blue or black ink.		
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS		
It. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes No IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior Mo years? If yes, complete and attach Schedule IV.	the date Yes X No	Ŏ
II. Did you, your apouse, or a dependent child receive "unearmed" 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? Yes No V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	%	\\X\
III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes No William in the base compensation of more than \$5,000 from a single source in the base prior years? If yes, complete and attach Schedule III.	0 from Yes XX No	Ŏ
Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	h "Yes" response.	
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF	EACH OF THESE QUESTIONS	
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 a dependent child?	Yes No	Ŕ
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? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	tent child Yes Wo	Ř

SCHEDULE I -- EARNED INCOME (INCLUDING HONORARIA)

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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 benefits received under the Social Security Act.

Source (include date of receipt for honoraria)	Туре	Amount Current Year to Filing Precedit	Preceding Year
	Selary	\$6,300	\$28,450
Examples: XYZ Trade Association, Chicago, It. (Rec'd December 2)	Honorarium	3400 0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
Hoosiers for Economic Growth	Salary	\$ 14,000	\$31,500
Educational Chaice Charitable Trust	Salgry	* 8,000	x 24,000
School Choice Indiana, Inc	Salacy	\$26,000	\$ 63,000
School Chara Indians Network	Salery	0	* 16,000
Ice Miller, LLP	Salery	# 10,000	\$ 30,000
Community Hospital Network	59 lary	\$ 10,000	\$46,000
Vaspan- Technology	Salary	\$ 10,000	38,000
CNSI	59185-	O	# 10,000
Church Church Hitale & Antrium	Spende Salery	2/4	N/A
	,		·

IT Moinsource Bank	Jr Sth 3rd Bank	DC College Chaile Adviser	II Edward Jones	11 Northwesteen Mutual	11 Vanguard		Examples:	SP. SP Mega Corp. Stock	For rental and any interest in a privately-held business that is not publicly tracket, state the name of the business, the nature of its activities, and its geographic location in Block A. Excludes: Your personal residence, Including second homes and vication homes (unless there was rental homes during the reporting period); any deposits total-ing \$5,000 or less in personal interest in, or income seconds; and any financial interest in, or income derivation and in personal interest in, or income derivations, a lederal retirement program, including the Thrift Savings Plant. If you an choosing your any indicate that an asset or income source is thet of your apouse (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, For a detailed the histruction bookiet.	BLOCK A 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 period more than \$200 in "unearned" income during the year. Provide complete nemes of stocks and mutual funds (do not use ticker symbole). For all IFAs and other retirement plans (such as 401(k) plane) that are seff-directed (i.e., plane in which you have the power, even if nor assertified in the account that exceeds the reporting thresholds. For retirement, provide the value asset held in the account which are not self-directed, provides only the name of the restitution hotoling the account and its value at the end of the reporting period.
X	×	X	><	*	×	*		×	\$1 - \$1,000	BLOCK B 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."
						×		×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	BLOCK C Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments. At 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 "lone" if the asset generated no income during the reporting period.
X	X	X	×	×	W Y	×	×	×	None	BLOCI mount of for which Block C. n. For all of incom ox below. eine, ever as incom armed or g
			X	×		×	×	×	\$1 - \$200 = \$201 - \$1,000	Income you checked "Tax- you may check the other assets, indicate ne by checking the Dividends, interest, of reinvested, must e. Check "None" if no penerated.

SCHEDULE III — LIABILITIES

Name Allew Lucks Wieser

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ling 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. owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); 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 a spouse, or the child, parent, or sib-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

						SP, DC, JT	
				Nelnet	Example: First Bank of Wilmington, DE	Creditor	
					May 1998	Date Liability Incurred mo/year	
				Student loan	Mortgage on 123 Main Street, Dover, DE	Type of Liability	
						\$10,001— \$15,000	1
				X		\$15,001— to	
						\$50,001— \$100,000	
					×	\$100.001— D	
						\$250,000 D	
_						\$1,000,000	2
-						\$1,000,001— p \$5,000,000	
_						\$25,000,000 T \$25,000,001—	
-						\$50,000,000	
	<u> </u>		l			\$50,000,000	

SCHEDULE IV - POSITIONS

cer, 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. 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 offi-

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 promote overy or air ronorary ratero.	MANUTC:
Position	Name of Organization
President & CEO	President & CEO Educative Chair Chartable Trest
President à cEO	Hosper for Eunemi Growth
President & CEO	School Choir Irodiana
Board Menter	Indiana Fasker Come Association
President	Child sham Indiana

Use additional sheets if more space is required.

SCHEDULE V — AGREEMENTS

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			1	Date	Identify the date service; continued the service is continued to the service is the service in the service in the service is the service in the service is the service in the service in the service in the service in the service is the service in t
			Vone -	Parties To	Identify the date, parties to, and general terms of any agreement or arrangement wit service; continuation or deferral of payments by a former or current employer other telf plan maintained by a former employer.
				Terms of Agreement	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.

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.

			Witeless Generator-, New York New York Consulting Services		Source (Name and Address)
			Consulting Services	Accounting services	Brief Description of Duties

GPO: 2012 72-584 (mac)