



Filing ID #10052796

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: New Filer Report
Filing Year: 2022
Filing Date: 08/11/2023
Period Covered: 01/01/2021– 12/31/2022

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
CUNA Mutual Whole Life Policy [WU]		\$1,001 - \$15,000	None		
Navy Mutual Whole Life Policy [WU]		\$50,001 - \$100,000	None		
USAA Checking Account [BA]	JT	\$1,001 - \$15,000	None		

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

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	Visa	December 2022	Revolving charge account	\$10,000 - \$15,000

SCHEDULE E: POSITIONS

Position	Name of Organization
Advisor	Faith Based Veterans Service Alliance

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: Hon. Derrick F Mr Van Orden , 08/11/2023