

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Luke Messer for Congress

ADDRESS (number and street)

PO Box 917

Check if different than previously reported. (ACC)

Shelbyville

IN

46176

2. FEC IDENTIFICATION NUMBER ▼

C C00460667

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

IN

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on MM / DD / YYYY

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY
07 / 01 / 2014

through

MM / DD / YYYY
09 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Craig Kunkle

Signature of Treasurer Craig Kunkle

[Electronically Filed]

Date

MM / DD / YYYY
12 / 17 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

| | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Luke Messer for Congress

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 258849.00 | 1157187.27 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 31800.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 258849.00 | 1125387.27 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 106814.19 | 597626.16 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 1574.81 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 106814.19 | 596051.35 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 534136.56 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Luke Messer for Congress

Report Covering the Period: From: / / To: / /

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 89370.00 | 510411.94 |
| (ii) Unitemized..... | 8184.00 | 48816.63 |
| (iii) TOTAL of contributions from individuals ▶ | 97554.00 | 559228.57 |
| (b) Political Party Committees..... | 250.00 | 3950.00 |
| (c) Other Political Committees (such as PACs)..... | 161045.00 | 594008.70 |
| (d) The Candidate..... | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 258849.00 | 1157187.27 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 27500.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 1574.81 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... | 42.13 | 161.74 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 258891.13 | 1186423.82 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 106814.19 | 597626.16 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 32600.00 | 52600.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 10000.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 10000.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 25800.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 6000.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 31800.00 |
| 21. OTHER DISBURSEMENTS | 14000.00 | 48031.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 153414.19 | 740057.16 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 428659.62 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 258891.13 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 687550.75 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 153414.19 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 534136.56 |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 5 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
VERLIN CUSTER

Mailing Address 1698 E. 800 N.

City: RUSHVILLE State: IN Zip Code: 46173-8915

FEC ID number of contributing federal political committee: C

Name of Employer: CUSTER ELECTRIC Occupation: PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 4000.00

Date of Receipt: 07 / 10 / 2014

Transaction ID : SA11.4466

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID DUBA, SR.

Mailing Address 3009 N. FLEMING CIR.

City: SHELBYVILLE State: IN Zip Code: 46176-9486

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 350.00

Date of Receipt: 07 / 10 / 2014

Transaction ID : SA11.4471

Amount of Each Receipt this Period: 50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN GAYLOR

Mailing Address 16270 QUARTZ DR.

City: NOBLESVILLE State: IN Zip Code: 46060-8738

FEC ID number of contributing federal political committee: C

Name of Employer: ASSOCIATED BUILDERS & CONTRACTORS Occupation: PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1100.00

Date of Receipt: 07 / 10 / 2014

Transaction ID : SA11.4467

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 146
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 11e 15

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
CHARLES D. GOODRICH

Mailing Address 6104 MAPLE GROVE WAY

City State Zip Code
NOBLESVILLE IN 46062-6467

FEC ID number of contributing federal political committee.

Name of Employer Occupation
GAYLOR ELECTRIC EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.4469

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES MORRIS

Mailing Address 8191 N. PENNSYLVANIA ST

City State Zip Code
INDIANAPOLIS IN 46240-2534

FEC ID number of contributing federal political committee.

Name of Employer Occupation
INDIANA PACERS SPORTS & ENTERTAINME PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.4465

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL J. RUNNEBOHM

Mailing Address 2587 S. 250 E.

City State Zip Code
SHELBYVILLE IN 46176-9310

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RUNNEBOHM CONSTRUCTION EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.4468

Amount of Each Receipt this Period

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
RONALD MCDANIEL

Mailing Address 1394 E MEIKS RD.

City State Zip Code
SHELBYVILLE IN 46176-9480

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2014

Transaction ID : SA11.4482

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TYLER SILVEUS

Mailing Address P.O. BOX 1753

City State Zip Code
WARSAW IN 46581-1753

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SILVEUS INSURANCE GROUP EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3750.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 21 / 2014

Transaction ID : SA11.4491

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN WHITTINGTON

Mailing Address 2700 S. 900 E.

City State Zip Code
COLUMBUS IN 47203-9106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GRAMMAR INDUSTRIES EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 21 / 2014

Transaction ID : SA11.4493

Amount of Each Receipt this Period
500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
STEVE AUSTIN

Mailing Address 204 N WINTHROP RD

City MUNCIE State IN Zip Code 47304-3977

FEC ID number of contributing federal political committee. **C**

Name of Employer RED GOLD Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **415.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11.4507

Amount of Each Receipt this Period
 CONTRIBUTION **40.00**

B. Full Name (Last, First, Middle Initial)
DONNA GILKISON

Mailing Address 2727 S PARKWAY DR

City MUNCIE State IN Zip Code 47304-5128

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11.4521

Amount of Each Receipt this Period
 CONTRIBUTION **150.00**

C. Full Name (Last, First, Middle Initial)
DAVID M. HEINKEL

Mailing Address 5100 SOMERSET

City MUNCIE State IN Zip Code 47304-6502

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11.4522

Amount of Each Receipt this Period
 CONTRIBUTION **80.00**

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

270.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
CHARLES JAGGERS, JR.

Mailing Address 4408 FRIAR DR.

City MUNCIE State IN Zip Code 47304-2470

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
290.00

Date of Receipt
07 / 22 / 2014

Transaction ID : SA11.4516

Amount of Each Receipt this Period
40.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT KERSEY

Mailing Address 911 N BRIAR RD.

City MUNCIE State IN Zip Code 47304-5103

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN LAWN MOWER Occupation PRESIDENT & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
07 / 22 / 2014

Transaction ID : SA11.4504

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LORI LUTHER

Mailing Address 2426 E COUNTY ROAD 750 N

City SPRINGPORT State IN Zip Code 47386-9774

FEC ID number of contributing federal political committee. **C**

Name of Employer IU HEALTH Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
07 / 22 / 2014

Transaction ID : SA11.4520

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1240.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
VAN SMITH

Mailing Address 4501 N WHEELING AVE

City MUNCIE State IN Zip Code 47304-1218

FEC ID number of contributing federal political committee. **C**

Name of Employer SHERRY LABRATORIES Occupation PRESIDENT & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11.4505

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILL STATOM

Mailing Address 3701 W ROBINWOOD

City MUNCIE State IN Zip Code 47304-2868

FEC ID number of contributing federal political committee. **C**

Name of Employer DELAWARE COUNTY Occupation ELECTION BOARD MEMBER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11.4503

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KAYE WHITEHEAD

Mailing Address 6220 E. COUNTY ROAD 650 S.

City MUNCIE State IN Zip Code 47302-9626

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
370.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11.4515

Amount of Each Receipt this Period
 120.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1370.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
JUDITH MONTGOMERY

Mailing Address 926 E. SANTEE DR.

City Greensburg State IN Zip Code 47240-7833

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11.4563

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HERNANDO MUNEVAR

Mailing Address 7031 NORMANDY WAY

City Indianapolis State IN Zip Code 46278-1547

FEC ID number of contributing federal political committee. **C**

Name of Employer CANDENT TECHNOLOGIES Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11.4561

Amount of Each Receipt this Period
25.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RICK A. BILLS

Mailing Address PO BOX 274

City Milroy State IN Zip Code 46156-0274

FEC ID number of contributing federal political committee. **C**

Name of Employer HARCOURT INDUSTRIES Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11.4579

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

575.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 11e 15
 PAGE 12 OF 146

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
NANCY DAYHOFF

Mailing Address 163 E 250 S

City State Zip Code
 SHELBYVILLE IN 46176-9344

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 CLINICAL SOLUTIONS LLC EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 30 2014

Transaction ID : SA11.4569

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PHILIP HAEHL

Mailing Address 1001 SPRINGHILL RD

City State Zip Code
 SHELBYVILLE IN 46176-2761

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 SHELBY MATERIALS EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 30 2014

Transaction ID : SA11.4566

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RUTH JOHNSON

Mailing Address 9334 W. RAINTREE DR. S.

City State Zip Code
 COLUMBUS IN 47201-9108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 30 2014

Transaction ID : SA11.4568

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15
 PAGE 13 OF 146

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
DIANA SCHANTZ

Mailing Address 393 WOODLAND DR.

City State Zip Code
BATESVILLE IN 47006-7097

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STEPHEN D. GLASER, MD MEDICAL ASSISTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y
07 30 2014

Transaction ID : SA11.4570

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LARRY SMITH

Mailing Address 6264 N 500 E

City State Zip Code
SHELBYVILLE IN 46176-9595

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
07 30 2014

Transaction ID : SA11.4574

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES STURGES

Mailing Address 1214 E ST. RD. 46

City State Zip Code
GREENSBURG IN 47240-7723

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
07 30 2014

Transaction ID : SA11.4571

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|-----------------------------------|---|
| Full Name (Last, First, Middle Initial) ERIC WALLIEN | | Date of Receipt MM / DD / YYYY 07 / 30 / 2014 |
| Mailing Address 2832 W. OLD FRANKLIN RD. | | Transaction ID : SA11.4567 |
| City SHELBYVILLE | State IN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer ROBERTA'S, INC. | Occupation PRESIDENT | CONTRIBUTION |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2100.00 | |

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) MRS. TARA ARMSTRONG | | Date of Receipt MM / DD / YYYY 08 / 04 / 2014 |
| Mailing Address 1298 S BROKEN ARROW DR. | | Transaction ID : SA11.4608 |
| City NEW PALESTINE | State IN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer ARMSTRONG GARAGE DOOR | Occupation EXECUTIVE | CONTRIBUTION |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 400.00 | |

| | | |
|---|-----------------------------------|---|
| Full Name (Last, First, Middle Initial) DENISE A. BODE | | Date of Receipt MM / DD / YYYY 08 / 04 / 2014 |
| Mailing Address 28389 CATALPA POINT RD | | Transaction ID : SA11.4628 |
| City EASTON | State MD | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer CORNERSTONE GOVERNMENT AFFAIRS GF | Occupation ATTORNEY | CONTRIBUTION |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2200.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
BRIAN BRAMMER

Mailing Address 361 W BROADWAY ST

City State Zip Code
SHELBYVILLE IN 46176-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BRAMMER & YEEND CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : SA11.4580

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
VERLIN CUSTER

Mailing Address 1698 E. 800 N.

City State Zip Code
RUSHVILLE IN 46173-8915

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CUSTER ELECTRIC PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : SA11.4596

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL DORA

Mailing Address 3128 N 150 E

City State Zip Code
RUSHVILLE IN 46173-7279

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DORA ENTERPRISES OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : SA11.4597

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
DAVID DUBA, SR.

Mailing Address 3009 N. FLEMING CIR.

City State Zip Code
SHELBYVILLE IN 46176-9486

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : SA11.4603

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BRENT FUCHS

Mailing Address 4543 W. BASE RD.

City State Zip Code
RUSHVILLE IN 46173-8507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMP. AUCTIONEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : SA11.4581

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DENNIS HARROLD

Mailing Address 2456 TROTTERS CHASE

City State Zip Code
SHELBYVILLE IN 46176-8870

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCNEELY STEPHENSON ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1050.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : SA11.4594

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
CURTIS JONES

Mailing Address **11 WYNDHAM DRIVE**

City **BROWNSBURG** State **IN** Zip Code **46112-8201**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BOSE MCKINNEY & EVANS LLP** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : SA11.4587

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SUSAN KENT

Mailing Address **2413 VALLEY ROAD**

City **SHELBYVILLE** State **IN** Zip Code **46176-8902**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KENT PROPERTY GROUP** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : SA11.4582

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHRIS KING

Mailing Address **3559 W. 700 N.**

City **FAIRLAND** State **IN** Zip Code **46126-9797**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RUNNENBOHM CONSTRUCTION** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2850.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : SA11.4590

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
MR. ARTHUR LITTLE III

Mailing Address 22297 STATELINE RD.

City LAWRENCEBURG State IN Zip Code 47025-9125

FEC ID number of contributing federal political committee.

Name of Employer LITTLE CONSTRUCTION COMPANY Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.4604

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KEVIN MANDRELL

Mailing Address 3955 S. VILLAGE DR.

City NEW PALESTINE State IN Zip Code 46163-9581

FEC ID number of contributing federal political committee.

Name of Employer BROWN & BROWN INSURANCE Occupation INSURANCE EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.4586

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMY MCQUEEN

Mailing Address 81 E. RAFFERTY RD

City SHELBYVILLE State IN Zip Code 46176-9410

FEC ID number of contributing federal political committee.

Name of Employer FLAT ROCK FURNITURE Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.4610

Amount of Each Receipt this Period

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
HERNANDO MUNEVAR

Mailing Address 7031 NORMANDY WAY

City State Zip Code
INDIANAPOLIS IN 46278-1547

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CANDENT TECHNOLOGIES EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y
08 04 2014

Transaction ID : SA11.4601

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM O'NEILL

Mailing Address 401 L STREET SE

City State Zip Code
WASHINGTON DC 20003-3438

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE O'NEIL GROUP EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
08 04 2014

Transaction ID : SA11.4629

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JANET PLUNKETT

Mailing Address 9250 N. 625 E.

City State Zip Code
MORRISTOWN IN 46161-9733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
08 04 2014

Transaction ID : SA11.4589

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) NICK RUNNEBOHM | | Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 04 / 2014 |
| Mailing Address 3177 S 375 E | | Transaction ID : SA11.4583 |
| City SHELBYVILLE | State IN | Zip Code 46176-9245 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500.00 CONTRIBUTION | |
| Name of Employer RUNNEBOHM CONSTRUCTION CO. | Occupation PARTNER | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2500.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) CAROL SHOWERS | | Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 04 / 2014 |
| Mailing Address 3085 S 250 E | | Transaction ID : SA11.4584 |
| City SHELBYVILLE | State IN | Zip Code 46176-9310 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500.00 CONTRIBUTION | |
| Name of Employer RETIRED | Occupation RETIRED | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1250.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) DANAE SPONSEL | | Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 04 / 2014 |
| Mailing Address 110 ST. MARY ST. | | Transaction ID : SA11.4591 |
| City SHELBYVILLE | State IN | Zip Code 46176-1142 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500.00 CONTRIBUTION | |
| Name of Employer O'NEAL STEEL, INC. | Occupation EXECUTIVE | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 700.00 | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1500.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
ROBERT STOLMEIER

Mailing Address 2423 OVERLOOK DR.

City State Zip Code
SHELBYVILLE IN 46176-9768

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2450.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 04 2014

Transaction ID : SA11.4585

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES THATCHER

Mailing Address 20487 ALPINE DRIVE

City State Zip Code
LAWRENCEBURG IN 47025-8881

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 04 2014

Transaction ID : SA11.4605

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT WYNN

Mailing Address 2484 FOREST DRIVE

City State Zip Code
MADISON IN 47250-2490

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JENNER, PATTISON, HENSLEY & WYNN ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 04 2014

Transaction ID : SA11.4556

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. NATHAN FRAMPTON | | Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 07 / 2014 |
| Mailing Address 95 LEXINGTON DR. | | Transaction ID : SA11.4642 |
| City ZIONSVILLE | State IN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer FRANIMATION INC. | Occupation EXECUTIVE | CONTRIBUTION |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. WILLIAM FRAZIER | | Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 07 / 2014 |
| Mailing Address 8001 N. WILLIAMSON RD. | | Transaction ID : SA11.4637 |
| City MUNCIE | State IN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 40.00 |
| Name of Employer BILL FRAZIER MOBILE HOMES | Occupation EXECUTIVE | CONTRIBUTION |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 365.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. THOMAS JOHN | | Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 07 / 2014 |
| Mailing Address 2015 N DELAWARE ST | | Transaction ID : SA11.4643 |
| City INDIANAPOLIS | State IN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer ICE MILLER | Occupation ATTORNEY | CONTRIBUTION |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1540.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
LEIGH LANGKABEL

Mailing Address 135 W MAIN ST

City MORRISTOWN State IN Zip Code 46161-8800

FEC ID number of contributing federal political committee. **C**

Name of Employer KOPPER KETTLE Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.4633

Amount of Each Receipt this Period
 150.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN MUTZ

Mailing Address 8128 DEAN RD.

City INDIANAPOLIS State IN Zip Code 46240-2918

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.4638

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KARI SMITH

Mailing Address 6198 N 500 E

City SHELBYVILLE State IN Zip Code 46176-8422

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.4639

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
TERRY TOLLE

Mailing Address 14889 HARVEST KNOLL CT.

City State Zip Code
FISHERS IN 46037-8303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HEALTH 1ST WELLNESS CENTERS EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.4649

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DORIS WESTERBECK

Mailing Address 3019 N FLEMING CIR, COUNTRY CLUB H

City State Zip Code
SHELBYVILLE IN 46176-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.4558

Amount of Each Receipt this Period
25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
B.C. WILLIAMS

Mailing Address 1900 E. OLD RUSHVILLE ROAD

City State Zip Code
SHELBYVILLE IN 46176-9569

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.4635

Amount of Each Receipt this Period
100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1125.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 25 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
JANE WILLIAMS

Mailing Address 5567 NORTH STATE ROUTE 62

City MADISON State IN Zip Code 47250-7315

FEC ID number of contributing federal political committee. **C**

Name of Employer ROYER CORPORATION Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.4644

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TIM BARRICK

Mailing Address 1640 JORDAN CT.

City SHELBYVILLE State IN Zip Code 46176-3032

FEC ID number of contributing federal political committee. **C**

Name of Employer RATIO ARCHITECTS Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11.4661

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ASHLEY L. CLAXTON

Mailing Address 2407 VALLEY CT.

City SHELBYVILLE State IN Zip Code 46176-8903

FEC ID number of contributing federal political committee. **C**

Name of Employer PFENNINGER, CLAXTON, & STELLE INSURANCE Occupation INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11.4671

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
ROBERT CLAXTON

Mailing Address 2407 VALLEY CT

City State Zip Code
SHELBYVILLE IN 46176-8903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KNAUF USA EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11.4664

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES DORA JR.

Mailing Address 2501 E. 86TH STREET

City State Zip Code
INDIANAPOLIS IN 46240-2444

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GENERAL HOTELS CORP. EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11.4658

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROSE MCNEELY

Mailing Address 1902 E. OLD RUSHVILLE RD.

City State Zip Code
SHELBYVILLE IN 46176-9569

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2900.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11.4660

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
WILLIAM RASNER

Mailing Address 45 W WASHINGTON ST.

City State Zip Code
SHELBYVILLE IN 46176-1243

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMP. REAL ESTATE EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11.4663

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WENDY STEPHENSON

Mailing Address 1720 E. OLD RUSHVILLE RD.

City State Zip Code
SHELBYVILLE IN 46176-9532

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11.4659

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES WENNING

Mailing Address 7241 S. WILBUR WRIGHT RD.

City State Zip Code
CAMBRIDGE CITY IN 47327-9607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JAMES WENNING FARM OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11.4666

Amount of Each Receipt this Period
250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 28 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
ARCHIE M. BROWN JR.

Mailing Address 807 E. MILL CREEK RD. S.

City Greensburg State IN Zip Code 47240-6326

FEC ID number of contributing federal political committee. **C**

Name of Employer MAINSOURCE FINANCIAL GROUP Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11.4695

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIS CONNER

Mailing Address 7260 SHADELAND STATION

City Indianapolis State IN Zip Code 46256-3975

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN STRUCTUREPOINT, INC. Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3350.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11.4675

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EARL GOODE

Mailing Address 8077 BRAMWOOD CT

City Indianapolis State IN Zip Code 46250-1642

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11.4689

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 29 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
MR. JOHN R. HAMMOND III IV

Mailing Address 612 E 13TH ST

City State Zip Code
INDIANAPOLIS IN 46202-2732

FEC ID number of contributing federal political committee.

Name of Employer Occupation
ICE MILLER ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : SA11.4690

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID W. HEETER

Mailing Address 7500 W. AUGUSTA BLVD.

City State Zip Code
YORKTOWN IN 47396-9354

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MUTUAL BANK EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : SA11.4694

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
VINCENT MCGOWEN

Mailing Address 23109 SONOMA LN.

City State Zip Code
CICERO IN 46034-9282

FEC ID number of contributing federal political committee.

Name of Employer Occupation
AMERICAN SENIOR COMMUNITIES DIRECTOR OF GOVT. RELATIONS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : SA11.4698

Amount of Each Receipt this Period

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 146
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
JONATHAN R. WEST

Mailing Address 11065 WOODS BAY LN

City INDIANAPOLIS State IN Zip Code 46236-9021

FEC ID number of contributing federal political committee. **C**

Name of Employer FEDERAL HOME LOAN BANK OF INDPLS Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11.4677

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CYNITHA D. ADAMS

Mailing Address 1925 CULBERTSON RD.

City SHELBYVILLE State IN Zip Code 46176-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer COMMUNITY EAST HOSPITAL Occupation CHIEF NURSING OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11.4705

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LAWRENCE BECK

Mailing Address 6401 E 276TH STREET

City ATLANTA State IN Zip Code 46031-9617

FEC ID number of contributing federal political committee. **C**

Name of Employer BECK'S HYBRIDS Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11.4699

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 31 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) MARY HARPER | | Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address 1111 SUMMERWAY CT. | | Transaction ID : SA11.4701 |
| City SHELBYVILLE | State IN | |
| Zip Code 46176-3269 | | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | CONTRIBUTION |
| Name of Employer SHELBYVILLE CENTRAL SCHOOL CORP. | Occupation ASSISTANT SUPERINTENDENT | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | |

| | | |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) DENNIS HARROLD | | Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address 2456 TROTTERS CHASE | | Transaction ID : SA11.4700 |
| City SHELBYVILLE | State IN | |
| Zip Code 46176-8870 | | Amount of Each Receipt this Period 100.00 |
| FEC ID number of contributing federal political committee. C | | CONTRIBUTION |
| Name of Employer MCNEELY STEPHENSON | Occupation ATTORNEY | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1050.00 | |

| | | |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) ANNE MURPHY | | Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address 7402 RIVER HIGHLANDS DR | | Transaction ID : SA11.4702 |
| City FISHERS | State IN | |
| Zip Code 46038-1179 | | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | CONTRIBUTION |
| Name of Employer COMMUNITY NORTH HOSPITAL | Occupation EXECUTIVE | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1350.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) EDWARD PROBST JR. | | Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address 1920 FRANKLIN ST. | | Transaction ID : SA11.4703 |
| City COLUMBUS | State IN | |
| Zip Code 47201-5152 | | Amount of Each Receipt this Period CONTRIBUTION 500.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer SELF-EMPLOYED | Occupation PHYSICIAN | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1850.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) PAMELA ZIMNY | | Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address 2808 WINTERWAY DR. | | Transaction ID : SA11.4704 |
| City SHELBYVILLE | State IN | |
| Zip Code 46176-3296 | | Amount of Each Receipt this Period CONTRIBUTION 250.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer R Z PROPERTIES, LLC | Occupation EXECUTIVE | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 425.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) ALEXANDER NOCK | | Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2014 |
| Mailing Address 748 9TH STREET, SE | | Transaction ID : SA11.4687 |
| City WASHINGTON | State DC | |
| Zip Code 20003-2804 | | Amount of Each Receipt this Period CONTRIBUTION 500.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer PENN HILL GROUP | Occupation CONSULTANT | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1250.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 33 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER D. BROOKE

Mailing Address 8250 E. 300 S.

City State Zip Code
ZIONSVILLE IN 46077-8697

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BROOKE, SMITH & ASSOCIATES CFP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11.4717

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THOMAS BURKE

Mailing Address 11970 DUBARRY DR.

City State Zip Code
CARMEL IN 46033-8364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WELLS FARGO FINANCIAL ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11.4711

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHARLES COHEN

Mailing Address 8888 KEYSTONE CROSSING BLVD

City State Zip Code
INDIANAPOLIS IN 46240-4609

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COHEN, GARELICK & GLAZIER ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11.4708

Amount of Each Receipt this Period
150.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1150.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 34 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
IRWIN LEVIN

Mailing Address **ONE INDIANA SQUARE**

City **INDIANAPOLIS** State **IN** Zip Code **46204-2004**

FEC ID number of contributing federal political committee. **C**

Name of Employer **COHEN & MALAD, LLP** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11.4710

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BRIAN BRAMMER

Mailing Address **361 W BROADWAY ST**

City **SHELBYVILLE** State **IN** Zip Code **46176-1001**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BRAMMER & YEEND** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 16 / 2014

Transaction ID : SA11.4737

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STEVEN A. FISHER

Mailing Address **1656-D BEEKMAN PLACE NW**

City **WASHINGTON** State **DC** Zip Code **20009-6500**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BALL STATE UNIVERSITY** Occupation **GOVERNMENT AFFAIRS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 16 / 2014

Transaction ID : SA11.4721

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 35 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
VICTOR KLATT

Mailing Address 9020 ADVANTAGE CT.

City State Zip Code
BURKE VA 22015-4902

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PENN HILL GROUP ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2014

Transaction ID : SA11.4723

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID LAW

Mailing Address 2412 OVERLOOK DR.

City State Zip Code
SHELBYVILLE IN 46176-9769

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ZOTEC EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2014

Transaction ID : SA11.4738

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
D'ARCY PHILPS

Mailing Address 1801 N. DANVILLE ST.

City State Zip Code
ARLINGTON VA 22201-4035

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PENN HILL GROUP PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2014

Transaction ID : SA11.4724

Amount of Each Receipt this Period
500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 36 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | | |
|---|-----------------------------------|---|--|
| Full Name (Last, First, Middle Initial) WILLIAM N. SALIN II | | Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2014 | |
| Mailing Address 10587 COPPERGATE | | Transaction ID : SA11.4729 | |
| City CARMEL | State IN | Zip Code 46032-9204 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 CONTRIBUTION | |
| Name of Employer SALIN BANK | Occupation EXECUTIVE | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2000.00 | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) JEFF SPONSEL | | Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2014 | |
| Mailing Address 110 SAINT MARY ST | | Transaction ID : SA11.4741 | |
| City SHELBYVILLE | State IN | Zip Code 46176-1142 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 CONTRIBUTION | |
| Name of Employer SPONSEL PHOTOGRAPHY | Occupation PRESIDENT | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) RICHARD STOMBRES | | Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2014 | |
| Mailing Address 4124 FAIRFAX ST. | | Transaction ID : SA11.4725 | |
| City FAIRFAX | State VA | Zip Code 22030-5209 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 CONTRIBUTION | |
| Name of Employer PENN HILL GROUP | Occupation EXECUTIVE | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 750.00 | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1750.00 |
| TOTAL This Period (last page this line number only)..... | _____ |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 37 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
HARRISON WADSWORTH III

Mailing Address 1101 VERMONT AVE., NW

City WASHINGTON State DC Zip Code 20005-3521

FEC ID number of contributing federal political committee. **C**

Name of Employer WASHINGTON PARTNERS LLC Occupation PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11.4728

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DORIS WESTERBECK

Mailing Address 3019 N FLEMING CIR, COUNTRY CLUB H

City SHELBYVILLE State IN Zip Code 46176-

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11.4739

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ARLENE WILKES

Mailing Address 3002 N. FLEMING CIR.

City SHELBYVILLE State IN Zip Code 46176-9486

FEC ID number of contributing federal political committee. **C**

Name of Employer ARLENE'S STYLE-ETTE Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11.4740

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 38 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
BCJE REAL ESTATE LLC

Mailing Address 220 S. HARRISON ST.

City State Zip Code
SHELBYVILLE IN 46176-2160

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11.4742

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SEE ATTRIBUTION BELOW

B. Full Name (Last, First, Middle Initial)
BRADY CLAXTON

Mailing Address 220 S. HARRISON ST.

City State Zip Code
SHELBYVILLE IN 46176-2160

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11.4743

Amount of Each Receipt this Period
250.00

CONTRIBUTION

[MEMO ITEM]
PARTNERSHIP ATTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOSH ESTELLE

Mailing Address 1220 BROAD ST.

City State Zip Code
NEW CASTLE IN 47362-4509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11.4744

Amount of Each Receipt this Period
250.00

CONTRIBUTION

[MEMO ITEM]
PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 39 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
KEITH PASSWATER

Mailing Address 7258 FOX HOLLOW LANE

City State Zip Code
BROWNSBURG IN 46112-8976

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WELLPOINT ACTUARY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11.4718

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ANTHONY RODA

Mailing Address 3416 OLD DOMINION BLVD

City State Zip Code
ALEXANDRIA VA 22305-1320

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WILLIAMS & JENSEN, PLLC ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11.4745

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARK HARDWICK

Mailing Address 800 S. PRESTWICK LANE

City State Zip Code
YORKTOWN IN 47396-9129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FIRST MERCHANTS BANK CHIEF FINANCIAL OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11.4757

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
FRED S. KLIPSCH

Mailing Address 3510 SEDGEMOOR CIRCLE

City State Zip Code
CARMEL IN 46032-9122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KLIPSCH & ASSOCIATES CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11.4748

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES J. KRAMPEN JR.

Mailing Address 303 CONGRESSIONAL BLVD.

City State Zip Code
CARMEL IN 46032-5631

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SEVEN CORNERS INSURANCE, INC. EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11.4759

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RONALD MCDANIEL

Mailing Address 1394 E MEIKS RD.

City State Zip Code
SHELBYVILLE IN 46176-9480

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11.4747

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
MICHAEL RECHIN

Mailing Address 13831 COLDWATER DR.

City State Zip Code
CARMEL IN 46032-8562

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FIRST MERCHANTS BANK EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 24 2014

Transaction ID : SA11.4756

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM N. SALIN II

Mailing Address 10587 COPPERGATE

City State Zip Code
CARMEL IN 46032-9204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SALIN BANK EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 24 2014

Transaction ID : SA11.4758

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL J. STEWART

Mailing Address 4309 ROYAL PINE BLVD.

City State Zip Code
INDIANAPOLIS IN 46250-2277

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FIRST MERCHANTS BANK EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 24 2014

Transaction ID : SA11.4760

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 42 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
WILLIAM BARRETT

Mailing Address 210 ADRIENNE DR.

City State Zip Code
GREENWOOD IN 46142

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WILLIAMS, BARRETT, & WILKOWSKI ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : 20

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MICHAEL BARTH III

Mailing Address 1934 N ILLINOIS ST

City State Zip Code
INDIANAPOLIS IN 46202-1319

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BARTH ELECTRIC CO ELECTRICAL CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11.4771

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STEPHEN EDMONDSON

Mailing Address 5978 AMBERWOOD DRIVE

City State Zip Code
NAPLES FL 34110-2365

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WELLS FARGO ADVISORS FINANCIAL ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11.4768

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 43 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
BLAKE JACKSON

Mailing Address 6900 S. GRAY RD.

City: INDIANAPOLIS State: IN Zip Code: 46237-3209

FEC ID number of contributing federal political committee: C

Name of Employer: AMERICAN SENIOR COMMUNITIES Occupation: EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 09 / 29 / 2014

Transaction ID : SA11.4874

Amount of Each Receipt this Period: 2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RENATA JACKSON

Mailing Address 6900 S. GRAY RD

City: INDIANAPOLIS State: IN Zip Code: 46237-3209

FEC ID number of contributing federal political committee: C

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 09 / 29 / 2014

Transaction ID : SA11.4875

Amount of Each Receipt this Period: 2600.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WESSLEY JACKSON

Mailing Address 5621 WOODWORTH WAY

City: INDIANAPOLIS State: IN Zip Code: 46237-3169

FEC ID number of contributing federal political committee: C

Name of Employer: TURTLE CREEK MANAGEMENT Occupation: EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 09 / 29 / 2014

Transaction ID : SA11.4980

Amount of Each Receipt this Period: 2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
CHRIS JONES

Mailing Address 3507 BROADRUN DR.

City State Zip Code
FAIRFAX VA 22033-2164

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FERGUSON STRATEGIES LLC PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 29 2014

Transaction ID : SA11.4764

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RANDALL TOBIAS

Mailing Address 10330 LAUREL RIDGE LANE

City State Zip Code
CARMEL IN 46032-8818

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 29 2014

Transaction ID : SA11.4765

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RICHARD ACKLEY

Mailing Address 1270 LAURELWOOD

City State Zip Code
CARMEL IN 46032-8752

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DALMATION FIRE, INC. PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2014

Transaction ID : SA11.4774

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 45 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
MR. ALEX M. AZAR II

Mailing Address **LILLY CORPORATE CENTER**

City **INDIANAPOLIS** State **IN** Zip Code **46285-0001**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ELI LILLY & COMPANY** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.4773

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JEFF BROIN

Mailing Address **809 W. 3RD STREET**

City **DELL RAPIDS** State **SD** Zip Code **57022-1814**

FEC ID number of contributing federal political committee. **C**

Name of Employer **POET** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.4785

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BEVERLY BROUGHTON

Mailing Address **9572 N. ADAMS CHURCH RD.**

City **BATESVILLE** State **IN** Zip Code **47006-8608**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BATESVILLE DENTAL** Occupation **DENTIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.4797

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 46 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
STEVEN FEHRIBACH

Mailing Address 12199 ISAND DR.

City INDIANAPOLIS State IN Zip Code 46256-9421

FEC ID number of contributing federal political committee. **C**

Name of Employer: A & F ENGINEERING Occupation: VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 09 / 30 / 2014

Transaction ID : SA11.4796

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN HOOVER

Mailing Address 6003 SUNSET LANE

City INDIANAPOLIS State IN Zip Code 46228-1454

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOOVER HULL Occupation: ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 09 / 30 / 2014

Transaction ID : SA11.4824

Amount of Each Receipt this Period: 2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THOMAS KIM

Mailing Address 7009 ARBOR LANE

City MCLEAN State VA Zip Code 22101-1545

FEC ID number of contributing federal political committee. **C**

Name of Employer: THOMAS CAPITOL PARTNERS, INC. Occupation: PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 30 / 2014

Transaction ID : SA11.4775

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 47 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. GARRY KLEER | | Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014 | |
| Mailing Address 3329 BISHOP GATE | | Transaction ID : SA11.4795 | |
| City RICHMOND | State IN | Zip Code 47374-7933 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 CONTRIBUTION | |
| Name of Employer FIRST BANK RICHMOND | Occupation PRESIDENT | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 850.00 | | |

| | | | |
|---|-----------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. MR. ANDRE LACY | | Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014 | |
| Mailing Address 54 MONUMENT CIRCLE, SUITE 800 | | Transaction ID : SA11.4778 | |
| City INDIANAPOLIS | State IN | Zip Code 46204-2949 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 CONTRIBUTION | |
| Name of Employer LDI LTD. | Occupation PRESIDENT/CEO | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | | |

| | | | |
|---|-----------------------------------|---|--|
| Full Name (Last, First, Middle Initial) C. JOHN C. LECHLEITER | | Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014 | |
| Mailing Address ONE NORTH ILLINOIS RESIDENCE 2302 | | Transaction ID : SA11.4781 | |
| City INDIANAPOLIS | State IN | Zip Code 46204-1935 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 CONTRIBUTION | |
| Name of Employer ELI LILLY & CO. | Occupation EXECUTIVE | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2500.00 |
| TOTAL This Period (last page this line number only)..... | 2500.00 |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 48 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
MR. P.E. MACALLISTER

Mailing Address 4702 BRIAR PATCH CT.

City State Zip Code
INDIANAPOLIS IN 46250-2408

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MACALLISTER MADRY COMPANY EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.4823

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT MARSH

Mailing Address 2351 WARWICK LN

City State Zip Code
MUNCIE IN 47304-3346

FEC ID number of contributing federal political committee.

Name of Employer Occupation
CARDINAL HOME MEDICAL OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.4793

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STEVEN T. MYERS

Mailing Address 7201 W. AUGUSTA BLVD.

City State Zip Code
YORKTOWN IN 47396-9351

FEC ID number of contributing federal political committee.

Name of Employer Occupation
ARDAGH GROUP HUMAN RESOURCE OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.4799

Amount of Each Receipt this Period

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 49 OF 146 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
J. STEVEN RHEA

Mailing Address 7005 W SAINT ANDREWS AVE

City YORKTOWN State IN Zip Code 47396-9234

FEC ID number of contributing federal political committee. **C**

Name of Employer SAINT GOBAIN-CONTAINERS Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4794

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT STOLMEIER

Mailing Address 2423 OVERLOOK DR.

City SHELBYVILLE State IN Zip Code 46176-9768

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2450.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4792

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES P. WARNER

Mailing Address 834 S. DAKOTA AVE.

City TAMPA State FL Zip Code 33606-2800

FEC ID number of contributing federal political committee. **C**

Name of Employer ARDAGH GROUP Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4800

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

89370.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 50 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON State DC Zip Code 20005-2110

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 10 / 2014

Transaction ID : SA11.4472

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARATHON PETROLEUM CORPORATION EMPLOYEES PAC

Mailing Address 539 S MAIN STREET

City FINDLAY State OH Zip Code 45840-3229

FEC ID number of contributing federal political committee. **C** C00496307

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 10 / 2014

Transaction ID : SA11.4473

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BILL DAVIS FOR STATE REP

Mailing Address 210 WILLIAMSON DR.

City PORTLAND State IN Zip Code 47371-2818

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11.4509

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 51 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
JACKMAN FOR STATE SENATE

Mailing Address 352 W. ST. RD. 244

City MILROY State IN Zip Code 46156-9626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11.4560

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RANDOLPH COUNTY GOP

Mailing Address P.O. BOX 230

City WINCHESTER State IN Zip Code 47394-0230

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11.4564

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC

Mailing Address 601 THIRTEENTH STREET NW
STE 910 S

City WASHINGTON State DC Zip Code 20005-3807

FEC ID number of contributing federal political committee. **C** C00542365

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11.4575

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 52 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. JEAN LEISING FOR STATE SENATE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5268 STOCKPILE ROAD
 City State Zip Code
 OLDENBURG IN 47036-9713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 650.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014
Transaction ID : SA11.4600
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

B. ASPPA PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 4245 N. FAIRFAX DR.
 SUITE 750
 City State Zip Code
 ARLINGTON VA 22203-1648
 FEC ID number of contributing federal political committee. **C** C00333104
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014
Transaction ID : SA11.4626
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. BLOCKPAC
 Full Name (Last, First, Middle Initial)
 Mailing Address ONE H&R BLOCK WAY
 City State Zip Code
 KANSAS CITY MO 64105-
 FEC ID number of contributing federal political committee. **C** C00188177
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014
Transaction ID : SA11.4627
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

3700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 53 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
ERIE INSURANCE PAC - FEDERAL

Mailing Address PO BOX 1699

City State Zip Code
ERIE PA 16530-1000

FEC ID number of contributing federal political committee. **C** C00153577

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : SA11.4630

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FMR LLC POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 82 DEVONSHIRE STREET #N5A

City State Zip Code
BOSTON MA 02109-3605

FEC ID number of contributing federal political committee. **C** C00380550

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : SA11.4625

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POL

Mailing Address 2901 TELESTAR CT.

City State Zip Code
FALLS CHURCH VA 22042-1260

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : SA11.4622

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 54 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL

Mailing Address **8700 WEST BRYN MAWR SUITE 1200S**

City **CHICAGO** State **IL** Zip Code **60631-3512**

FEC ID number of contributing federal political committee. **C C00066472**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : SA11.4621

Amount of Each Receipt this Period
 _____ 2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RED GOLD INC PAC

Mailing Address **P.O. BOX 83**

City **ELWOOD** State **IN** Zip Code **46036-0083**

FEC ID number of contributing federal political committee. **C C00390112**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : SA11.4623

Amount of Each Receipt this Period
 _____ 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TIAA-CREF PAC

Mailing Address **601 THIRTEENTH STREET NW SUITE 700**

City **WASHINGTON** State **DC** Zip Code **20005-3807**

FEC ID number of contributing federal political committee. **C C00431361**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : SA11.4624

Amount of Each Receipt this Period
 _____ 2500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ 6000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 55 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. DAN BURTON FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 50593

City IN Zip Code 46250-0593

FEC ID number of contributing federal political committee. **C C00145862**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.4650

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. MASCO CORPORATION PAC

Full Name (Last, First, Middle Initial)
Mailing Address 21001 VAN BORN ROAD

City MI Zip Code 48180-1340

FEC ID number of contributing federal political committee. **C C00341289**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.4636

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. MORGAN STANLEY PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1585 BROADWAY FL 9

City NY Zip Code 10036-8200

FEC ID number of contributing federal political committee. **C C00337626**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.4648

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 146
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
UPSPAC

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.4641

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ARDA-ROC

Mailing Address 1201 15TH STREET NW SUITE 400

City WASHINGTON State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C C90014036**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11.4651

Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLI

Mailing Address 20 F STREET NW SUITE 610

City WASHINGTON State DC Zip Code 20001-6707

FEC ID number of contributing federal political committee. **C C00022343**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11.4652

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 57 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. JUVENILE PRODUCTS MANUFACTURER'S ASSOCIATION PAC

Full Name (Last, First, Middle Initial)
Mailing Address 15000 COMMERCE PARKWAY
SUITE C

City MOUNT LAUREL State NJ Zip Code 08054-2212

FEC ID number of contributing federal political committee. **C C00547919**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11.4653

Amount of Each Receipt this Period
 750.00
 CONTRIBUTION

B. LIBERTY MUTUAL INSURANCE CO. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 175 BERKELEY STREET

City BOSTON State MA Zip Code 02116-5066

FEC ID number of contributing federal political committee. **C C00171843**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11.4655

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. SENTRY INSURANCE FEDERAL PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1800 NORTH POINT DR.

City STEVENS POINT State WI Zip Code 54481-1253

FEC ID number of contributing federal political committee. **C C00545194**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11.4654

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 58 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
AIRCRAFT OWNERS AND PILOTS ASSOCIATION (POLITICAL ACTION COM

Mailing Address 421 AVIATION WAY

City: FREDERICK State: MD Zip Code: 21701-4756

FEC ID number of contributing federal political committee: **C** C70004585

Name of Employer: _____ Occupation: _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____ 3000.00

Date of Receipt: 08 / 29 / 2014

Transaction ID : SA11.4674

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
INDIANA DENTAL PAC

Mailing Address 1319 E. STOP 10 RD.

City: INDIANAPOLIS State: IN Zip Code: 46227-5934

FEC ID number of contributing federal political committee: **C** C00082636

Name of Employer: _____ Occupation: _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____ 2000.00

Date of Receipt: 08 / 29 / 2014

Transaction ID : SA11.4665

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
IPAA WILDCATTERS FUND

Mailing Address 1201 15TH STREET, NW STE. 300

City: WASHINGTON State: DC Zip Code: 20005-2899

FEC ID number of contributing federal political committee: **C** C00246306

Name of Employer: _____ Occupation: _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____ 2000.00

Date of Receipt: 08 / 29 / 2014

Transaction ID : SA11.4673

Amount of Each Receipt this Period: 2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 59 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
SIFMA-PAC

Mailing Address 1101 NEW YORK AVE. NW
SUITE 800

City WASHINGTON State DC Zip Code 20005-4279

FEC ID number of contributing federal political committee. **C C00431312**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11.4672

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC

Mailing Address 601 THIRTEENTH STREET NW
STE 910 S

City WASHINGTON State DC Zip Code 20005-3807

FEC ID number of contributing federal political committee. **C C00542365**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11.4667

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW
SUITE 600

City WASHINGTON State DC Zip Code 20036-3971

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11.4692

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 60 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. INDEPENDENT COMMUNITY BANKERS PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1615 L ST. NW, STE. 900

City WASHINGTON State DC Zip Code 20036-5623

FEC ID number of contributing federal political committee. **C C00032698**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11.4691

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. OLBANK PAC

Full Name (Last, First, Middle Initial)
Mailing Address ONE MAIN STREET

City EVANSVILLE State IN Zip Code 47708-1464

FEC ID number of contributing federal political committee. **C C00412189**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11.4693

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. CONSERVATIVE VICTORY FUND

Full Name (Last, First, Middle Initial)
Mailing Address 801 NORTH PITT STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314-1783

FEC ID number of contributing federal political committee. **C C00009704**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
708.70

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2014

Transaction ID : SA11.4868

Amount of Each Receipt this Period
 345.00
 CONTRIBUTION

CREATING EVENT INVITATIONS

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1845.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | | |
|---|-------------------------------------|--|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 61 OF 146 |
| <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |
| | | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
BANK OF AMERICA CORPORATION FEDERAL PAC

Mailing Address 1455 PENNSYLVANIA AVE NW SUITE 950
DC8-455-09-01

City WASHINGTON State DC Zip Code 20004-1043

FEC ID number of contributing federal political committee. **C** C00364778

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11.4712

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION

Mailing Address 1201 15TH STREET, NW

City WASHINGTON State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11.4707

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 601 PENNSYLVANIA AVENUE, NW
SOUTH BUILDING, SUITE 600

City WASHINGTON State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11.4713

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 62 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 900

City WASHINGTON State DC Zip Code 20004-2414

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11.4709

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JPMORGAN CHASE & CO. PAC

Mailing Address 601 PENNSYLVANIA AVE. NW
7THFLOOR

City WASHINGTON State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C C00104299**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11.4714

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THE HUNTINGTON BANCSHARES INC. PAC

Mailing Address 41 S. HIGH STREET

City COLUMBUS State OH Zip Code 43215-6101

FEC ID number of contributing federal political committee. **C C00165589**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11.4715

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 63 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW
SUITE 600

City WASHINGTON State DC Zip Code 20036-3971

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11.4727

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

B. AMERIPRISE FINANCIAL PAC

Full Name (Last, First, Middle Initial)
AMERIPRISE FINANCIAL PAC

Mailing Address 101 CONSTITUTION AVE NW
SUITE 912 W

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00414474**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11.4735

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. HILL-ROM HOLDINGS, INC. POLITICAL ACTION COMMITTEE (HRPAC)

Full Name (Last, First, Middle Initial)
HILL-ROM HOLDINGS, INC. POLITICAL ACTION COMMITTEE (HRPAC)

Mailing Address 1069 STATE ROAD 46 EAST

City BATESVILLE State IN Zip Code 47006-7520

FEC ID number of contributing federal political committee. **C C00448993**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11.4720

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | | |
|---|-------------------------------------|--|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 64 OF 146 |
| <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |
| | | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. MORTGAGE BANKERS ASSOCIATION PAC

Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION PAC

Mailing Address 1919 M STREET NW
5TH FLOOR

City WASHINGTON State DC Zip Code 20036-3572

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2014

Transaction ID : SA11.4736

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

B. NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMI

Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMI

Mailing Address 1101 KING STREET
SUITE 600

City ALEXANDRIA State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2014

Transaction ID : SA11.4726

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

C. NATIONAL TOOLING & MACHINING ASSOCIATION

Full Name (Last, First, Middle Initial)
NATIONAL TOOLING & MACHINING ASSOCIATION

Mailing Address 1357 ROCKSIDE RD

City CLEVELAND State OH Zip Code 44134-2776

FEC ID number of contributing federal political committee. **C** C00043091

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2014

Transaction ID : SA11.4734

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 65 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
NOMURA HOLDING AMERICA INC. PAC

Mailing Address 1101 PENNSYLVANIA AVE. NW
SUITE 515

City WASHINGTON State DC Zip Code 20004-2528

FEC ID number of contributing federal political committee. **C** C00491951

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11.4732

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PRIMERICA PAC

Mailing Address 1 PRIMERICA PARKWAY

City DULUTH State GA Zip Code 30099-4000

FEC ID number of contributing federal political committee. **C** C00521914

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11.4731

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROLLS-ROYCE NORTH AMERICA HOLDINGS INC. PAC (ROLLS-ROYCE NOR

Mailing Address 1875 EXPLORER STREET, SUITE 200

City RESTON State VA Zip Code 20190-6022

FEC ID number of contributing federal political committee. **C** C00296822

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11.4722

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 66 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
THE NASDAQ OMX GROUP INC PAC

Mailing Address 1100 NEW YORK AVE.

City WASHINGTON State DC Zip Code 20005-3934

FEC ID number of contributing federal political committee. **C C00366013**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11.4733

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
VECTREN CORPORATION EMPLOYEES FEDERAL PAC

Mailing Address PO BOX 209

City EVANSVILLE State IN Zip Code 47702-0209

FEC ID number of contributing federal political committee. **C C00240069**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11.4719

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NFIB PAC

Mailing Address 1201 F STREET, NW SUITE 200

City WASHINGTON State DC Zip Code 20004-1221

FEC ID number of contributing federal political committee. **C C00101105**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11.4749

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 67 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
PNC PAC

Mailing Address **249 FIFTH AVE.**

City **PITTSBURGH** State **PA** Zip Code **15222-2707**

FEC ID number of contributing federal political committee. **C C00035519**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : SA11.4755

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PRUDENTIAL FINANCIAL INC. FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address **751 BROAD STREET
14TH FLOOR**

City **NEWARK** State **NJ** Zip Code **07102-3714**

FEC ID number of contributing federal political committee. **C C00127779**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : SA11.4751

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WELLS FARGO & CO. EMPLOYEE PAC

Mailing Address **WELLS FARGO CENTER
SIXTH & MARQUETTE**

City **MINNEAPOLIS** State **MN** Zip Code **55479-0001**

FEC ID number of contributing federal political committee. **C C00034595**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : SA11.4754

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 68 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. SCALISE FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2900 CLEARVIEW PKWY
 SUITE 206
 City METAIRIE State LA Zip Code 70006-6532
 FEC ID number of contributing federal political committee. **C** C00394957
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11.4870
 Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. ADVANCED MEDICAL TECHNOLOGY ASSN PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 PENNSYLVANIA AVE NW
 SUITE 800
 City WASHINGTON State DC Zip Code 20004-2654
 FEC ID number of contributing federal political committee. **C** C00340356
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11.4869
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. AICPA PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 LEIGH FARM RD
 City DURHAM State NC Zip Code 27707-8110
 FEC ID number of contributing federal political committee. **C** C00077321
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11.4877
 Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 69 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
CAPITAL ONE FINANCIAL CORP ASSOCIATES PAC

Mailing Address 1680 CAPITAL ONE DR.

City State Zip Code
MCLEAN VA 22102-3407

FEC ID number of contributing federal political committee. **C C00326595**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11.4881

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FMR LLC POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 82 DEVONSHIRE STREET #N5A

City State Zip Code
BOSTON MA 02109-3605

FEC ID number of contributing federal political committee. **C C00380550**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11.4882

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HALL RENDER KILLIAN HEATH & LYMAN EMPLOYEE POLITICAL ACTION

Mailing Address ONE AMERICAN SQUARE SUITE 2000

City State Zip Code
INDIANAPOLIS IN 46282-0004

FEC ID number of contributing federal political committee. **C C00552083**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11.4883

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 146
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
MICROSOFT CORPORATION PAC

Mailing Address 16011 NE 36TH WAY

City REDMOND State WA Zip Code 98052-6301

FEC ID number of contributing federal political committee. **C C00227546**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11.4879

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS PAC

Mailing Address 1875 I STREET NW SUITE 600

City WASHINGTON State DC Zip Code 20006-5413

FEC ID number of contributing federal political committee. **C C00303339**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11.4880

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SUPPORTING CONSERVATIVES OF TODAY & TOMORROW PAC

Mailing Address PO BOX 905

City NEWTON State NJ Zip Code 07860-0905

FEC ID number of contributing federal political committee. **C C00453324**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11.4884

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 71 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. THE FINANCIAL SERVICES ROUNDTABLE PAC

Full Name (Last, First, Middle Initial)
THE FINANCIAL SERVICES ROUNDTABLE PAC

Mailing Address 600 13TH STREET NW
SUITE 400

City WASHINGTON State DC Zip Code 20005-3008

FEC ID number of contributing federal political committee. **C** C00193177

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11.4878

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. TIAA-CREF PAC

Full Name (Last, First, Middle Initial)
TIAA-CREF PAC

Mailing Address 601 THIRTEENTH STREET NW
SUITE 700

City WASHINGTON State DC Zip Code 20005-3807

FEC ID number of contributing federal political committee. **C** C00431361

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11.4876

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. VANGUARD COMMITTEE FOR RESPONSIBLE GOVERNMENT

Full Name (Last, First, Middle Initial)
VANGUARD COMMITTEE FOR RESPONSIBLE GOVERNMENT

Mailing Address 975 F STREET
SUITE 500

City WASHINGTON State DC Zip Code 20004-1457

FEC ID number of contributing federal political committee. **C** C00410266

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11.4871

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 72 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
ACE GROUP PAC

Mailing Address 436 WALNUT STREET
WA 04P

City PHILADELPHIA State PA Zip Code 19106-3703

FEC ID number of contributing federal political committee. **C C00348938**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.4816

Amount of Each Receipt this Period
1500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AEGON USA LLC/TRANSAMERICA CORP PAC

Mailing Address 1001 PENNSYLVANIA AVE NW
SUITE 500A SOUTH

City WASHINGTON State DC Zip Code 20004-2576

FEC ID number of contributing federal political committee. **C C00236414**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.4814

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
APPRAISAL INSTITUTE PAC

Mailing Address 2600 VIRGINIA AVE. NW
SUITE 123

City WASHINGTON State DC Zip Code 20037-1905

FEC ID number of contributing federal political committee. **C C00144261**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.4788

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 73 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
AXA EQUITABLE LIFE INSURANCE CO PAC

Mailing Address 1290 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10104-0101

FEC ID number of contributing federal political committee. **C** C00161901

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4818

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DEPOSITORY TRUST & CLEARING CORP. PAC

Mailing Address 228 S. WASHINGTON ST.
SUITE 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00497917

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4813

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DUKE ENERGY CORPORATION PAC

Mailing Address 550 SOUTH TRYON STREET

City CHARLOTTE State NC Zip Code 28202-4200

FEC ID number of contributing federal political committee. **C** C00083535

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4780

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 74 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
FIFTH THIRD BANCORP PAC

Mailing Address 550 EAST WALNUT ST.

City State Zip Code
COLUMBUS OH 43215-5323

FEC ID number of contributing federal political committee. **C** C00290502

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4783

Amount of Each Receipt this Period
 1500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FIFTH THIRD BANCORP PAC

Mailing Address 550 EAST WALNUT ST.

City State Zip Code
COLUMBUS OH 43215-5323

FEC ID number of contributing federal political committee. **C** C00290502

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4804

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HALLIBURTON COMPANY PAC

Mailing Address 10200 BELLAIRE BLVD

City State Zip Code
HOUSTON TX 77072-5206

FEC ID number of contributing federal political committee. **C** C00035691

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4821

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 75 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
INDIANA FARM BUREAU

Mailing Address P.O. BOX 1290

City: INDIANAPOLIS State: IN Zip Code: 46206-1290

FEC ID number of contributing federal political committee: **C C00169722**

Name of Employer: _____ Occupation: _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: 09 / 30 / 2014

Transaction ID : SA11.4791

Amount of Each Receipt this Period: 5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
INSURED RETIREMENT INSTITUTE INC. PAC

Mailing Address 1101 NEW YORK AVE NW #825

City: WASHINGTON State: DC Zip Code: 20005-4359

FEC ID number of contributing federal political committee: **C C00490474**

Name of Employer: _____ Occupation: _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: 09 / 30 / 2014

Transaction ID : SA11.4802

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
INTERCONTINENTAL EXCHANGE INC. PAC

Mailing Address 2100 RIVER EDGE PARKWAY SUITE 500

City: ATLANTA State: GA Zip Code: 30328-4676

FEC ID number of contributing federal political committee: **C C00443168**

Name of Employer: _____ Occupation: _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: 09 / 30 / 2014

Transaction ID : SA11.4790

Amount of Each Receipt this Period: 2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 76 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
JPMORGAN CHASE & CO. PAC

Mailing Address 601 PENNSYLVANIA AVE. NW
7TH FLOOR

City WASHINGTON State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C C00104299**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4815

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LIBERTY MUTUAL INSURANCE CO. PAC

Mailing Address 175 BERKELEY STREET

City BOSTON State MA Zip Code 02116-5066

FEC ID number of contributing federal political committee. **C C00171843**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4782

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NAIOP-PAC

Mailing Address 2201 COOPERATIVE WAY
3RD FLOOR

City HERNDON State VA Zip Code 20171-4583

FEC ID number of contributing federal political committee. **C C00233304**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4789

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 77 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC

Mailing Address 3601 VINCENNES ROAD
P.O. BOX 68700

City INDIANAPOLIS State IN Zip Code 46268-1154

FEC ID number of contributing federal political committee. **C** C00170258

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4812

Amount of Each Receipt this Period
 3000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4822

Amount of Each Receipt this Period
 4000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS PAC

Mailing Address 1875 I STREET NW
SUITE 600

City WASHINGTON State DC Zip Code 20006-5413

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4826

Amount of Each Receipt this Period
 4000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

11000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 78 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
NISOURCE INC. PAC

Mailing Address 200 CIVIC CENTER DRIVE

City State Zip Code
COLUMBUS OH 43215-4138

FEC ID number of contributing federal political committee. **C C00051979**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4808

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NISOURCE INC. PAC

Mailing Address 200 CIVIC CENTER DRIVE

City State Zip Code
COLUMBUS OH 43215-4138

FEC ID number of contributing federal political committee. **C C00051979**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4809

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I

Mailing Address 1301 K STREET, NW
SUITE 800W

City State Zip Code
WASHINGTON DC 20005-3317

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4807

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 79 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. REGIONS FINANCIAL CORPORATION PAC

Full Name (Last, First, Middle Initial)
REGIONS FINANCIAL CORPORATION PAC

Mailing Address 1015 15TH STREET NW
SUITE 920

City WASHINGTON State DC Zip Code 20005-2623

FEC ID number of contributing federal political committee. **C C00432252**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4801

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. SIFMA-PAC

Full Name (Last, First, Middle Initial)
SIFMA-PAC

Mailing Address 1101 NEW YORK AVE. NW
SUITE 800

City WASHINGTON State DC Zip Code 20005-4279

FEC ID number of contributing federal political committee. **C C00431312**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4825

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

C. SONY PICTURES ENTERTAINMENT INC PAC

Full Name (Last, First, Middle Initial)
SONY PICTURES ENTERTAINMENT INC PAC

Mailing Address 10202 W. WASHINGTON BLVD

City CULVER CITY State CA Zip Code 90232-3119

FEC ID number of contributing federal political committee. **C C00282038**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4827

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 80 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
STATE FARM FEDERAL PAC

Mailing Address **1 STATE FARM PLZ**
D-2

City **BLOOMINGTON** State **IL** Zip Code **61710-0001**

FEC ID number of contributing federal political committee. **C C00544817**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.4820

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THE BANK OF NEW YORK MELLON CORP - FEDERAL

Mailing Address **BNY MELLON CENTER**
ROOM 3225

City **PITTSBURGH** State **PA** Zip Code **15258-0001**

FEC ID number of contributing federal political committee. **C C00494534**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.4786

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY PAC

Mailing Address **1200 WILSON BLVD.**

City **ARLINGTON** State **VA** Zip Code **22209-2300**

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.4803

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 OF 146
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
THE CATERPILLAR INC. EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address 100 N.E. ADAMS STREET

City Peoria State IL Zip Code 61629-0001

FEC ID number of contributing federal political committee. **C** C00148031

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4779

Amount of Each Receipt this Period
 3500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THE CATERPILLAR INC. EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address 100 N.E. ADAMS STREET

City Peoria State IL Zip Code 61629-0001

FEC ID number of contributing federal political committee. **C** C00148031

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4810

Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THE GOLDMAN SACHS GROUP INC PAC

Mailing Address 101 CONSTITUTION AVE NW
 SUITE 1000E

City Washington State DC Zip Code 20001-2171

FEC ID number of contributing federal political committee. **C** C00350744

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4819

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 82 OF 146 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

Mailing Address 1155 F STREET, NW
SUITE 400

City WASHINGTON State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4811

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THE REAL ESTATE ROUNDTABLE PAC

Mailing Address 801 PENNSYLVANIA AVE NW
SUITE 720

City WASHINGTON State DC Zip Code 20004-2686

FEC ID number of contributing federal political committee. **C C00033779**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4787

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
UBS AMERICAS INC PAC

Mailing Address 1501 K STREET NW
SUITE 1100

City WASHINGTON State DC Zip Code 20005-1410

FEC ID number of contributing federal political committee. **C C00012245**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.4817

Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

| | | | |
|------------------------------|------------------------------|---|------------------------------|
| FOR LINE NUMBER: | | PAGE 83 OF 146 | |
| (check only one) | | | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. Full Name (Last, First, Middle Initial)
UNITED EGG ASSOCIATION EGGPAC

Mailing Address 1720 WINDWARD CONCOURSE
SUITE 230

City State Zip Code
ALPHARETTA GA 30005-2289

FEC ID number of contributing federal political committee. **C** C00172841

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.4784

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

161045.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|--|---|--|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 84 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a | <input type="checkbox"/> 18 <input type="checkbox"/> 20b | <input type="checkbox"/> 19a <input type="checkbox"/> 20c | <input type="checkbox"/> 19b <input type="checkbox"/> 21 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. JOHNATHON B. HUSTON | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 1608 N. NEW YORK AVE. | | Amount of Each Disbursement this Period 606.27 Transaction ID : SB17.I2160 |
| City MUNCIE | State IN | |
| Zip Code 47304-2759 | Purpose of Disbursement PAYROLL | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. KELSEA NEAL | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 126 E. ST. JOSEPH STREET APT. B | | Amount of Each Disbursement this Period 394.62 Transaction ID : SB17.I2161 |
| City INDIANAPOLIS | State IN | |
| Zip Code 46202-3309 | Purpose of Disbursement PAYROLL | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. STEVEN SHARP | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 72 SHEILA LANE | | Amount of Each Disbursement this Period 740.30 Transaction ID : SB17.I2162 |
| City VALPARAISO | State IN | |
| Zip Code 46385 | Purpose of Disbursement PAYROLL | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1741.19 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 85 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. JOSH WEBB | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 6131 EAST STATE RD 38 | | Amount of Each Disbursement this Period 45.80 |
| City NEW CASTLE | State IN | |
| Zip Code 47362-9594 | Purpose of Disbursement PAYROLL | Transaction ID : SB17.I2163 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. CMDI | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 1593 SPRING HILL RD SUITE 400 | | Amount of Each Disbursement this Period 322.50 |
| City TYSONS CORNER | State VA | |
| Zip Code 22182 | Purpose of Disbursement SOFTWARE EXPENSE | Transaction ID : SB17.I2181 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. PAYCHEX | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 9405 DELEGATES ROW | | Amount of Each Disbursement this Period 69.73 |
| City INDIANAPOLIS | State IN | |
| Zip Code 46240-3805 | Purpose of Disbursement PAYROLL PROCESSING FEES | Transaction ID : SB17.I2159 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 438.03 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 86 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. PAYCHEX | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 9405 DELEGATES ROW | | Amount of Each Disbursement this Period 642.02 Transaction ID : SB17.I2164 |
| City INDIANAPOLIS | State IN Zip Code 46240-3805 | |
| Purpose of Disbursement PAYROLL TAX | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. STAPLES | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 6101 N. KEYSTONE | | Amount of Each Disbursement this Period 137.08 Transaction ID : SB17.I2157 |
| City INDIANAPOLIS | State IN Zip Code 46220-2488 | |
| Purpose of Disbursement OFFICE SUPPLIES | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. THE CANNON GROUP | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 1301 K STREET NW SUITE 1050 E | | Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.I2165 |
| City WASHINGTON | State DC Zip Code 20005-3317 | |
| Purpose of Disbursement FUNDRAISING CONSULTANT | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4779.10 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 87 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. UNITED STATES POSTAL SERVICE

Full Name (Last, First, Middle Initial)
Mailing Address **CIRCLE CITY STATION**

City **INDIANAPOLIS** State **IN** Zip Code **46202**

Purpose of Disbursement
POSTAGE EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 01 / 2014

Amount of Each Disbursement this Period
32.73

Transaction ID : **SB17.I2449**

B. AMERICAN EXPRESS

Full Name (Last, First, Middle Initial)
Mailing Address **PO BOX 53852**

City **PHOENIX** State **AZ** Zip Code **85072**

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 03 / 2014

Amount of Each Disbursement this Period
3.00

Transaction ID : **SB17.I2201**

C. MERCHANT ESOLUTIONS

Full Name (Last, First, Middle Initial)
Mailing Address **3600 BRIDGE PARKWAY
SUITE 102**

City **REDWOOD CITY** State **CA** Zip Code **94065**

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 03 / 2014

Amount of Each Disbursement this Period
218.11

Transaction ID : **SB17.I2202**

SUBTOTAL of Disbursements This Page (optional)..... **253.84**

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 88 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES | | Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014 |
| Mailing Address 4333 AMON CARTER BOULEVARD | | Amount of Each Disbursement this Period 540.00 Transaction ID : SB17.I2204 |
| City FT. WORTH | State TX | |
| Zip Code 76155 | Purpose of Disbursement AIRFARE | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014 |
| Mailing Address PO BOX 53852 | | Amount of Each Disbursement this Period 164.46 Transaction ID : SB17.I2205 |
| City PHOENIX | State AZ | |
| Zip Code 85072 | Purpose of Disbursement CREDIT CARD PROCESSING FEES | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. CONCEPT PRINTS INC. | | Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014 |
| Mailing Address 6707 GUION RD. | | Amount of Each Disbursement this Period 687.48 Transaction ID : SB17.I2158 |
| City INDIANAPOLIS | State IN | |
| Zip Code 46268 | Purpose of Disbursement T-SHIRTS | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1391.94 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 89 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. EXPEDIA, INC. | | Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014 |
| Mailing Address 10190 COVINGTON CROSS DR. #300 | | Amount of Each Disbursement this Period 271.95 Transaction ID : SB17.I2203 |
| City LAS VEGAS | State NV Zip Code 89144-7044 | |
| Purpose of Disbursement TRAVEL EXPENSES | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. VERIZON WIRELESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014 |
| Mailing Address 140 WEST ST | | Amount of Each Disbursement this Period 136.70 Transaction ID : SB17.I2183 |
| City NEW YORK | State NY Zip Code 10007-2141 | |
| Purpose of Disbursement CELL PHONE EXPENSE | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. UNITED STATES POSTAL SERVICE | | Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014 |
| Mailing Address CIRCLE CITY STATION | | Amount of Each Disbursement this Period 9.80 Transaction ID : SB17.I2453 |
| City INDIANAPOLIS | State IN Zip Code 46202 | |
| Purpose of Disbursement POSTAGE EXPENSE | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 271.95 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 90 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. INDIANA REPUBLICAN STATE COMMITTEE | | Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014 |
| Mailing Address 47 S. MERIDIAN ST. STE. 200 | | Amount of Each Disbursement this Period 125.00 Transaction ID : SB17.I2170 |
| City INDIANAPOLIS State IN Zip Code 46204-3557 | Purpose of Disbursement SOFTWARE LICENSE | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. JOHNATHON B. HUSTON | | Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014 |
| Mailing Address 1608 N. NEW YORK AVE. | | Amount of Each Disbursement this Period 381.02 Transaction ID : SB17.I2207 |
| City MUNCIE State IN Zip Code 47304-2759 | Purpose of Disbursement SUPPLIES, GAS, POSTAGE & PRINTING REIMBURSEMENT | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. TRACY SMITH | | Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014 |
| Mailing Address 3301 N. LINCOLN HILL RD. | | Amount of Each Disbursement this Period 862.50 Transaction ID : SB17.I2171 |
| City MARTINSVILLE State IN Zip Code 46151-6349 | Purpose of Disbursement ACCOUNTING SERVICES | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1368.50 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 91 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. TRACY SMITH | | Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014 |
| Mailing Address 3301 N. LINCOLN HILL RD. | | Amount of Each Disbursement this Period 51.52 |
| City MARTINSVILLE | State IN | |
| Zip Code 46151-6349 | Purpose of Disbursement SHIPPING REIMBURSEMENT | Transaction ID : SB17.I2172 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. ARMY NAVY COUNTRY CLUB | | Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014 |
| Mailing Address 1700 ARMY NAVY DR. | | Amount of Each Disbursement this Period 299.71 |
| City ARLINGTON | State VA | |
| Zip Code 22202 | Purpose of Disbursement GOLF FEES | Transaction ID : SB17.I2174 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. BRABENDERCox LLC | | Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014 |
| Mailing Address 1218 GRANDVIEW AVE | | Amount of Each Disbursement this Period 5250.00 |
| City PITTSBURGH | State PA | |
| Zip Code 15211-1239 | Purpose of Disbursement WEBSITE | Transaction ID : SB17.I2166 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|----------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5601.23 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 92 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. CIRCLE K | | Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014 |
| Mailing Address 9510 E. 126TH ST. | | Amount of Each Disbursement this Period 42.64 |
| City FISHERS State IN Zip Code 46038-2854 | Purpose of Disbursement GAS EXPENSE - PD BY J. HUSTON | |
| Candidate Name | | Transaction ID : SB17.I2208 [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. CVS PHARMARY | | Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014 |
| Mailing Address 200 S HARRISON ST | | Amount of Each Disbursement this Period 37.39 |
| City SHELBYVILLE State IN Zip Code 46176-2160 | Purpose of Disbursement OFFICE SUPPLIES - PD BY J. HUSTON | |
| Candidate Name | | Transaction ID : SB17.I2213 [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. HALLOWELL CONSULTING, LLC | | Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014 |
| Mailing Address 342 EAST ARCH STREET | | Amount of Each Disbursement this Period 5000.00 |
| City INDIANAPOLIS State IN Zip Code 46202-3354 | Purpose of Disbursement CONSULTING FEE | |
| Candidate Name | | Transaction ID : SB17.I2168 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5000.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 93 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|------------------------------|---|
| Full Name (Last, First, Middle Initial) A. PRINT RESOURCES INC. | | Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014 |
| Mailing Address 1500 E RIVERSIDE DR. | | Amount of Each Disbursement this Period 738.30 |
| City INDIANAPOLIS | State IN Zip Code 46202-2039 | |
| Purpose of Disbursement PRINTING EXPENSE | Category/Type | Transaction ID : SB17.I2169 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: District: | | |

| | | |
|--|-------------------------|---|
| Full Name (Last, First, Middle Initial) B. UNITED STATES POSTAL SERVICE | | Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014 |
| Mailing Address CIRCLE CITY STATION | | Amount of Each Disbursement this Period 144.71 |
| City INDIANAPOLIS | State IN Zip Code 46202 | |
| Purpose of Disbursement POSTAGE EXPENSE - PD BY J. HUSTON | Category/Type | Transaction ID : SB17.I2215 [MEMO ITEM] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: District: | | |

| | | |
|--|------------------------------|---|
| Full Name (Last, First, Middle Initial) C. INDIANA NEWSPAPERS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014 |
| Mailing Address P.O. BOX 145 | | Amount of Each Disbursement this Period 14.90 |
| City INDIANAPOLIS | State IN Zip Code 46206-0145 | |
| Purpose of Disbursement MONTHLY SUBSCRIPTION | Category/Type | Transaction ID : SB17.I2367 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 753.20 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 94 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. CMDI | | Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014 |
| Mailing Address 1593 SPRING HILL RD SUITE 400 | | Amount of Each Disbursement this Period 99.00 |
| City TYSONS CORNER | State VA Zip Code 22182 | |
| Purpose of Disbursement MONTHLY SUBSCRIPTION EXPENSE | Category/Type | Transaction ID : SB17.I2338 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. UNITED STATES POSTAL SERVICE | | Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014 |
| Mailing Address CIRCLE CITY STATION | | Amount of Each Disbursement this Period 18.60 |
| City INDIANAPOLIS | State IN Zip Code 46202 | |
| Purpose of Disbursement POSTAGE EXPENSE | Category/Type | Transaction ID : SB17.I2336 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. JOHNATHON B. HUSTON | | Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014 |
| Mailing Address 1608 N. NEW YORK AVE. | | Amount of Each Disbursement this Period 606.26 |
| City MUNCIE | State IN Zip Code 47304-2759 | |
| Purpose of Disbursement PAYROLL | Category/Type | Transaction ID : SB17.I2177 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 723.86 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 95 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. KELSEA NEAL | | Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014 |
| Mailing Address 126 E. ST. JOSEPH STREET APT. B | | Amount of Each Disbursement this Period 394.62 Transaction ID : SB17.I2178 |
| City INDIANAPOLIS | State IN Zip Code 46202-3309 | |
| Purpose of Disbursement PAYROLL | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. STEVEN SHARP | | Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014 |
| Mailing Address 72 SHEILA LANE | | Amount of Each Disbursement this Period 289.50 Transaction ID : SB17.I2179 |
| City VALPARAISO | State IN Zip Code 46385 | |
| Purpose of Disbursement PAYROLL | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. JOSH WEBB | | Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014 |
| Mailing Address 6131 EAST STATE RD 38 | | Amount of Each Disbursement this Period 45.79 Transaction ID : SB17.I2180 |
| City NEW CASTLE | State IN Zip Code 47362-9594 | |
| Purpose of Disbursement PAYROLL | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 729.91 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 96 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. PAYCHEX | | Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014 |
| Mailing Address 9405 DELEGATES ROW | | Amount of Each Disbursement this Period 78.73 |
| City INDIANAPOLIS | State IN Zip Code 46240-3805 | |
| Purpose of Disbursement PAYROLL PROCESSING FEES | Category/Type | Transaction ID : SB17.I2175 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. PAYCHEX | | Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014 |
| Mailing Address 9405 DELEGATES ROW | | Amount of Each Disbursement this Period 452.25 |
| City INDIANAPOLIS | State IN Zip Code 46240-3805 | |
| Purpose of Disbursement PAYROLL TAXES | Category/Type | Transaction ID : SB17.I2176 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. JOSH TAULBEE | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address 804 E DUNN AVE. | | Amount of Each Disbursement this Period 75.00 |
| City MUNCIE | State IN Zip Code 47303 | |
| Purpose of Disbursement GAS REIMBURSEMENT | Category/Type | Transaction ID : SB17.I2216 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 605.98 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 97 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. CS KERN INC | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address 3401 SOUTH HAMILTON AVENUE | | Amount of Each Disbursement this Period 409.93 Transaction ID : SB17.I2185 |
| City MUNCIE State IN Zip Code 47302-9115 | Purpose of Disbursement FUNDRAISING INVITATIONS & REPLY CARDS | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. MESTA CONSULTING LLC | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address 12952 AMBERGATE DR. | | Amount of Each Disbursement this Period 4583.33 Transaction ID : SB17.I2220 |
| City FISHERS State IN Zip Code 46037 | Purpose of Disbursement FUNDRAISING CONSULTANT | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. RED GOLD INC. | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address 1500 TOMATO COUNTRY WAY | | Amount of Each Disbursement this Period 311.04 Transaction ID : SB17.I2219 |
| City ELWOOD State IN Zip Code 46036 | Purpose of Disbursement POSTAGE EXPENSE | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|----------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5304.30 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 98 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. HANCOCK COUNTY GOP | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address P.O. BOX 502 | | Amount of Each Disbursement this Period 275.00 Transaction ID : SB17.I2186 |
| City GREENFIELD | State IN | |
| Zip Code 46140-0502 | Purpose of Disbursement GOLF OUTING | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. SHELBY COUNTY GOP | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address 110 ST. MARY ST. | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.I2187 |
| City SHELBYVILLE | State IN | |
| Zip Code 46176-1142 | Purpose of Disbursement GOLF OUTING | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB | | Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014 |
| Mailing Address 300 1ST ST SE | | Amount of Each Disbursement this Period 999.14 Transaction ID : SB17.I2339 |
| City WASHINGTON | State DC | |
| Zip Code 20003-1801 | Purpose of Disbursement MEALS EXPENSE | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1774.14 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 99 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. HILTON HOTELS

Full Name (Last, First, Middle Initial)
Mailing Address 120 W MARKET ST

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement LODGING EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 18 / 2014

Amount of Each Disbursement this Period: 510.00

Transaction ID : SB17.I2342

B. HOUSE GIFT SHOP

Full Name (Last, First, Middle Initial)
Mailing Address LONGWORTH BUILDING, BASEMENT LEVEL

City WASHINGTON State DC Zip Code 20515-0001

Purpose of Disbursement GIFT EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 18 / 2014

Amount of Each Disbursement this Period: 106.20

Transaction ID : SB17.I2341

C. HOUSE GIFT SHOP

Full Name (Last, First, Middle Initial)
Mailing Address LONGWORTH BUILDING, BASEMENT LEVEL

City WASHINGTON State DC Zip Code 20515-0001

Purpose of Disbursement GIFT EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 21 / 2014

Amount of Each Disbursement this Period: 6.00

Transaction ID : SB17.I2451

SUBTOTAL of Disbursements This Page (optional) 622.20

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 100 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. QUICKBOOKS ONLINE | | Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014 |
| Mailing Address 2632 MARINE WAY | | Amount of Each Disbursement this Period 42.75 |
| City MOUNTAIN VIEW State CA Zip Code 94043-1126 | Purpose of Disbursement ACCOUNTING SOFTWARE | |
| Candidate Name | | Transaction ID : SB17.I2344 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. UNITED STATES POSTAL SERVICE | | Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014 |
| Mailing Address CIRCLE CITY STATION | | Amount of Each Disbursement this Period 15.40 |
| City INDIANAPOLIS State IN Zip Code 46202 | Purpose of Disbursement POSTAGE EXPENSE | |
| Candidate Name | | Transaction ID : SB17.I2452 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. AMAZON.COM | | Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014 |
| Mailing Address 440 TERRY AVE. | | Amount of Each Disbursement this Period 22.85 |
| City SEATTLE State WA Zip Code 98109-5210 | Purpose of Disbursement GIFT EXPENSE | |
| Candidate Name | | Transaction ID : SB17.I2345 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | |

| | |
|---|-------|
| SUBTOTAL of Disbursements This Page (optional)..... | 81.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 101 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. JOE RAILEY | | Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014 |
| Mailing Address 705 S CHERYL DR | | Amount of Each Disbursement this Period 91.54 Transaction ID : SB17.I2246 |
| City MUNCIE | State IN | |
| Zip Code 47304 | Purpose of Disbursement GAS & MEALS REIMBURSEMENT | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. STEVEN SHARP | | Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014 |
| Mailing Address 72 SHEILA LANE | | Amount of Each Disbursement this Period 359.66 Transaction ID : SB17.I2258 |
| City VALPARAISO | State IN | |
| Zip Code 46385 | Purpose of Disbursement SUPPLIES, GAS & PARKING REIMBURSEMENT | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. MESTA CONSULTING LLC | | Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014 |
| Mailing Address 12952 AMBERGATE DR. | | Amount of Each Disbursement this Period 3750.00 Transaction ID : SB17.I2251 |
| City FISHERS | State IN | |
| Zip Code 46037 | Purpose of Disbursement FUNDRAISING CONSULTANT | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4201.20 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 102 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

Full Name (Last, First, Middle Initial)
A. QUICK PANTRY

Mailing Address 715 W UNIVERSITY AVE.

City MUNCIE State IN Zip Code 47303

Purpose of Disbursement
GAS EXPENSE - PD BY S. SHARP

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 28 / 2014

Amount of Each Disbursement this Period
100.00

Transaction ID : SB17.I2260

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. SCOTT COUNTY REPUBLICAN PARTY

Mailing Address 311 S. BOND ST.

City SCOTTSBURG State IN Zip Code 47170-2125

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 28 / 2014

Amount of Each Disbursement this Period
250.00

Transaction ID : SB17.I2254

Full Name (Last, First, Middle Initial)
C. STAPLES

Mailing Address 6101 N. KEYSTONE

City INDIANAPOLIS State IN Zip Code 46220-2488

Purpose of Disbursement
OFFICE SUPPLIES - PD BY S. SHARP

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 28 / 2014

Amount of Each Disbursement this Period
47.38

Transaction ID : SB17.I2262

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 250.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 103 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. THE CANNON GROUP | | Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014 |
| Mailing Address 1301 K STREET NW SUITE 1050 E | | Amount of Each Disbursement this Period 607.26 Transaction ID : SB17.I2253 |
| City WASHINGTON State DC Zip Code 20005-3317 | Purpose of Disbursement FUNDRAISING EVENT EXPENSES | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. VERIZON WIRELESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014 |
| Mailing Address 140 WEST ST | | Amount of Each Disbursement this Period 50.24 Transaction ID : SB17.I2250 |
| City NEW YORK State NY Zip Code 10007-2141 | Purpose of Disbursement CELL PHONE EXPENSE | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. VILLAGE PANTRY | | Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014 |
| Mailing Address 1240 NW 5TH STREET | | Amount of Each Disbursement this Period 34.03 Transaction ID : SB17.I2248 [MEMO ITEM] |
| City RICHMOND State IN Zip Code 47374-2248 | Purpose of Disbursement GAS EXPENSE - PD BY J. RAILEY | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 657.50 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 104 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial) A. VILLAGE PANTRY | | Date of Disbursement |
| Mailing Address 1240 NW 5TH STREET | | M M / D D / Y Y Y Y 07 / 28 / 2014 |
| City RICHMOND | State IN | Zip Code 47374-2248 |
| Purpose of Disbursement GAS EXPENSE - PD BY S. SHARP | Amount of Each Disbursement this Period 32.33 | |
| Candidate Name | Transaction ID : SB17.I2263 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | [MEMO ITEM] | |

| | | |
|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial) B. DECATUR COUNTY GOLF COMMITTEE | | Date of Disbursement |
| Mailing Address P.O. BOX 181 | | M M / D D / Y Y Y Y 07 / 28 / 2014 |
| City GREENSBURG | State IN | Zip Code 47240-0181 |
| Purpose of Disbursement CONTRIBUTION | Amount of Each Disbursement this Period 300.00 | |
| Candidate Name | Transaction ID : SB17.I2255 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial) C. CMDI | | Date of Disbursement |
| Mailing Address 1593 SPRING HILL RD SUITE 400 | | M M / D D / Y Y Y Y 07 / 29 / 2014 |
| City TYSONS CORNER | State VA | Zip Code 22182 |
| Purpose of Disbursement CREDIT CARD PROCESSING FEES | Amount of Each Disbursement this Period 51.88 | |
| Candidate Name | Transaction ID : SB17.I2346 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 351.88 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 105 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. UNITED STATES POSTAL SERVICE | | Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014 |
| Mailing Address CIRCLE CITY STATION | | Amount of Each Disbursement this Period 147.00 |
| City INDIANAPOLIS | State IN Zip Code 46202 | |
| Purpose of Disbursement POSTAGE EXPENSE | Category/Type | Transaction ID : SB17.I2244 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. JOHNATHON B. HUSTON | | Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014 |
| Mailing Address 1608 N. NEW YORK AVE. | | Amount of Each Disbursement this Period 606.27 |
| City MUNCIE | State IN Zip Code 47304-2759 | |
| Purpose of Disbursement PAYROLL EXPENSE | Category/Type | Transaction ID : SB17.I2318 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. KELSEA NEAL | | Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014 |
| Mailing Address 126 E. ST. JOSEPH STREET APT. B | | Amount of Each Disbursement this Period 394.62 |
| City INDIANAPOLIS | State IN Zip Code 46202-3309 | |
| Purpose of Disbursement PAYROLL EXPENSE | Category/Type | Transaction ID : SB17.I2319 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1147.89 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 106 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. KYLE PIERCE | | Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014 |
| Mailing Address 14172 JASMINE COURT | | Amount of Each Disbursement this Period 2241.45 Transaction ID : SB17.I2320 |
| City FISHERS State IN Zip Code 46038 | Purpose of Disbursement PAYROLL EXPENSE | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. JOSH WEBB | | Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014 |
| Mailing Address 6131 EAST STATE RD 38 | | Amount of Each Disbursement this Period 45.80 Transaction ID : SB17.I2321 |
| City NEW CASTLE State IN Zip Code 47362-9594 | Purpose of Disbursement PAYROLL EXPENSE | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. PAYCHEX | | Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014 |
| Mailing Address 9405 DELEGATES ROW | | Amount of Each Disbursement this Period 76.63 Transaction ID : SB17.I2322 |
| City INDIANAPOLIS State IN Zip Code 46240-3805 | Purpose of Disbursement PAYROLL PROCESSING FEES | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2363.88 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 107 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. PAYCHEX | | Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014 |
| Mailing Address 9405 DELEGATES ROW | | Amount of Each Disbursement this Period 976.65 Transaction ID : SB17.I2323 |
| City INDIANAPOLIS State IN Zip Code 46240-3805 | Purpose of Disbursement PAYROLL TAXES | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. STAPLES | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014 |
| Mailing Address 6101 N. KEYSTONE | | Amount of Each Disbursement this Period 94.13 Transaction ID : SB17.I2265 |
| City INDIANAPOLIS State IN Zip Code 46220-2488 | Purpose of Disbursement OFFICE SUPPLIES | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. UNITED STATES POSTAL SERVICE | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014 |
| Mailing Address CIRCLE CITY STATION | | Amount of Each Disbursement this Period 19.60 Transaction ID : SB17.I2454 |
| City INDIANAPOLIS State IN Zip Code 46202 | Purpose of Disbursement POSTAGE EXPENSE | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|----------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1090.38 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 108 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS | | Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014 |
| Mailing Address PO BOX 53852 | | Amount of Each Disbursement this Period 145.10 Transaction ID : SB17.I2348 |
| City PHOENIX | State AZ | |
| Zip Code 85072 | Purpose of Disbursement CREDIT CARD PROCESSING FEES | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. CMDI | | Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014 |
| Mailing Address 1593 SPRING HILL RD SUITE 400 | | Amount of Each Disbursement this Period 798.00 Transaction ID : SB17.I2349 |
| City TYSONS CORNER | State VA | |
| Zip Code 22182 | Purpose of Disbursement CRIMSON SOFTWARE EXPENSE | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. THE GARRISON | | Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014 |
| Mailing Address 6002 N. POST ROAD | | Amount of Each Disbursement this Period 280.83 Transaction ID : SB17.I2353 |
| City INDIANAPOLIS | State IN | |
| Zip Code 46216 | Purpose of Disbursement GOLF FEES | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1223.93 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 109 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS | | Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014 |
| Mailing Address 140 WEST ST | | Amount of Each Disbursement this Period 136.67 |
| City NEW YORK | State NY | |
| Zip Code 10007-2141 | Purpose of Disbursement CELL PHONE EXPENSE | Transaction ID : SB17.I2347 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. JOE RAILEY | | Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014 |
| Mailing Address 705 S CHERYL DR | | Amount of Each Disbursement this Period 91.24 |
| City MUNCIE | State IN | |
| Zip Code 47304 | Purpose of Disbursement GAS REIMBURSEMENT | Transaction ID : SB17.I2276 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. TRACY SMITH | | Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014 |
| Mailing Address 3301 N. LINCOLN HILL RD. | | Amount of Each Disbursement this Period 630.00 |
| City MARTINSVILLE | State IN | |
| Zip Code 46151-6349 | Purpose of Disbursement ACCOUNTING CONSULTANT | Transaction ID : SB17.I2273 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 857.91 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 110 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. TRACY SMITH | | Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014 |
| Mailing Address 3301 N. LINCOLN HILL RD. | | Amount of Each Disbursement this Period 32.00 |
| City MARTINSVILLE | State IN | |
| Zip Code 46151-6349 | Purpose of Disbursement SHIPPING REIMBURSEMENT | Transaction ID : SB17.I2274 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. ARMY NAVY COUNTRY CLUB | | Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014 |
| Mailing Address 1700 ARMY NAVY DR. | | Amount of Each Disbursement this Period 650.18 |
| City ARLINGTON | State VA | |
| Zip Code 22202 | Purpose of Disbursement GOLF OUTING | Transaction ID : SB17.I2269 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. HALLOWELL CONSULTING, LLC | | Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014 |
| Mailing Address 342 EAST ARCH STREET | | Amount of Each Disbursement this Period 2500.00 |
| City INDIANAPOLIS | State IN | |
| Zip Code 46202-3354 | Purpose of Disbursement POLITICAL CONSULTING FEES | Transaction ID : SB17.I2270 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 3182.18 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 111 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. INDIANA FEDERATION OF REPUBLICAN WOMEN | | Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014 |
| Mailing Address 47 S. MERIDIAN STREET SUITE 200 | | Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.I2268 |
| City INDIANAPOLIS | State IN Zip Code 46204 | |
| Purpose of Disbursement CONTRIBUTION | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. MERCHANT ESOLUTIONS | | Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014 |
| Mailing Address 3600 BRIDGE PARKWAY SUITE 102 | | Amount of Each Disbursement this Period 69.13 Transaction ID : SB17.I2354 |
| City REDWOOD CITY | State CA Zip Code 94065 | |
| Purpose of Disbursement CREDIT CARD PROCESSING FEES | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. SHELL | | Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014 |
| Mailing Address 104 S MAIN ST | | Amount of Each Disbursement this Period 41.94 Transaction ID : SB17.I2277 [MEMO ITEM] |
| City RUSHVILLE | State IN Zip Code 46173-1929 | |
| Purpose of Disbursement GAS EXPENSE - PD BY J. RAILEY | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 319.13 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 112 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. THE CANNON GROUP | | Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014 |
| Mailing Address 1301 K STREET NW SUITE 1050 E | | Amount of Each Disbursement this Period 4000.00 |
| City WASHINGTON State DC Zip Code 20005-3317 | Purpose of Disbursement FUNDRAISING CONSULTANT | |
| Candidate Name | Category/Type | Transaction ID : SB17.I2271 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: District: | | |

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|--|---|---|
| Full Name (Last, First, Middle Initial) B. THE CANNON GROUP | | Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014 |
| Mailing Address 1301 K STREET NW SUITE 1050 E | | Amount of Each Disbursement this Period 3254.12 |
| City WASHINGTON State DC Zip Code 20005-3317 | Purpose of Disbursement FUNDRAISING EVENT EXPENSES | |
| Candidate Name | Category/Type | Transaction ID : SB17.I2272 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. VILLAGE PANTRY | | Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014 |
| Mailing Address 1240 NW 5TH STREET | | Amount of Each Disbursement this Period 49.30 |
| City RICHMOND State IN Zip Code 47374-2248 | Purpose of Disbursement GAS EXPENSE - PD BY J. RAILEY | |
| Candidate Name | Category/Type | Transaction ID : SB17.I2278 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 7254.12 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 113 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. MESTA CONSULTING LLC | | Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014 |
| Mailing Address 12952 AMBERGATE DR. | | Amount of Each Disbursement this Period 4583.33 |
| City FISHERS State IN Zip Code 46037 | Purpose of Disbursement FUNDRAISING CONSULTANT Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Transaction ID : SB17.I2280 |
| State: District: | | |

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|--|---|---|
| Full Name (Last, First, Middle Initial) B. INDIANA NEWSPAPERS | | Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014 |
| Mailing Address P.O. BOX 145 | | Amount of Each Disbursement this Period 14.90 |
| City INDIANAPOLIS State IN Zip Code 46206-0145 | Purpose of Disbursement MONTHLY SUBSCRIPTION Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Transaction ID : SB17.I2355 |
| State: District: | | |

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|--|---|---|
| Full Name (Last, First, Middle Initial) C. KYLE PIERCE | | Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014 |
| Mailing Address 14172 JASMINE COURT | | Amount of Each Disbursement this Period 69.31 |
| City FISHERS State IN Zip Code 46038 | Purpose of Disbursement SUPPLIES & GAS REIMBURSEMENT Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Transaction ID : SB17.I2283 |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 4667.54 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 114 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. STEVEN SHARP | | Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014 |
| Mailing Address 72 SHEILA LANE | | Amount of Each Disbursement this Period 970.01 Transaction ID : SB17.I2287 |
| City VALPARAISO State IN Zip Code 46385 | Purpose of Disbursement SUPPLIES, GAS & POSTAGE REIMBURSEMENT | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|--|--|---|
| Full Name (Last, First, Middle Initial) B. CONCEPT PRINTS INC. | | Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014 |
| Mailing Address 6707 GUION RD. | | Amount of Each Disbursement this Period 802.50 Transaction ID : SB17.I2286 |
| City INDIANAPOLIS State IN Zip Code 46268 | Purpose of Disbursement T-SHIRTS | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|--|--|--|
| Full Name (Last, First, Middle Initial) C. QUICK PANTRY | | Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014 |
| Mailing Address 715 W UNIVERSITY AVE. | | Amount of Each Disbursement this Period 88.25 Transaction ID : SB17.I2289 [MEMO ITEM] |
| City MUNCIE State IN Zip Code 47303 | Purpose of Disbursement GAS EXPENSE - PD BY S. SHARP | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 970.01 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 115 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

Full Name (Last, First, Middle Initial)
A. STAPLES

Mailing Address 6101 N. KEYSTONE

City INDIANAPOLIS State IN Zip Code 46220-2488

Purpose of Disbursement OFFICE SUPPLIES - PD BY S. SHARP

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 13 / 2014

Amount of Each Disbursement this Period: 32.09

Transaction ID : SB17.I2291

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. UNITED STATES POSTAL SERVICE

Mailing Address CIRCLE CITY STATION

City INDIANAPOLIS State IN Zip Code 46202

Purpose of Disbursement POSTAGE EXPENSE - PD BY S. SHARP

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 13 / 2014

Amount of Each Disbursement this Period: 18.34

Transaction ID : SB17.I2292

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. JOHNATHON B. HUSTON

Mailing Address 1608 N. NEW YORK AVE.

City MUNCIE State IN Zip Code 47304-2759

Purpose of Disbursement PAYROLL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 15 / 2014

Amount of Each Disbursement this Period: 606.26

Transaction ID : SB17.I2326

SUBTOTAL of Disbursements This Page (optional) 606.26

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 116 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. KELSEA NEAL | | Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014 |
| Mailing Address 126 E. ST. JOSEPH STREET APT. B | | Amount of Each Disbursement this Period 394.62 Transaction ID : SB17.I2327 |
| City INDIANAPOLIS | State IN Zip Code 46202-3309 | |
| Purpose of Disbursement PAYROLL EXPENSE | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. KYLE PIERCE | | Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014 |
| Mailing Address 14172 JASMINE COURT | | Amount of Each Disbursement this Period 416.45 Transaction ID : SB17.I2328 |
| City FISHERS | State IN Zip Code 46038 | |
| Purpose of Disbursement PAYROLL EXPENSE | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. JOSH WEBB | | Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014 |
| Mailing Address 6131 EAST STATE RD 38 | | Amount of Each Disbursement this Period 45.79 Transaction ID : SB17.I2329 |
| City NEW CASTLE | State IN Zip Code 47362-9594 | |
| Purpose of Disbursement PAYROLL EXPENSE | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 856.86 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 117 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. PAYCHEX | | Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014 |
| Mailing Address 9405 DELEGATES ROW | | Amount of Each Disbursement this Period 469.49 Transaction ID : SB17.I2324 |
| City INDIANAPOLIS State IN Zip Code 46240-3805 | Purpose of Disbursement PAYROLL TAXES | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. PAYCHEX | | Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014 |
| Mailing Address 9405 DELEGATES ROW | | Amount of Each Disbursement this Period 69.73 Transaction ID : SB17.I2325 |
| City INDIANAPOLIS State IN Zip Code 46240-3805 | Purpose of Disbursement PAYROLL PROCESSING FEES | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. AMTRAK | | Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014 |
| Mailing Address 50 MASSACHUSETTS AVE NE | | Amount of Each Disbursement this Period 714.00 Transaction ID : SB17.I2358 |
| City WASHINGTON State DC Zip Code 20002 | Purpose of Disbursement TRAVEL EXPENSE | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1253.22 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 118 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|-------------------------|--|
| Full Name (Last, First, Middle Initial) A. CMDI | | Date of Disbursement MM / DD / YYYY 08 / 18 / 2014 |
| Mailing Address 1593 SPRING HILL RD SUITE 400 | | Amount of Each Disbursement this Period 99.00 |
| City TYSONS CORNER | State VA Zip Code 22182 | |
| Purpose of Disbursement MONTHLY SUBSCRIPTION FEE | Category/Type | Transaction ID : SB17.I2356 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: District: | | |

| | | |
|--|------------------------------|--|
| Full Name (Last, First, Middle Initial) B. QUICKBOOKS ONLINE | | Date of Disbursement MM / DD / YYYY 08 / 20 / 2014 |
| Mailing Address 2632 MARINE WAY | | Amount of Each Disbursement this Period 42.75 |
| City MOUNTAIN VIEW | State CA Zip Code 94043-1126 | |
| Purpose of Disbursement ACCOUNTING SOFTWARE | Category/Type | Transaction ID : SB17.I2361 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: District: | | |

| | | |
|--|------------------------------|--|
| Full Name (Last, First, Middle Initial) C. KELSEA NEAL | | Date of Disbursement MM / DD / YYYY 08 / 21 / 2014 |
| Mailing Address 126 E. ST. JOSEPH STREET APT. B | | Amount of Each Disbursement this Period 48.00 |
| City INDIANAPOLIS | State IN Zip Code 46202-3309 | |
| Purpose of Disbursement SHIPPING REIMBURSEMENT | Category/Type | Transaction ID : SB17.I2309 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: District: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 189.75 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 119 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. KYLE PIERCE | | Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014 |
| Mailing Address 14172 JASMINE COURT | | Amount of Each Disbursement this Period 106.95 |
| City FISHERS | State IN | |
| Zip Code 46038 | Purpose of Disbursement TONER REIMBURSEMENT | Transaction ID : SB17.I2311 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. JOSH TAULBEE | | Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014 |
| Mailing Address 804 E DUNN AVE. | | Amount of Each Disbursement this Period 121.00 |
| City MUNCIE | State IN | |
| Zip Code 47303 | Purpose of Disbursement GAS REIMBURSEMENT | Transaction ID : SB17.I2314 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. MIDWEST COMMUNICATIONS GROUP | | Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014 |
| Mailing Address P.O. BOX 441 | | Amount of Each Disbursement this Period 13544.49 |
| City FRANKLIN | State IN | |
| Zip Code 46131-0441 | Purpose of Disbursement PRINTING EXPENSES | Transaction ID : SB17.I2317 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|-----------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 13772.44 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 120 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. SPEEDWAY | | Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014 |
| Mailing Address 402 W MAIN ST | | Amount of Each Disbursement this Period 30.00 |
| City GREENSBURG | State IN Zip Code 47240-1507 | |
| Purpose of Disbursement GAS EXPENSE - PD BY J. TAULBEE | | Transaction ID : SB17.I2316 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | Category/Type | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. STAPLES | | Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014 |
| Mailing Address 6101 N. KEYSTONE | | Amount of Each Disbursement this Period 106.95 |
| City INDIANAPOLIS | State IN Zip Code 46220-2488 | |
| Purpose of Disbursement TONER EXPENSE - PD BY K. PIERCE | | Transaction ID : SB17.I2312 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | Category/Type | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Z-49 PRODUCTIONS | | Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014 |
| Mailing Address 5 KIM CT. | | Amount of Each Disbursement this Period 556.80 |
| City ELKHART | State IN Zip Code 46514 | |
| Purpose of Disbursement VIDEO RECORDING OF EVENT | | Transaction ID : SB17.I2313 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 556.80 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 121 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. JOHNATHON B. HUSTON | | Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014 |
| Mailing Address 1608 N. NEW YORK AVE. | | Amount of Each Disbursement this Period 1322.84 |
| City MUNCIE State IN Zip Code 47304-2759 | Purpose of Disbursement GAS, POSTAGE, MEALS, SUPPLIES, PRINTING, EQUIPMENT REIMBURSEMENT | |
| Candidate Name | | Transaction ID : SB17.I2294 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. BEST BUY | | Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014 |
| Mailing Address 3301 N. MARLEON DR. | | Amount of Each Disbursement this Period 286.57 |
| City MUNCIE State IN Zip Code 47304-8894 | Purpose of Disbursement OFFICE EQUIPMENT - PD BY J. HUSTON | |
| Candidate Name | | Transaction ID : SB17.I2295 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | [MEMO ITEM] |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. CVS PHARMARY | | Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014 |
| Mailing Address 200 S HARRISON ST | | Amount of Each Disbursement this Period 6.39 |
| City SHELBYVILLE State IN Zip Code 46176-2160 | Purpose of Disbursement OFFICE SUPPLIES - PD BY J. HUSTON | |
| Candidate Name | | Transaction ID : SB17.I2296 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | [MEMO ITEM] |

| | |
|---|----------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1322.84 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 122 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. SHELL | | Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014 |
| Mailing Address 104 S MAIN ST | | Amount of Each Disbursement this Period 160.38 |
| City RUSHVILLE | State IN Zip Code 46173-1929 | |
| Purpose of Disbursement GAS EXPENSE - PD BY J. HUSTON | | Transaction ID : SB17.I2300 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | Category/Type | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. SPEEDWAY | | Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014 |
| Mailing Address 402 W MAIN ST | | Amount of Each Disbursement this Period 80.10 |
| City GREENSBURG | State IN Zip Code 47240-1507 | |
| Purpose of Disbursement GAS EXPENSE - PD BY J. HUSTON | | Transaction ID : SB17.I2307 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | Category/Type | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. UNITED STATES POSTAL SERVICE | | Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014 |
| Mailing Address CIRCLE CITY STATION | | Amount of Each Disbursement this Period 323.26 |
| City INDIANAPOLIS | State IN Zip Code 46202 | |
| Purpose of Disbursement POSTAGE EXPENSE - PD BY J. HUSTON | | Transaction ID : SB17.I2303 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | Category/Type | |

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|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 123 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. VILLAGE PANTRY | | Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014 |
| Mailing Address 1240 NW 5TH STREET | | Amount of Each Disbursement this Period 45.49 |
| City RICHMOND | State IN Zip Code 47374-2248 | |
| Purpose of Disbursement GAS EXPENSE - PD BY J. HUSTON | | Transaction ID : SB17.I2302 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | Category/Type | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB | | Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014 |
| Mailing Address 300 1ST ST SE | | Amount of Each Disbursement this Period 457.42 |
| City WASHINGTON | State DC Zip Code 20003-1801 | |
| Purpose of Disbursement MEALS EXPENSE | | Transaction ID : SB17.I2362 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | Category/Type | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. CMDI | | Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014 |
| Mailing Address 1593 SPRING HILL RD SUITE 400 | | Amount of Each Disbursement this Period 26.25 |
| City TYSONS CORNER | State VA Zip Code 22182 | |
| Purpose of Disbursement CREDIT CARD PROCESSING FEES | | Transaction ID : SB17.I2357 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | Category/Type | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 483.67 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 124 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

Full Name (Last, First, Middle Initial)
A. DELUXE BILLING CHECKS

Mailing Address 3680 VICTORIA ST. N.

City SHOREVIEW State MN Zip Code 55126-2906

Purpose of Disbursement CHECKS & DEPOSIT SLIPS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 27 / 2014

Amount of Each Disbursement this Period: 201.68

Transaction ID : SB17.I2366

Full Name (Last, First, Middle Initial)
B. JOHNATHON B. HUSTON

Mailing Address 1608 N. NEW YORK AVE.

City MUNCIE State IN Zip Code 47304-2759

Purpose of Disbursement PAYROLL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 29 / 2014

Amount of Each Disbursement this Period: 606.27

Transaction ID : SB17.I2333

Full Name (Last, First, Middle Initial)
C. KELSEA NEAL

Mailing Address 126 E. ST. JOSEPH STREET
APT. B

City INDIANAPOLIS State IN Zip Code 46202-3309

Purpose of Disbursement PAYROLL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 29 / 2014

Amount of Each Disbursement this Period: 394.62

Transaction ID : SB17.I2332

SUBTOTAL of Disbursements This Page (optional)..... 1202.57

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 125 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. KYLE PIERCE | | Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014 |
| Mailing Address 14172 JASMINE COURT | | Amount of Each Disbursement this Period 416.45 Transaction ID : SB17.I2331 |
| City FISHERS State IN Zip Code 46038 | Purpose of Disbursement PAYROLL EXPENSE | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. JOSH WEBB | | Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014 |
| Mailing Address 6131 EAST STATE RD 38 | | Amount of Each Disbursement this Period 45.80 Transaction ID : SB17.I2330 |
| City NEW CASTLE State IN Zip Code 47362-9594 | Purpose of Disbursement PAYROLL EXPENSE | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. PAYCHEX | | Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014 |
| Mailing Address 9405 DELEGATES ROW | | Amount of Each Disbursement this Period 469.47 Transaction ID : SB17.I2334 |
| City INDIANAPOLIS State IN Zip Code 46240-3805 | Purpose of Disbursement PAYROLL TAXES | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 931.72 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 126 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. PAYCHEX | | Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014 |
| Mailing Address 9405 DELEGATES ROW | | Amount of Each Disbursement this Period 69.73 |
| City INDIANAPOLIS State IN Zip Code 46240-3805 | Purpose of Disbursement PAYROLL PROCESSING FEES | |
| Candidate Name | Category/Type | Transaction ID : SB17.I2335 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. STAPLES | | Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014 |
| Mailing Address 6101 N. KEYSTONE | | Amount of Each Disbursement this Period 269.82 |
| City INDIANAPOLIS State IN Zip Code 46220-2488 | Purpose of Disbursement OFFICE SUPPLIES | |
| Candidate Name | Category/Type | Transaction ID : SB17.I2433 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. VERIZON WIRELESS | | Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014 |
| Mailing Address 140 WEST ST | | Amount of Each Disbursement this Period 50.08 |
| City NEW YORK State NY Zip Code 10007-2141 | Purpose of Disbursement CELL PHONE EXPENSE | |
| Candidate Name | Category/Type | Transaction ID : SB17.I2416 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

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|---|---------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 389.63 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 127 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. WALDORF ASTORIA | | Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014 |
| Mailing Address 301 PARK AVE | | Amount of Each Disbursement this Period 960.60 Transaction ID : SB17.I2419 |
| City NEW YORK | State NY | |
| Zip Code 10022 | Purpose of Disbursement LODGING EXPENSE | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. JOHNATHON B. HUSTON | | Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014 |
| Mailing Address 1608 N. NEW YORK AVE. | | Amount of Each Disbursement this Period 116.42 Transaction ID : SB17.I2434 |
| City MUNCIE | State IN | |
| Zip Code 47304-2759 | Purpose of Disbursement GAS REIMBURSEMENT | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. TRACY SMITH | | Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014 |
| Mailing Address 3301 N. LINCOLN HILL RD. | | Amount of Each Disbursement this Period 570.00 Transaction ID : SB17.I2437 |
| City MARTINSVILLE | State IN | |
| Zip Code 46151-6349 | Purpose of Disbursement ACCOUNTING SERVICES | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1647.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 128 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. CMDI | | Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014 |
| Mailing Address 1593 SPRING HILL RD SUITE 400 | | Amount of Each Disbursement this Period 1950.00 |
| City TYSONS CORNER | State VA Zip Code 22182 | |
| Purpose of Disbursement CRIMSON PROGRAMMING | Category/Type | Transaction ID : SB17.I2423 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. MERCHANT ESOLUTIONS | | Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014 |
| Mailing Address 3600 BRIDGE PARKWAY SUITE 102 | | Amount of Each Disbursement this Period 65.50 |
| City REDWOOD CITY | State CA Zip Code 94065 | |
| Purpose of Disbursement CREDIT CARD PROCESSING FEES | Category/Type | Transaction ID : SB17.I2421 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. MESTA CONSULTING LLC | | Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014 |
| Mailing Address 12952 AMBERGATE DR. | | Amount of Each Disbursement this Period 4583.33 |
| City FISHERS | State IN Zip Code 46037 | |
| Purpose of Disbursement FUNDRAISING CONSULTING | Category/Type | Transaction ID : SB17.I2439 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 6598.83 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 129 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. SHELL | | Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014 |
| Mailing Address 104 S MAIN ST | | Amount of Each Disbursement this Period 73.33 |
| City RUSHVILLE | State IN Zip Code 46173-1929 | |
| Purpose of Disbursement GAS EXPENSE - PD BY J. HUSTON | | Transaction ID : SB17.I2436 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | Category/Type | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. TIME-KEEPERS PRODUCTIONS | | Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014 |
| Mailing Address 337 COLUMBIA STREET | | Amount of Each Disbursement this Period 229.99 |
| City LAFAYETTE | State IN Zip Code 47901-1315 | |
| Purpose of Disbursement VIDEO EXPENSE | | Transaction ID : SB17.I2438 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | Category/Type | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. VILLAGE PANTRY | | Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014 |
| Mailing Address 1240 NW 5TH STREET | | Amount of Each Disbursement this Period 43.09 |
| City RICHMOND | State IN Zip Code 47374-2248 | |
| Purpose of Disbursement GAS EXPENSE - PD BY J. HUSTON | | Transaction ID : SB17.I2435 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | Category/Type | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 229.99 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 130 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address 140 WEST ST | | Amount of Each Disbursement this Period 136.64 |
| City NEW YORK | State NY | |
| Zip Code 10007-2141 | Purpose of Disbursement CELL PHONE EXPENSE | Transaction ID : SB17.I2417 |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. CONSERVATIVE VICTORY FUND | | Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014 |
| Mailing Address 801 NORTH PITT STREET SUITE 115 | | Amount of Each Disbursement this Period 345.00 |
| City ALEXANDRIA | State VA | |
| Zip Code 22314-1783 | Purpose of Disbursement IN-KIND CONTRIBUTION | Transaction ID : SB17.4868 |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | CREATING EVENT INVITATIONS |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. CMDI | | Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014 |
| Mailing Address 1593 SPRING HILL RD SUITE 400 | | Amount of Each Disbursement this Period 2.50 |
| City TYSONS CORNER | State VA | |
| Zip Code 22182 | Purpose of Disbursement CREDIT CARD PROCESSING FEE | Transaction ID : SB17.I2424 |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 484.14 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 131 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. UNITED STATES POSTAL SERVICE | | Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014 |
| Mailing Address CIRCLE CITY STATION | | Amount of Each Disbursement this Period 21.90 |
| City INDIANAPOLIS State IN Zip Code 46202 | Purpose of Disbursement POSTAGE EXPENSE | |
| Candidate Name | Category/Type | Transaction ID : SB17.I2456 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. INDIANA NEWSPAPERS | | Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014 |
| Mailing Address P.O. BOX 145 | | Amount of Each Disbursement this Period 14.90 |
| City INDIANAPOLIS State IN Zip Code 46206-0145 | Purpose of Disbursement MONTHLY SUBSCRIPTION EXPENSE | |
| Candidate Name | Category/Type | Transaction ID : SB17.I2425 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. CMDI | | Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014 |
| Mailing Address 1593 SPRING HILL RD SUITE 400 | | Amount of Each Disbursement this Period 7.85 |
| City TYSONS CORNER State VA Zip Code 22182 | Purpose of Disbursement CREDIT CARD PROCESSING FEES | |
| Candidate Name | Category/Type | Transaction ID : SB17.I2441 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

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| SUBTOTAL of Disbursements This Page (optional) | 44.65 |
| TOTAL This Period (last page this line number only) | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 132 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. JOHNATHON B. HUSTON | | Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014 |
| Mailing Address 1608 N. NEW YORK AVE. | | Amount of Each Disbursement this Period 606.26 Transaction ID : SB17.I2428 |
| City MUNCIE | State IN | |
| Zip Code 47304-2759 | Purpose of Disbursement PAYROLL EXPENSE | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. KELSEA NEAL | | Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014 |
| Mailing Address 126 E. ST. JOSEPH STREET APT. B | | Amount of Each Disbursement this Period 394.62 Transaction ID : SB17.I2429 |
| City INDIANAPOLIS | State IN | |
| Zip Code 46202-3309 | Purpose of Disbursement PAYROLL EXPENSE | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. JOSH WEBB | | Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014 |
| Mailing Address 6131 EAST STATE RD 38 | | Amount of Each Disbursement this Period 291.35 Transaction ID : SB17.I2430 |
| City NEW CASTLE | State IN | |
| Zip Code 47362-9594 | Purpose of Disbursement PAYROLL EXPENSE | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1292.23 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 133 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. PAYCHEX | | Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014 |
| Mailing Address 9405 DELEGATES ROW | | Amount of Each Disbursement this Period 418.88 |
| City INDIANAPOLIS State IN Zip Code 46240-3805 | Purpose of Disbursement PAYROLL TAXES | |
| Candidate Name | | Transaction ID : SB17.I2431 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. PAYCHEX | | Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014 |
| Mailing Address 9405 DELEGATES ROW | | Amount of Each Disbursement this Period 69.73 |
| City INDIANAPOLIS State IN Zip Code 46240-3805 | Purpose of Disbursement PAYROLL PROCESSING FEES | |
| Candidate Name | | Transaction ID : SB17.I2432 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | |

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|--|--|--|
| Full Name (Last, First, Middle Initial) C. UNITED STATES POSTAL SERVICE | | Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014 |
| Mailing Address CIRCLE CITY STATION | | Amount of Each Disbursement this Period 16.90 |
| City INDIANAPOLIS State IN Zip Code 46202 | Purpose of Disbursement POSTAGE EXPENSE | |
| Candidate Name | | Transaction ID : SB17.I2450 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 505.51 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 134 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. CMDI | | Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014 |
| Mailing Address 1593 SPRING HILL RD SUITE 400 | | Amount of Each Disbursement this Period 99.00 |
| City TYSONS CORNER | State VA Zip Code 22182 | |
| Purpose of Disbursement MONTHLY SUBSCRIPTION EXPENSE | Category/Type | Transaction ID : SB17.I2442 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. HALLOWELL CONSULTING, LLC | | Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014 |
| Mailing Address 342 EAST ARCH STREET | | Amount of Each Disbursement this Period 2500.00 |
| City INDIANAPOLIS | State IN Zip Code 46202-3354 | |
| Purpose of Disbursement POLITICAL CONSULTING FEES | Category/Type | Transaction ID : SB17.I2410 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. HALLOWELL CONSULTING, LLC | | Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014 |
| Mailing Address 342 EAST ARCH STREET | | Amount of Each Disbursement this Period 3126.66 |
| City INDIANAPOLIS | State IN Zip Code 46202-3354 | |
| Purpose of Disbursement FACEBOOK ADS | Category/Type | Transaction ID : SB17.I2411 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5725.66 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 135 OF 146 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. THE CANNON GROUP | | Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014 |
| Mailing Address 1301 K STREET NW SUITE 1050 E | | Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.I2412 |
| City WASHINGTON State DC Zip Code 20005-3317 | Purpose of Disbursement FUNDRAISING CONSULTANT | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. STEVEN SHARP | | Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014 |
| Mailing Address 72 SHEILA LANE | | Amount of Each Disbursement this Period 115.09 Transaction ID : SB17.I2444 |
| City VALPARAISO State IN Zip Code 46385 | Purpose of Disbursement SUPPLIES & POSTAGE REIMBURSEMENT | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. MCKIBBEN PHOTOGRAPHY | | Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014 |
| Mailing Address 5408 WEST WIND LANE #2B | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.I2415 |
| City INDIANAPOLIS State IN Zip Code 46250 | Purpose of Disbursement EVENT PHOTOGRAPHY | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 4615.09 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 136 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | | |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) A. UNITED STATES POSTAL SERVICE | | | Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014 |
| Mailing Address CIRCLE CITY STATION | | | Amount of Each Disbursement this Period 4.70 |
| City INDIANAPOLIS | State IN | Zip Code 46202 | |
| Purpose of Disbursement POSTAGE EXPENSE - PD BY S. SHARP | | Category/ Type | Transaction ID : SB17.I2446 [MEMO ITEM] |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: _____ | District: _____ | | |

| | | | |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) B. CMDI | | | Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014 |
| Mailing Address 1593 SPRING HILL RD SUITE 400 | | | Amount of Each Disbursement this Period 798.00 |
| City TYSONS CORNER | State VA | Zip Code 22182 | |
| Purpose of Disbursement MONTHLY CRIMSON SOFTWARE EXPENSE | | Category/ Type | Transaction ID : SB17.I2422 |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: _____ | District: _____ | | |

| | | | |
|---|--|------------------------|---|
| Full Name (Last, First, Middle Initial) C. DELAWARE COUNTY REPUBLICAN PARTY | | | Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014 |
| Mailing Address 301 W MAIN STREET | | | Amount of Each Disbursement this Period 400.00 |
| City MUNCIE | State IN | Zip Code 47305-1614 | |
| Purpose of Disbursement RENT EXPENSE | | Category/ Type | Transaction ID : SB17.I2413 |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: _____ | District: _____ | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1198.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 137 OF 146 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. TRACTOR SUPPLY CO | | Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014 |
| Mailing Address 8135 BROOKVILLE ROAD | | Amount of Each Disbursement this Period 1380.26 |
| City INDIANAPOLIS | State IN Zip Code 46239-8907 | |
| Purpose of Disbursement SIGN SUPPLIES | Category/Type | Transaction ID : SB17.I2443 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. CMDI | | Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014 |
| Mailing Address 1593 SPRING HILL RD SUITE 400 | | Amount of Each Disbursement this Period 57.50 |
| City TYSONS CORNER | State VA Zip Code 22182 | |
| Purpose of Disbursement CREDIT CARD PROCESSING FEES | Category/Type | Transaction ID : SB17.I2447 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State Zip Code | |
| Purpose of Disbursement | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1437.76 |
| TOTAL This Period (last page this line number only)..... | 105322.58 |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | |
|---|---|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 138 OF 146 |
| | <input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

Full Name (Last, First, Middle Initial)
A. INDIANA REPUBLICAN STATE COMMITTEE

Mailing Address 47 S. MERIDIAN ST. STE. 200

City INDIANAPOLIS State IN Zip Code 46204-3557

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 10 / 2014

Amount of Each Disbursement this Period: 6250.00

Transaction ID : SB18.I2167

Full Name (Last, First, Middle Initial)
B. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 20100.00

Transaction ID : SB18.I2184

Full Name (Last, First, Middle Initial)
C. INDIANA REPUBLICAN STATE COMMITTEE

Mailing Address 47 S. MERIDIAN ST. STE. 200

City INDIANAPOLIS State IN Zip Code 46204-3557

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 08 / 2014

Amount of Each Disbursement this Period: 6250.00

Transaction ID : SB18.I2281

SUBTOTAL of Disbursements This Page (optional) 32600.00

TOTAL This Period (last page this line number only) 32600.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|--------------------------------------|------------------------------------|-------------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 139 OF 146 | |
| | <input type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input checked="" type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

A. BLUM FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 2728 ASBURY ROAD
SUITE 400

City DEBUQUE State IA Zip Code 52001

Purpose of Disbursement CONTRIBUTION

Candidate Name ROD BLUM

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: IA District: 01

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB21.I2224

B. BOBBY SCHILLING FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 367 AVENUE OF THE CITIES
SUITE D

City EAST MOLINE State IL Zip Code 61244

Purpose of Disbursement CONTRIBUTION

Candidate Name BOBBY SCHILLING

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: IL District: 17

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB21.I2240

C. CARL DEMAIO FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 9625 BLACK MOUNTAIN RD

City SAN DIEGO State CA Zip Code 92107

Purpose of Disbursement CONTRIBUTION

Candidate Name CARL DEMAIO

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: CA District: 52

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB21.I2237

SUBTOTAL of Disbursements This Page (optional) 1500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|--------------------------------------|------------------------------------|-------------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 140 OF 146 | |
| | <input type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input checked="" type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. DOUG OSE FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address 5046 SUNRISE BLVD | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2234 |
| City FAIR OAKS | State CA | |
| Zip Code 95628 | Purpose of Disbursement CONTRIBUTION | Category/ Type |
| Candidate Name DOUG OSE | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: CA District: 07 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. ELISE FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address 1006 PENDLETON STREET | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2230 |
| City ALEXANDRIA | State VA | |
| Zip Code 22314 | Purpose of Disbursement CONTRIBUTION | Category/ Type |
| Candidate Name ELISE STEFANIK | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: NY District: 21 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. FRENCH HILL FOR ARKANSAS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address PO BOX 7841 | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2222 |
| City LITTLE ROCK | State AR | |
| Zip Code 77217 | Purpose of Disbursement CONTRIBUTION | Category/ Type |
| Candidate Name FRENCH HILL | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: AR District: 02 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1500.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 141 OF 146 | | | |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

Full Name (Last, First, Middle Initial)
A. FRIENDS OF NAN HAYWORTH

Mailing Address P.O. BOX 394

City FISHKILL State NY Zip Code 12524

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB21.I2229

Full Name (Last, First, Middle Initial)
B. FRIENDS OF DAN LOGUE FOR CONGRESS

Mailing Address 244 14TH PLACE NE SUITE 2

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement CONTRIBUTION

Candidate Name DAN LOGUE

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: CA District: 03

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB21.I2233

Full Name (Last, First, Middle Initial)
C. GORELL FOR CONGRESS

Mailing Address 1305 DEL NORTE ROAD SUITE 105

City CAMARILLO State CA Zip Code 93010

Purpose of Disbursement CONTRIBUTION

Candidate Name JEFF GORRELL

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: CA District: 26

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB21.I2235

SUBTOTAL of Disbursements This Page (optional)..... 1500.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|--------------------------------------|------------------------------------|-------------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 142 OF 146 | |
| | <input type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input checked="" type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. HURD FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address 526 6TH STREET SE | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2232 |
| City WASHINGTON | State DC | |
| Zip Code 20003 | Purpose of Disbursement CONTRIBUTION | Category/ Type |
| Candidate Name WILL HURD | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: TX District: 23 | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. KATKO FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address 5407 ANVIL DR. | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2231 |
| City CAMILLUS | State NY | |
| Zip Code 13031 | Purpose of Disbursement CONTRIBUTION | Category/ Type |
| Candidate Name JOHN KATKO | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: NY District: 24 | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. MCSALLY FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address P.O. BOX 19128 | | Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.I2221 |
| City TUCSON | State AZ | |
| Zip Code 85731 | Purpose of Disbursement CONTRIBUTION | Category/ Type |
| Candidate Name MARTHA MCSALLY | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: AZ District: 02 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 2000.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 143 OF 146 | | | |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. MILLER-MEEKS FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address PO BOX 1570 | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2225 |
| City OTTUMWA | State IA | |
| Zip Code 52501 | Purpose of Disbursement CONTRIBUTION | Category/ Type |
| Candidate Name MARIANNETTE MILLER-MEEKS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: IA District: 02 | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. MOONEY FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address PO BOX 1863 | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2243 |
| City MARTINSBURG | State WV | |
| Zip Code 25402 | Purpose of Disbursement CONTRIBUTION | Category/ Type |
| Candidate Name ALEX MOONEY | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: WV District: 02 | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. NESTANDE FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address 74-478 HIGHWAY 111 #112 | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2236 |
| City PALM DESERT | State CA | |
| Zip Code 92260 | Purpose of Disbursement CONTRIBUTION | Category/ Type |
| Candidate Name BRIAN NESTANDE | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: CA District: 36 | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1500.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 144 OF 146 | | | |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. RICK W. ALLEN FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address 100 LUNA PARK DR. #156 | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2238 |
| City ALEXANDRIA State VA Zip Code 22305 | Purpose of Disbursement CONTRIBUTION | |
| Candidate Name RICK ALLEN | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: GA District: 12 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. SENGER FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address PO BOX 4883 | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2239 |
| City NAPERVILLE State IL Zip Code 60567 | Purpose of Disbursement CONTRIBUTION | |
| Candidate Name DARLENE SENGER | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: IL District: 11 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. TOM MACARTHUR FOR CONGRESS INC. | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address 2 WEST WINDSOR AVE. | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2241 |
| City ALEXANDRIA State VA Zip Code 22301 | Purpose of Disbursement CONTRIBUTION | |
| Candidate Name TOM MACARTHUR | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NJ District: 03 | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1500.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|--------------------------------------|------------------------------------|-------------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 145 OF 146 | |
| | <input type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input checked="" type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. WESTERMAN FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address PO BOX 21097 | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2223 |
| City HOT SPRINGS | State AR | |
| Zip Code 71903 | Purpose of Disbursement CONTRIBUTION | Category/ Type |
| Candidate Name BRUCE WESTERMAN | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: AR District: 04 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. YOUNG FOR IOWA, INC. | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address PO BOX 1570 | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2226 |
| City VAN METER | State IA | |
| Zip Code 50261 | Purpose of Disbursement CONTRIBUTION | Category/ Type |
| Candidate Name DAVID YOUNG | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: IA District: 03 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. ZELDIN FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address PO BOX 133 | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2228 |
| City SHIRLEY | State NY | |
| Zip Code 11967 | Purpose of Disbursement CONTRIBUTION | Category/ Type |
| Candidate Name LEE ZELDIN | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: NY District: 01 | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1500.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 146 OF 146 | | | |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Luke Messer for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. ZINKE FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014 |
| Mailing Address PO BOX 1596 | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2227 |
| City HELENA | State MT | |
| Zip Code 59624 | Purpose of Disbursement CONTRIBUTION | Category/ Type |
| Candidate Name RYAN ZINKE | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: MT District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. FLEISCHMANN FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014 |
| Mailing Address 499 S. CAPITOL STREET SW SUITE 420 | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.I2245 |
| City WASHINGTON | State DC | |
| Zip Code 20003 | Purpose of Disbursement CONTRIBUTION | Category/ Type |
| Candidate Name CHUCK FLEISCHMANN | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: TN District: 03 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. CANTOR FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014 |
| Mailing Address P.O. BOX 17813 | | Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.I2282 |
| City RICHMOND | State VA | |
| Zip Code 23226-7813 | Purpose of Disbursement CONTRIBUTION | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) PRIMARY DEBT 2014 | State: District: | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3000.00 |
| TOTAL This Period (last page this line number only)..... | 14000.00 |