

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED PAGE 1/6 SECRETARY OF THE SENATE PUBLIC RECORDS

2018 JUL -6 AM 11:44

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

I LIKE LUKE

ADDRESS (number and street)

PO BOX 4

(Check if address is changed)

WESTFIELD

CITY ▲

IN

STATE ▲

46074

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

lmfc@mhrkonline.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

www.lukemesser.com

2. DATE

MM / DD / YYYY 06 / 25 / 2018

3. FEC IDENTIFICATION NUMBER

C

C00460667

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

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

Type or Print Name of Treasurer Kunkle, Craig, Mr.,

Signature of Treasurer

Kunkle, Craig, Mr.,

[Handwritten Signature]

Date

MM / DD / YYYY 06 / 27 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 06/2012)

201807060200479555

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate MESSER, ALLEN LUCAS, , ,

Candidate Party Affiliation Office Sought: House Senate President State IN District 06

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	C _____
2.	_____	FEC ID number	C _____
3.	_____	FEC ID number	C _____
4.	_____	FEC ID number	C _____

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Write or Type Committee Name

I LIKE LUKE

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

2018 REPUBLICAN CHALLENGERS FUND (2018 RCF)

Mailing Address 901 N WASHINGTON ST SUITE 700 ALEXANDRIA VA 22314 CITY STATE ZIP CODE

Relationship: [] Connected Organization [] Affiliated Committee [x] Joint Fundraising Representative [] Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name SMITH, TRACY, , , Mailing Address 2631 Willow Lake Dr Greenwood IN 46143 CITY STATE ZIP CODE Title or Position Assistant Treasurer Telephone number 317 - 431 - 2538

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Kunkle, Craig, , Mr., Mailing Address 14117 N Gray Rd Carmel IN 46033 CITY STATE ZIP CODE Title or Position Treasurer Telephone number 317 - 517 - 7000

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Full Name of Designated Agent

Mailing Address

Title or Position

Telephone number

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Fifth Third Bank

Mailing Address

110 N Harrison St

Shelbyville

IN

46176

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Bank of America

Mailing Address

600 N. Washington St.

Alexandria

VA

22314

CITY

STATE

ZIP CODE

201907080200473556

5(g) or (h). Joint Fundraising Participant:

1.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
2.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
3.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
4.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
BILIRAKIS - MESSER JOINT FUNDRAISING COMMITTEE

Mailing Address

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name

Mailing Address

TITLE OR POSITION Telephone Number

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Mailing Address

CITY STATE ZIP CODE

201607060200479559

5(g) or (h). Joint Fundraising Participant:

1.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
2.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
3.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
4.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

HOOSIERS FOR SUSAN AND LUKE

Mailing Address

-

Relationship: CITY ▲ STATE ▲ ZIP CODE ▲

Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name

Mailing Address

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone Number - -

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Mailing Address

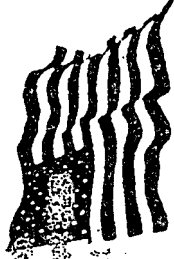
CITY ▲ STATE ▲ ZIP CODE ▲

201807060200479550

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Westfield, IN 46074

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06/27/2018

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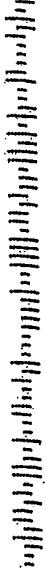
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Office of Public Records
232 Hart Senate Office Building
Washington DC 20510-7116

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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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Date of Receipt

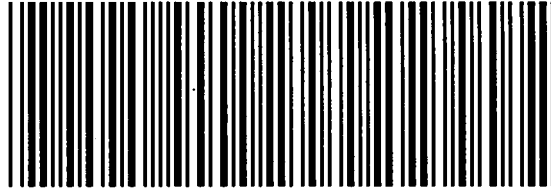
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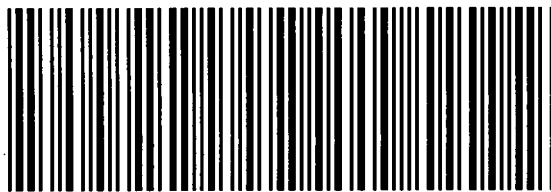
PREPARER BP DATE PREPARED 7/6/18

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