#### **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

# For State and Local Candidates For Single-Candidate Committees

		1			·-·	
1. DA	TEOFREPORT	2.a. NAME OF C	ANDIDATE OR C	OMMITTEE		
	1/25/17	<u>Jona</u>	THAN	HAYE	3	·
2.b. IF	COMMITTEE, NAME OF CANDIDA	ΓE		•	3. ELECTION DATE	
	NA				Nov	6 2018
	MPAIGN ADDRESS AND PHONE	City		State	Zip Code	Phone
	eet or Rural Route	City		-	210 Code	
	50 Ponewola 3	+ HEND		IN	31012	330.5707
	ANDIDATE'S HOME ADDRESS (if dif	ferent than 4.a.) City		State	Zip Code	Phone
	SAME	,			•	
F 05	FICE SOUGHT (include district num	her if annlicable)	6. NAME C	E POLITICAL	TREASURER (may be	candidate)
Ş. Ur				<b>N</b>	•	, and the second
- 04	Aldormon Ward	5 Hend	76	17	olowack	<u> </u>
7. CA	ATEGORY OR REPORT (Check one)	7				
	FIRST SECOND TH		PRE-	PRE-	MID-YEAR	YEAR-END
	UARTER QUARTER QUAF GINNING DATE OF REPORTING PERIO		PRIMARY 8.b. ENDING	GENERAL DATE OF REPO	SUPPLEMENTAL ORTING PERIOD	SUPPLEMENTAL
U.a. DL	100/20/1	***	, <b>(</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1/10	-/19	
O (Cho	10/28/1-			1/ 13	<del>/-/                                    </del>	
9. (Cite	eck one)					
a.	This campaign is exempt from dures total \$1,000 or less for this	etailed disclosure becaus reporting period. (Com	se contributions plete items 12d.	(including in-ki , 12e. and 12f.	ind) received total \$1,00 )	00 or less AND expendi-
h	This campaign is required to file	a detailed financial discl	osure because i	contributions (i	ncludina in-kind) receiv	ed total more than \$1,000
D.	and/or expenditures total more t	han \$1,000 for this repor	ting period.	001111104110110 (1	nobeling in Aira, to some	
	<u> </u>	·	<u>.</u>			
10. i/	we do solemnly swear or affirm that	the information contained	d in this campai	ign financial di	sclosure report is true :	and that this report is an
a	courate accounting of campaign cont	ributions and expenditure	es required to be	e reported by the	he candidate committee	by the Campaign
F h	inancial Disclosure Act. Additionally, enefit of the candidate or for any other	I/we swear or amm that or nonpolitical purpose as	no campaign c defined by the	ontributions da federal interna	ive been expended for i	rie personal imancial
"	erient of the dandade of for any one	/	10			11.
	Charathus II	1/28/	ע 19	-///	17/1	- 1/23/19
-	signature of candidate	date /		signature (	of political treasurer	date
	//	• /	(	,		
11. 64	ITNESS SIGNATURE				. 1	//
		مالممان	**	. /)		, , , , , , ,
* /		1123/19	<u> </u>	In	-11-11	2-23-19
	signature of witness	date		signa	ature of witness	date
		<del></del>				
12. SL	JMMARY				uma '	79
	BALANCE ON HAND LAST REPOR	эт	-11 F		s 1412	, (
a.	BALANCE ON IAND LAGT NEI OF	<b>*</b> * * * * * * * * * * * * * * * * * *			W. WILL	
b.	TOTAL RECEIPTS THIS PERIOD		1		<u>, T400</u>	
1		1.A con	N ?	3 KEC D	5365	<b>.42</b>
c.	TOTAL DISBURSEMENTS THIS PER	(IOD		TUTTO	48 2 }	47
d.	BALANCE ON HAND (12.a. plus 1	2.b. minus 12.c.)	LANEF	COMMIS COMMIS	SIOI	<u>. 506''</u>
<u> </u>			SUM	COM		
	TOTAL LOANS OUTSTANDING	E!	LECTION			<u>; 3500</u>
e.	TO INCLUMING OF IT INTO MICE.					
	TOTAL OBLIGATIONS OUTSTAND	NG				0
f.	TO TAL OBLIGATIONS OUTSTAND		***************************************	~ ********************		

#### **SUMMARY PAGE - CANDIDATE**

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
	FROM: 10/22 TO: 1/15/19
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	<i>,</i>
a. Unitemized Contributions (\$100 or less from each source this period)	··· 1900
b. Itemized Contributions (over \$100 from each source this period)	\$\$
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.).	s 1900
16. LOANS RECEIVED THIS REPORTING PERIOD	* <del>2500</del>
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>'U</u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>4,400</u>
DISBURSEMENTS	
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e	e.g., printing, postage, gasoline)
Foobak Adds 100	
Canaly 5 100	
Fou book ald s (a)	<del></del>
Fuel s 88.	47
\$	·····
•	<del></del>
Ψ	
· · · · · · · · · · · · · · · · · · ·	<del></del>
· · · · · · · · · · · · · · · · · · ·	<del></del>
<u> </u>	
Total of Expenditures (\$100 or less each payee)	s 348 47
b. Itemized Expenditures (Over \$100 each payee this period)	F 0 18 0 0
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	
20. LOAN REPAYMENTS MADE THIS PERIOD	793
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ <u>5366.79</u>
22.IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ <u>Ø</u>
b. Itemized in-kind contributions (over \$100 from each source this period)	s <u>250</u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b	$ \mathcal{O}\mathcal{E}_{\wedge} $
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	
b. Itemized Obligations Outstanding (Over \$100 each)	
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item	

### ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	JONA	THAN !	HAYE	<u>s</u>	2. REPORT COVER FROM: 10/28/19	TO: 1/15/19
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT					age)	Amount
TOTAL THE MIZED CAMPAIGN CONTRIBUT     COMPLETE THE APPROPRIATE ITEMS FOR EA	ACH ITEMIZ	ED CONTRI	BUTION (co	ntributions totaling more than	100 from any contributor	
First Name					<u> </u>	Amount of Contribution
			Primary Election	General Election		
Last Name/Organization Name						
Address		Runoff (Local Election				
ity State Zip Code			Date of Contribution	Aggregate This Election		
Occupation	<u> </u>					
Employer						,
<u> </u>	Middle Nan	ne -		Contribution Received For		Amount of Contribution
First Name	MINITUR INGI				General Election	
Last Name/Organization Name	_			☐ Primary Election 【	- General Decion	
Address				Runoff (Local Election	ins Only)	
City	State	Zip Code		Date of Contribution		Aggregate This Election
Occupation						
Employer						
						<u> </u>
					<u>-</u>	
First Name	Middle Narr	ne		Contribution Received Fo	r.	Amount of Contribution
First Name Last Name/Organization Name	Middle Nam	ne			r: General Election	Amount of Contribution
Last Name/Organization Name	Middle Nam	ne		Primary Election	General Election	Amount of Contribution
	Middle Nam	ne		☐ Primary Election ☐ Runoff (Local Election	General Election	
Last Name/Organization Name	Middle Nam	Zip Code		Primary Election	General Election	Amount of Contribution  Aggregate This Election
Last Name/Organization Name Address				☐ Primary Election ☐ Runoff (Local Election	General Election	
Last Name/Organization Name Address City				☐ Primary Election ☐ Runoff (Local Election	General Election	
Last Name/Organization Name  Address  City  Occupation  Employer	State	Zip Code		Primary Election Runoff (Local Election Date of Contribution	General Election	
Last Name/Örganization Name Address City Occupation		Zip Code		Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For	General Election	Aggregate This Election
Last Name/Organization Name  Address  City  Occupation  Employer	State	Zip Code		Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received Form	General Election  Ons Only)  General Election	Aggregate This Election
Last Name/Organization Name  Address  City  Occupation  Employer  First Name	State	Zip Code		Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For	General Election  Ons Only)  General Election	Aggregate This Election  Amount of Contribution
Last Name/Organization Name  Address  City  Occupation  Employer  First Name  Last Name/Organization Name	State	Zip Code		Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received Form	General Election  Ons Only)  General Election	Aggregate This Election
Last Name/Organization Name  Address  City  Occupation  Employer  First Name  Last Name/Organization Name  Address	State  Middle Na	Zip Code		Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For:  Primary Election  Runoff (Local Election	General Election  Ons Only)  General Election	Aggregate This Election  Amount of Contribution
Last Name/Organization Name  Address  City  Occupation  Employer  First Name  Last Name/Organization Name  Address  City	State  Middle Na	Zip Code		Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For:  Primary Election  Runoff (Local Election	General Election  Ons Only)  General Election	Aggregate This Election  Amount of Contribution
Last Name/Organization Name  Address  City  Occupation  Employer  First Name  Last Name/Organization Name  Address  City  Occupation  Employer	State  Middle Na	Zip Code		Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For:  Primary Election  Runoff (Local Election	General Election  Ons Only)  General Election	Aggregate This Election  Amount of Contribution
Last Name/Organization Name  Address  City  Occupation  Employer  First Name  Last Name/Organization Name  Address  City  Occupation	State  Middle Nat	Zip Code  Zip Code		Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For:  Primary Election  Runoff (Local Election	General Election  Ons Only)  General Election	Aggregate This Election  Amount of Contribution

# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

. NAME OF CANDIDATE OR COM	MITTEE			2. REPORT COVER	ING THE PERIOD			
. NAME OF CANDIDATE OR COM				FROM: 10-28	TO: /15/19			
. TOTAL ITEMIZED IN-KIND CON	TRIBUTIONS FROM	PRECEDING PAG	E (enter \$0 if first itemized pag	e)	0			
COMPLETE THE APPROPRIATE ITE	MS FOR EACH ITEMIZ	ED IN-KIND CONTR	BUTION (in-kind contributions totaling	more than \$100 from any cor	tributor during the period)			
First Name Racka	Middle Nan		In-Kind Contribution Receive		Value of In-Kind Contribution			
ast Name/Organization Name			Runoff (Local Election	Runoff (Local Elections Only)				
Address Hun Clu	b		Date of In-Kind Contribution	0/29/18	Aggregate this Election			
City Heard	State	Zip Code	Description of In-Kind Contributio	" Pto sp	quienamo			
Occupation Interior Decim	Employer	e1 <del>+</del>	Healthy?	SNOCKS Pre	eperation			
First Name	Middle Na		In-Kind Contribution Received Primary Election	red For: General Election	Value of In-Kind Contribution			
Last Name/Organization Name			Runoff (Local Elect	ions Only)				
Address			Date of In-Kind Contribution		Aggregate this Election			
City	State	Zip Code	Description of In-Kind Contributi	on				
Occupation	Employer	<u> </u>						
First Name	Middle Na	ame	In-Kind Contribution Recei	ved For:/ General Election	Value of In-Kind Contribution			
Last Name/Organization Name			Runoff (Local Elec	tions Only)				
Address			Date of In-Kind Contribution		Aggregate this Election			
City	State	Zip Code	Description of In-Kind Contribut	ion				
Occupation	Employer							
First Name	Middle N	ame	In-Kind Contribution Rece	ived For: General Election	Value of In-Kind Contribution			
Last Name/Organization Name			Runoff (Local Elec	ctions Only)				
Address			Date of In-Kind Contribution	Date of In-Kind Contribution Aggregate this Election				
City	State	Zip Code	Description of In-Kind Contribu	Description of In-Kind Contribution				
Occupation	Employer							
First Name	Middle N	lame	In-Kind Contribution Red	ceived For:	Value of In-Kind Contribution			
Last Name/Organization Name			Runoff (Local Ele					
Address	<u> </u>		Date of In-Kind Contribution		Aggregate this Election			
City State Zip Code			Description of In-Kind Contribu	Description of In-Kind Contribution				
Occupation	Employer	<u> </u>						
5. TOTAL ITEMIZED IN-KIND C	ONTRIBUTIONS							
(Carry forward to item 3. of next page (If this is the last page of in-kind contri	if additional pages of this for	m are used.) e shown in item 22b. of s	summary.)					
SS-1128 (Rev. 2/06)				Page of	RDA 1159			

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	LA up c		ORT COVERING THE PERIOD  10/28 TO: 1/15/19
TOMATHAN EXPENDITION	HAYES	E (enter \$0 if first itemized page)	Amount
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURE 4. COMPLETE THE APPROPRIATE ITEMS FOR EA	RES FROM PRECEDING FAG ACH ITEMIZED EXPENDITURE (	expenditures totaling more than \$100 to any payer	e during the period)
First Name HAI Ford	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		Mailers	7365.15
Address Spence La	Ne	Marier 5	apes
City Mahull	State Zip Code		
First Name US Port office	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			1410
Address Henderswith P.O.		Tostage	1, 10
City Hend.	State Zip Code TN 37075	Ů	
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		Printing	901 45
Address Main St		] I I introd	101.
Hendersmuille	State Zip Code  TN 30075		
First Name SAMS	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Whole sule		PTO Sponsor	ship 17,172
Address Indian Lale	Store	- Healthy Snac	001
City Hend.	State Zip Code	+ Water	£\$
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
TOTAL ITEMIZED EXPENDITURES     (Carry forward to item 3. of next page if additional page)		5018,32	
(Larry forward to item 5, of next page it accounts page (If this is the last page of expenditures, this amount m	ust be shown in item 19b, of summary.)		1 3-101 -

# ITEMIZED STATEMENT OF LOANS - CANDIDATE

, NAME OF CANDIDATE OR COMMITTEE				_			REPORT CO	OVERING TO:	THE PERIOD
JONATUL			١   ١	0/28/	19 /	/15/19			
B. COMPLETE THE APPROPRIATE ITEMS I	OR EACH IT	EMIZED L	OAN (loa	ns totaling n	nore than \$100 from	m any source	during the peri	od)	
Complete the Following for the Source of the Loan		I Outs	standing Loa	a Doloneo	Loans	1	.oan	Outstandir	ng Loan Balance
First Name Middle Na	raf +	Outs (Be	eginning coa	eriod)	Received		ments	(End	of Period)
Last Name/Organization Name	,	#	100	<b>X</b> 0	2500		0	#3	500."]
Address Address		Loa	n Received	For:			Date of Loar		
120 Gav Pt Blve					General Ele	ection	<i>N</i> .	in hon	3, 2019
The Llevel	Zip Code			cal Elections		Janea attack		MILL	<u> </u>
	orsers or Guarar	ntors for Ab		(If more spa First Name	ace is needed p	ilease allaci	I a payer	Middle Nam	e
First Name	Middle Name	·			ization Name			<u> </u>	
Last Name/Organization Name				.asi Name/O	rganization Name				
Address				Address					
City	State	Zip Code		City				State	Zip Code
Amount Guaranteed Outstanding		<u> </u>		Amount Guar	ranteed Outstandir	ng			
Amount Guaranteed Outstanding				First Name				Middle Nar	ne .
First Name	Middle Name	1		FUSLINATIO				<u> </u>	
Last Name/Organization Name				Last Name/C	Organization Name	3			
Address				Address					<del></del>
	State	Zip Code		City				State	Zip Code
City		124 544	<u></u> .		ranteed Outstandi	ina			
Amount Guaranteed Outstanding				Arribunt Gua					
First Name	Middle Name	е		First Name				Middle Na	ame
Last Name/Organization Name				Last Name/	Organization Nam	e			
Address				Address					
	Ctata	Zip Code		City				State	Zip Code
City	State	- Ap 0008		l .	aranteed Outstand	lino			_1
Amount Guaranteed Outstanding				Amount Gu	and reco Constant	y			
First Name	Middle Nam	ne		First Name				Middle N	ame
Last Name/Organization Name				Last Name	Organization Nam	ne			
				Address					<u> </u>
Address		15 - 7						State	Zip Code
City	State	Zip Code	e 	City	uaranteed Outstan	dino			
Amount Guaranteed Outstanding				Amount Gu	Ja: alitesti Olitstali	only			
4. Totals for all Loans (complete on last pag	e of itemized lo	oans)			ng Loan Balance ning of Period)	Loans Receive	ed Pa	yments	Outstanding Loan Balance (End of Period)
(Total loans received should also be shown in item 16 (Total loan payments should also be shown in item 20 (Total outstanding loan balance should also be shown	), on summary pag	le.)		1 4	00	250	00 (	0	\$3500 <u>"</u>
( Total outstanding loan balance should also be shown		p-84-/		<del>_ +\</del>		· · ·	of T		RDA 1159

## ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
			FROM:	TO:	O total dia Balanca		
B. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)			Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)	
First Name	st Name Middle Name				,	/ /	
Last Name/Business Name					17		
Address							
City	State	Zip Code		7	7_	/	
Description of Obligation				<i>/</i>			
First Name	Middle Nan	ne					
Last Name/Business Name	!		]				
Address							
City	State	Zip Code					
Description of Obligation				·		-	
First Name	Middle Na	THE					
Last Name/Business Name	<u> </u>						
Address				<b>.</b>			
City	State	Zip Code		<u> </u>			
Description of Obligation							
First Name	Middle Na	me					
Last Name/Business Name	<u> </u>	·_	-				
Address							
City	State	Zip Code					
Description of Obligation	<u> </u>						
	Middle Na			<del></del>			
First Name	MILICIE N	- · · · · · · · · · · · · · · · · · · ·	_				
Last Name/Business Name		1					
ddress			ı				
City	State	Zip Code		1	<u> </u>	<u> </u>	
Description of Obligation							
TOTALS     (Total from Outstanding Balance - (End of Period)	ıst also be shown						
in item 23b, on summary page.)	10, Mine no attorni			<u></u>	<u> </u>		