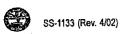
CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. DATE OF REPORT 2.a. NAME OF CA	NDIDATE OR COMMITTEE	_	
July 1, 2018 Merr	01 N. Hyd	3. ELECTION DATE	
2.b. IF COMMITTEE, NAME OF CANDIDATE	•	A A A	2 2018
4.a. CAMPAIGN ADDRESS AND PHONE		1 ragus 1	
Street or Rural Route City	State	Zip Code 37075 (6)	Phone (C) 822-38//
103 Rebecca DRIVE HenderSon 4.b. CANDIDATE'S HOME ADDRESS (If different than 4.a.)	ille, IN-	310N (6)	ماها محد سمره را
Street or Rural Route City	State	Zip Code	Phone
(Same)	6. NAME OF POLITICAL	TREASURER (may be o	andidate)
5. OFFICE SOUGHT (include district number, if applicable) County Commission - District 8	Merrol		·
7. CATEGORY OR REPORT (Check one)			
FIRST SECOND THERD FOURTH	PRE- PRE-	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	8.b. ENDING DATE OF REP	ORTING PERIOD	
April 22, 2018	June 30,	2018	<u>.</u>
9. (Check one)	e de la companya del companya de la companya de la companya del companya de la co	rind) received total \$1,00	O or less AND expendi-
a. This campaign is exempt from detailed disclosure becaus tures total \$1,000 or less for this reporting period. (Comp	se contributions (including in- plete items 12d., 12e. and 12i	i.)	O OL 1099 WAY CAPONEL
This campaign is required to file a detailed financial discli	osure because contributions (d total more than \$1,000
and/or expenditures total more than \$1,000 for this repor	ting period.		
10. I/we do solemnly swear or affirm that the information contained	d in this campaign financial c	lisclosure report is true a	nd that this report is an
accurate accounting of campaign contributions and expenditure	no campaign contributions h	ave been expended for the	ne personal financial
benefit of the candidate or for any other nonpolitical purpose as	defined by the federal intern	al revenue code.	Jeoly 1,
Mand Whole Oak 120	18 Men	affect	1 2018
signature of candidate date	signature	of political treasurer	date
V V V V V V V V V V V V V V V V V V V			
11. WITNESS SIGNATURE	Al B	40 1/a	1-1-18
Flerabeth Farmon 7-1-18	Hezabe	Auture of witness	date date
signature of witness date		nature of wintess	
12. SUMMARY		_	
a. BALANCE ON HAND LAST REPORT	***************************************	\$ <i>Ø</i>	•
A.M. P.N	1.	s <u>Ø</u>	_
302 6 920 10			
c. TOTAL DISBURSEMENTS THE PER COUNTY		\$	-
d. BALANCE ON HAND (12.8 DIES 12.6 THINGS MESSIO	N		\$
e. TOTAL LOANS OUTSTANDING			s
e. TOTAL LOANS OUTSTANDING			BY.
f. TOTAL OBLIGATIONS OUTSTANDING	***************************************		\$

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (in Full)	14. REPORT COVERING THE PERIOD
Merrol N. Hude	FROM: 49-18 TO: 6-30-18
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	•
a. Unitemized Contributions (\$100 or less from each source this period)	\$
b. Itemized Contributions (over \$100 from each source this period)	\$
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.).	\$_
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>Ø</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$\$
DISBURSEMENTS	
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by category -	e.g., printing, postage, gasoline)
\$	
\$	
\$	
\$	<u></u>
\$	
\$	
*	
\$ <u></u>	
\$	
	Ø
Total of Expenditures (\$100 or less each payee)	A-76
b. Itemized Expenditures (Over \$100 each payee this period)	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	1500
20. LOAN REPAYMENTS MADE THIS PERIOD	
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$
22.IN-KIND CONTRIBUTIONS	~
a. Unitemized in-kind contributions (\$100 or less from each source this period)	
b. Itemized in-kind contributions (over \$100 from each source this period)	\$
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22	
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 its	em 12.f.)\$



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 f st Name	Amount of Contribution Aggregate This Election Amount of Contribution
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 f st Name Middle Name Contribution Received For: Primary Election Ge Runoff (Local Elections On	Amount of Contribution Aggregate This Election Amount of Contribution aneral Election anity)
St Name Middle Name Contribution Received For: Primary Election Ge Runoff (Local Elections On	Amount of Contribution Aggregate This Election Amount of Contribution aneral Election anity)
st Name/Crganization Name Primary Election Ge Runoff (Local Elections On	Aggregate This Election Amount of Contribution eneral Election
Idress Runoff (Local Elections On Pate of Contribution	Aggregate This Election Amount of Contribution eneral Election
Ty State Zip Code Date of Contribution Date of Contribution Date of Contribution Contribution Received For: Primary Election G Runoff (Local Elections O City State Zip Code Date of Contribution Contribution Contribution Contribution Contribution Contribution Date of Contribution Contribution Contribution Contribution Contribution Contribution Contribution Received For: Primary Election G Primary Election G Runoff (Local Elections G Runoff (Local Elections G Runoff (Local Elections G	Aggregate This Election Amount of Contribution eneral Election
Date of Contribution Coupation	Amount of Contribution eneral Election nly)
ccupation mployer irst Name	Amount of Contribution eneral Election nly)
irst Name Middle Name Contribution Received For: ast Name/Organization Name Primary Election G Address Runoff (Local Elections O Date of Contribution Coupation Primary Election G Date of Contribution Coupation Primary Election G Coupation Primary Election G Coupation Primary Election G Address Primary Election G Runoff (Local Elections O Date of Contribution G Runoff (Local Elections O Date of Contribution G Date of Contribution	aneral Election
irst Name Middle Name Contribution Received For: Primary Election G Runoff (Local Elections O Date of Contribution	aneral Election
ast Name/Organization Name Primary Election G Runoff (Local Elections O Date of Contribution Description G Runoff (Local Elections O Date of Contribution Description G Runoff (Local Elections O Date of Contribution Description G Runoff (Local Elections O Date of Contribution G Description G Runoff (Local Elections O Date of Contribution G Description G Des	aneral Election
ast Name/Organization Name Primary Election G Runoff (Local Elections O Date of Contribution Contribution G Contribution Contribution Contribution G Contribution Contribution Contribution G Contribution Contribution Contribution G Contribution Contribution G Contribution Contribution G Contribution Contribution Contribution G Contribution Cont	nly)
Address Runoff (Local Elections O City State Zip Code Date of Contribution Cocupation Employer First Name Middle Name Contribution Received For: Last Name/Organization Name Address City State Zip Code Date of Contribution Date of Contribution Contribution Received For: Primary Election Contribution Date of Contribution	
State Zip Code Date of Contribution Cocupation Employer First Name Middle Name Contribution Received For: Last Name/Organization Name Address City State Zip Code Date of Contribution	
Coupation Employer First Name Middle Name Contribution Received For: Primary Election Runoff (Local Elections Coupations) City State Zip Code Date of Contribution	Aggregate This Election
First Name Middle Name Contribution Received For: Last Name/Organization Name Primary Election Grant	
First Name Middle Name Contribution Received For: Primary Election Runoff (Local Elections Colly State Zip Code Date of Contribution	
Address Primary Election G Runoff (Local Elections C State Zip Code Date of Contribution	ŧ
Address Elections C City State Zip Code Date of Contribution	Amount of Contribution
Address	Seneral Election
City State Zip Code Date of Contribution	anta)
City City	
Occupation	Aggregate This Election
Employer	
First Name Middle Name Contribution Received For:	Amount of Contribution
Prist Name	Seneral Election
Last Name/Organization Name	National Industry
Address Runoff (Local Elections	Only)
City State Zip Code Date of Contribution	Aggregate This Election
Occupation	
Employer	
5. TOTAL ITEMIZED CONTRIBUTIONS	
(Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)	~

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

. NAME OF CANDIDATE OR C	COMMITTEE ,			2. REPORT COVER			
Merrol 1	V. Hyde			FROM: 4-72-18	TO: 6-30-18		
		M PRECEDING PAG	GE (enter \$0 if first itemized page)		Ø		
. COMPLETE THE APPROPRIATE	ITEMS FOR EACH ITE	MIZED IN-KIND CONT	RIBUTION (in-kind contributions totaling mo	ore than \$100 from any cor	ntributor during the period)		
First Name	Middle		In-Kind Contribution Received	In-Kind Contribution Received For:			
ast Name/Organization Name			Runoff (Local Elections	Runoff (Local Elections Only)			
Address	· · · · · · · · · · · · · · · · · · ·		Date of In-Kind Contribution	ate of In-Kind Contribution Aggregate this Election			
State Zip Code			Description of tn-Kind Contribution				
Occupation	Employer						
First Name	Middle	Name	In-Kind Contribution Received Primary Election	For: General Election	Value of In-Kind Contribution		
Last Name/Organization Name		<u></u>	Runoff (Local Elections Only)				
			Date of In-Kind Contribution				
Address	100	7: 0-4:	Description of In-Kind Contribution				
City	State	Zip Code	Description of infection contribution				
Occupation	Employer						
First Name	Middle Name		In-Kind Contribution Received	For: General Election	Value of In-Kind Contribution		
Last Name/Organization Name			Runoff (Local Election	s Only)			
Address	<u> </u>	_	Date of In-Kind Contribution		Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution		<u> </u>		
Occupation	Employer	<u> </u>					
First Name	Midd	e Name	In-Kind Contribution Received	d For: General Election	Value of In-Kind Contribution		
Last Name/Organization Name		☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)					
Address			Date of In-Kind Contribution	is Only)	Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution				
Occupation Employer							
F] Licadi	e Name	In-Kind Contribution Receive	ed For:	Value of In-Kind Contribution		
First Name	Mildon			General Election			
Last Name/Organization Name			Runoff (Local Election	ns Only)			
Address			Date of In-Kind Contribution		Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution				
Occupation	Employer						
5. TOTAL ITEMIZED IN-KIND	O CONTRIBUTIONS	<u> </u>			~		
(Carry forward to item 3 of next pa	age if additional pages of this	form are used.)					
(If this is the last page of in-kind co	ontributions, this amount mus	t de snown in item 22b, of s	Рас	ge <u>4</u> of <u>7</u>	RDA 1159		

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

NAME OF CANDIDATE OR COMM Merro	ME OF CANDIDATE OR COMMITTEE 2. REPORT COMMITTEE FROM: 4-11-11			
			AGE (enter \$0 if first itemized page)	Amount
. COMPLETE THE APPROPRIATE ITEI	MS FOR EACH ITEM	IZED EXPENDITUR	E (expenditures totaling more than \$100 to any pay	ree during the period)
irst Name	Middle Na		Purpose of Expenditure	Amount of Expenditure
ast Name/Business Name				·
Address		 _		
	T Divis	To Code		
City	State	Zip Code		
irst Name	Middle Na	me	Purpose of Expenditure	Amount of Expenditure
ast Name/Business Name				
Address			_	
City	State	Zip Code		
Sint Name	Middle Na	ame	Purpose of Expenditure	Amount of Expenditure
irst Name	Milddle He			\
ast Name/Business Name				
Address				
City	State	Zip Code		
First Name	Middle Na	me	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name	<u>. </u>			
tress				
City	State	Zip Code		
First Name	Middle Na	ame	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name	larne/Business Name			
dress				
City	State	Zip Code		İ
First Name	Middle N	ame	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name				
Address		<u> </u>		
City	State	Zip Code	1	

ITEMIZED STATEMENT OF LOANS - CANDIDATE

. NAME OF CANDIDATE OR COMMITTEE				2. REPORT CO FROM:	TO:	
Merrol N. Hode 3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN				4-22-18		-30-18
. COMPLETE THE APPROPRIATE ITEMS F	OREACH ITE	MIZED LOAN (I	oans totaling more than \$100 from any	source during the perio	d)	
complete the Following for the Source of the Loan	_	Outstanding	oan Balance Loans	Loan	Outstandir	ng Loan Balance
Merro			(Beginning of Period) Received Payments (End of Period)			of Period)
ast Name/Organization Name			y 1,515,28			
Loan Receiv				Date of Loan	```	given) &
103 Rebecca De - Prima		V/H			<i>[</i> 4	
Hand'ville State Zip Code 37075 Runoff List All Endorsers or Guarantors for Above Loa			Local Elections Only)	attach a nann)		
List All Endor	Sers or Guaranto	ors for Above Loa	First Name	attacit a page)	Middle Name	e
	<u>l</u>	<u></u> .	Last Name/Organization Name			
ast Name/Organization Name						
Address			Address			
City	State	Zip Code	City		State	Zip Code
ount Guaranteed Outstanding			Amount Guaranteed Outstanding			
rst Name Middle Name			First Name		Middle Name	
ast Name/Organization Name			Last Name/Organization Name			
ddress			Address			
City	State	Zip Code	City		State	Zip Code
Amount Guaranteed Outstanding	<u> </u>		Amount Guaranteed Outstanding			
		First Name		Middle Name		
T TOTAL TO THE TOTAL TOT						
			Last Name/Organization Name			
Last Name/Organization Name			Last Name/Organization Name			
Last Name/Organization Name Address			Last Name/Organization Name Address			İ
	State	Zip Code			State	Zip Code
Address	State	Zip Code	Address		State	Zip Code
Address City Amount Guaranteed Outstanding		Zip Code	Address City Amount Guaranteed Outstanding			
Address City Amount Guaranteed Outstanding First Name	State Middle Name	Zip Code	Address City Amount Guaranteed Outstanding First Name		State Middle Nar	
Address City Amount Guaranteed Outstanding		Zip Code	Address City Amount Guaranteed Outstanding			
Address City Amount Guaranteed Outstanding First Name		Zip Code	Address City Amount Guaranteed Outstanding First Name			
Address City Amount Guaranteed Outstanding First Name Last Name/Organization Name		Zip Code	Address City Amount Guaranteed Outstanding First Name Last Name/Organization Name			
Address City Amount Guaranteed Outstanding First Name Last Name/Organization Name Address	Middle Name		Address City Amount Guaranteed Outstanding First Name Last Name/Organization Name Address		Middle Nar	me
Address City Amount Guaranteed Outstanding First Name Last Name/Organization Name Address City	Middle Name State	Zip Code	Address City Amount Guaranteed Outstanding First Name Last Name/Organization Name Address City Amount Guaranteed Outstanding Outstanding Loan Balance	oans Loa seelved Paym	Middle Nan	me

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

Merro/	N. H	rle		FROM: 4-22	-157 ITO: A	/ . サー・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・
	1. NAME OF CANDIDATE OR COMMITTEE. Merrol N. Hyde					5-30-18
B. COMPLETE THE APPROPRIATE ITE OBLIGATION (obligations totaling mor person/vendor at the end of the report	e than \$100 ow	ITEMIZED ed to any	Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name	Middle Na	me				•
ast Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation		<u></u>				
First Name	Middle Na	urne				
ast Name/Business Name			_			
Address		<u> </u>				
City	State	Zip Code				<u> </u>
Description of Obligation						
First Name	Middle Na	amé				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle N	ame				
Last Name/Business Name					<u> </u>	
Address						
City	State	Zip Code		1		
Description of Obligation			N			
First Name	Middle	lame				
Last Name/Business Name						
Address	<u> </u>	·				
City	State	Zip Code	-			
Description of Obligation				_ <u></u>	_i	
4. TOTALS						
(Total from Outstanding Balance - (End of in item 23b. on summary page.)	Period) column r	nust also be show	n			