



**SUPPLEMENTAL "LARGE CONTRIBUTION" REPORT BY
A CANDIDATE'S COMMITTEE
CONTRIBUTIONS OR MORE)**

State Form 48492 (R5 / 10-17)

Indiana Election Division (IC 3-9-5-20.1; 3-9-5-22)

INSTRUCTIONS: Only candidates receiving a "large contribution" are required to file this report. Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

(CFA-11)

FILE NUMBER

**TOTAL PAGES IN ENTIRE CFA-11
REPORT**

COMMITTEE INFORMATION

1. Full Name of Candidate (Include any nickname.) <input type="checkbox"/> Check if this is a new name.			2. Committee Telephone Number	
TIM R. HAUBER			(812) 283 9671	
3. Mailing Address (Address where all campaign finance correspondence is received.) <input type="checkbox"/> Check if this is a new address.				
1008 S. SHERWOOD AVE.				
4. City	State	ZIP Code	5. Party Affiliation or If Independent Candidate	
CLARKSVILLE	IN	47129	REPUBLICAN	
6. Office Sought (Include district number, if any. Not required for exploratory committee.)			7. County of Residence	
CLARKSVILLE TOWN COUNCIL, DISTRICT 1			CLARK	
8. Reporting Period (mm/dd/yy):				
From: 1-1-19 Through: 4-12-19				

For classification, enter INDV for individual; PAC for political action committee; CORP for corporation; LAB for labor organization; OTHER for all entries which are not one of the above categories.

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT OF CONTRIBUTION	DATE RECEIVED (mm/dd/yy)
			RECEIVED BY
Classification 1. XLG TRANSPORTATION INC. (BRYAN SMITH) 1035 SAMES RD. CLARKSVILLE, IN. Contributor's Occupation (if applicable) (TRUCKING) 47129	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)	\$2500.00	1-26-19
Classification 2. Contributor's Occupation (if applicable)	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)		
Classification 3. Contributor's Occupation (if applicable)	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Miscellaneous (specify)		

CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer	Title	Date (mm/dd/yy)
<i>Tim R. Hauber</i>	TREASURER	01/25/2019
Signature of Candidate (if applicable)		Date (mm/dd/yy)
<i>Tim R. Hauber</i>		01/25/2019

Warning: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, and IC 3-9-4-18)

FOR OFFICE USE ONLY

FILED

JAN 28 2019

Lusand Popp
CLERK CLARK CIRCUIT COURTS