MENT MENT Candidate for State: CT presentatives District: Staff File projection: Staff File Staff	For New Members, Candidate of the Control of the Co	lates, and New Employees 26 Check if Amendment Amendment	DEC 1 1 2019 Page 1 of 26 9 DEC 18 PM 1: 21 27 9 DEC 18 PM 1: 21 28 9 DEC 18 PM 1: 21 Chica Use Only) A \$200 penalty shall be assessed against any	Page 1 of
New Officer or Employee Employing Office:	Type (If Applicable): Principal Assistant	d Covered: January 1, <u>2018</u>	A \$200 penaity shall be assessed against a individual who files more than 30 days late.	sed against any n 30 days late.
PRELIMINARY INFORMATION ANSWER <u>EACH</u> OF THESE	THESE QUESTIONS	TONS		
A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	No I	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	gh the reporting on the date of filing? Yes X	8
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes Yes	×	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	arrangement with an Yes X	N O
D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	8	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	\$5,000 from a Yes X	\$
ATTACH THE CORRESPONDING SCHEDULE IF YOU THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE	SPONDING SCH	HEDULE IF YOU ANSWER "YES" THAT YOU ARE REQUIRED TO COMPLETE	COMPLETE	
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	NFORMATION	- ANSWER <u>BOTH</u> OF THESE	QUESTIONS	
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?	n Ethics and certain off child?	her "excepted trusts" need not be disclosed. {	lave you excluded Yes	No X
EXEMPTION - Have you excluded from this report any other assets, "uneamed" income, or liabilities of a spouse or dependent cl exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	come, or liabilities of a se on Ethics.	spouse or dependent child because they meet all three tests for	t all three tests for Yes	

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: ROBERT F HYDE

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mineral Richts	1	7	1				П	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the bath is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts. For rental and other real property held for investment, provide a complete address of description, e.g., "rental property," and is city and state. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business that is not publicly traded, state the name geographic location in Block A. Exculse: Your personal residence, including second horses and vacation hornes (unriess there was remain income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you report a privately-traded fund that is an Excepted investment Fund, please check the "Elifebox." If you choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with snyone (JT), in the optional column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	For all IRAs and other retrement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual first (do not use only ticker symbols).	identify (a) each asset held for investment or production of income and with a fair nanket value exceeding \$1.00 at the end of the reportag period, and (b) any clifton reportable esset or stung period income which generated more than \$200 in unearmed income during the year.	≥	
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

SCHEDULE C - EARNED INCOME

, , ,	Name: Robert + Hede
	Page $\mathcal U$ of $\mathcal E$

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME: Be advised that the outside earned income limit and prohibitions on types of income may apply to you after you are on House payroll. The 2018 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,050. The 2019 limit is \$28,440. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

rese, and payments for proposed and seems and a manual promote the seems promoted			
		Am	Amount
Source (include date of receipt for nonorana)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honoradum	\$0	\$500
Examples: Civil War Roundtable (Oct. 2)	Spouse Speech	\$0.000	\$1,000
Orthario County Board of Education	Spouse Salery	ViN	NA
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SCHEDULE D - LIABILITIES

Name: Labert # 446 Page of S reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting by real property including montgages on their personal residence. Exclude: Any montgage on your personal residence hold furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and

(unless you rent it out or are a Member); loans secured by automobiles, household furniture, or liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Repoexceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child." Report liabilities of over \$10,000 owed to any one creditor at any time during the period. New Members: Members are required to report all liabilities secured

				DC, JT		
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Windre Federal	in federal	Mrescan Expres	First Bank of Wilmington, DE	Creditor		
5/11	12/14	11/15	5/16	Date Liability Incurred MO/YR		
2	Crel Card	Court land	Mortgage on Rental Property, Dover, DE	Type of Liability		
	Ø	X		\$10,001- \$15,000	>	
X				\$15,001- \$50,000	69	
				\$50,001- \$100,000	C	
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SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

		Rilleman	Position	pendu and the content calendar year. First year camuluates
		CT Grenors Fast Grand	Name of Organization	penu diru die cultotin carettual year. Firen year canninasee enu new emproyees report positions neigh the current carettual year and two previous years.

SCHEDULE F - AGREEMENTS

Name: Coherd + Hade	Page 6 of 6
ent or arrangement that you have with respect to: future employment; a leave of absence during the period of government service;	government service;
nployer other than the U.S. government, or continuing participation in an employee welfare or benefit plan maintained by a former	intained by a former

Identify the date, parties to, and general terms of any agreems continuation or deferral of payments by a former or current en

•		
Date	Parties to Agreement	Terms of Agreement
1///	SM 109, 17	Able to leter one out
1.1.1		

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
histophere Concep	Public Relation
Mes Go	Public Robetions
Mylvision	Public Relations
Allo Appeciates	Consultant Mexident