

Campaign Contribution Disclosure Report

Georgia Governor Transparency and Campaign Finance Commission

200 Piedmont Avenue | 416 West Tower | Atlanta, GA 30334 | 404-463-1980 | www.ethics.ga.gov

1. Report Type <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment <small>Amendment #</small>		2. Filing is on behalf of (Select One): <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Office Held <small>Ens-Clarke County District 5 County Commissioner</small> <small>(Include county, municipality, district, post or judicial seat)</small> <input type="checkbox"/> Filer ID <small>304</small> <small>(Filer ID that begins with the letter "C")</small> <input type="checkbox"/> Organization <small>Other than Candidate's Campaign Committee</small> <input type="checkbox"/> Committee N <input type="checkbox"/> Filer ID: <small>(Filer ID that begins with the letter "NC")</small>		<small>Use Earlier of Post Mark or Hand-Delivered Date</small> 																																								
3. Identifying and Contact Information <table border="0"> <tr> <td>(1) Jared Hugh Bailey</td> <td>(2) 7/7/22</td> </tr> <tr> <td><i>Full Name of Candidate or Other than Candidate Campaign Committee Name</i></td> <td><i>Today's Date</i></td> </tr> <tr> <td>(3) 145 Marsha Court</td> <td>Athens</td> <td>GA</td> <td>30606</td> </tr> <tr> <td><i>Mailing Address</i></td> <td><i>City</i></td> <td><i>State</i></td> <td><i>Zip Code</i></td> </tr> <tr> <td>(4) 706-338-9019</td> <td colspan="3"><i>and/ or jaredhbailey1@gmail.com</i></td> </tr> <tr> <td><i>Primary Contact Phone Number</i></td> <td colspan="3"><i>E-Mail</i></td> </tr> <tr> <td>(5) If a Candidate or Public Official is a campaign committee (one or more persons) to make campaign transactions, keep financial records of the campaign one reports? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</td> <td colspan="4"></td> </tr> <tr> <td>(6) If yes, is the committee registered w/ Commission? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</td> <td colspan="4"></td> </tr> <tr> <td>(7) If yes, complete the following:</td> <td>Jared Hugh Bailey</td> <td colspan="3">Jared Hugh Bailey</td> </tr> <tr> <td></td> <td><i>Name of Committee Chairperson</i></td> <td colspan="3"><i>Name of Committee Treasurer</i></td> </tr> </table>					(1) Jared Hugh Bailey	(2) 7/7/22	<i>Full Name of Candidate or Other than Candidate Campaign Committee Name</i>	<i>Today's Date</i>	(3) 145 Marsha Court	Athens	GA	30606	<i>Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>	(4) 706-338-9019	<i>and/ or jaredhbailey1@gmail.com</i>			<i>Primary Contact Phone Number</i>	<i>E-Mail</i>			(5) If a Candidate or Public Official is a campaign committee (one or more persons) to make campaign transactions, keep financial records of the campaign one reports? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					(6) If yes, is the committee registered w/ Commission? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					(7) If yes, complete the following:	Jared Hugh Bailey	Jared Hugh Bailey				<i>Name of Committee Chairperson</i>	<i>Name of Committee Treasurer</i>		
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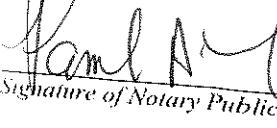
4. Period for which you are Reporting**You Must Check Only One Box**

My Non-Election Year	My Election Year	Run-Offs (Report required only if you are in a Run-Off Election)	Special Election
<input type="checkbox"/> June 30, _____ (year) <input type="checkbox"/> December 31, _____ (year)	<input type="checkbox"/> January 31, _____ (year) <input type="checkbox"/> April 30, _____ (year) <input checked="" type="checkbox"/> June 30, 2022 (year) <input type="checkbox"/> September 30, _____ (year) <input type="checkbox"/> October 25, _____ (year) <input type="checkbox"/> Dec. 31, _____ (year)	<input type="checkbox"/> 6 days before Primary Run-Off _____ (year) <input type="checkbox"/> 6 days before General Run-Off _____ (year) <input type="checkbox"/> 6 days before Special Primary Run-Off _____ (year) <input type="checkbox"/> 6 days before Special Run-Off _____ (year)	<input type="checkbox"/> 15 days before Special Primary, _____ (year) <input type="checkbox"/> 15 days before Special, _____ (year) <input type="checkbox"/> Dec. 31, _____ (year)
Supplemental Reporting			
<input type="checkbox"/> June 30, _____ (year) <input type="checkbox"/> December 31, _____ (year)			

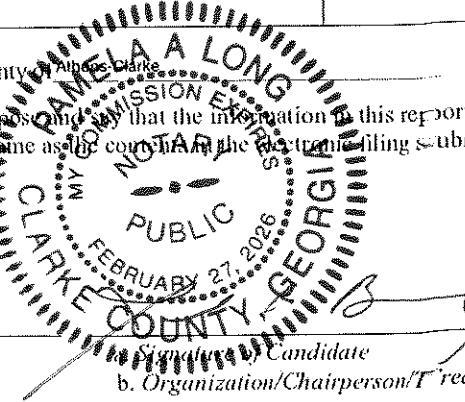
*Supplemental reports are required of candidates who have unsuccessfully campaigned for office or have resigned from office. See O.C.G.A. § 21-5.

State of **Georgia**County of **Clarke**

I, _____, being duly sworn (affirm), declare and say that the information in this report form is complete, true, and correct. Further, I affirm that the contents in this report are the same as the contents of the electronic filing submitted, if also electronically filed.

Sworn to and subscribed before me on **July 7, 2022**


2126171
Commission Expiration



b. Organization/Chairperson/Treasurer

State of Georgia
Campaign Contribution Disclosure Re
Summary Report

CONTRIBUTIONS RECEIVED

		Kind eted Value	Cash Amount
1	I have no contributions to report.		
	<input checked="" type="checkbox"/> I have the following contributions, including Common Source, to report:		
2	A. If this is the first time to file a disclosure report for the current office sought, ENTER 0 in both columns (one time only); or B. If this is the first report of this Election Cycle*, ENTER 0 in the in-kind column and list any net balance on hand brought forward from the previous election cycle in the cash amount column (Line 15 of previous report, or total funds left over at year end of previous cycle); or C. If this filing is the second or subsequent filing of this Election Cycle, list total from Line 6 of previous report in both the in-kind and cash amount columns.	0.00	\$6,550.00
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.	\$0	\$750.00
3a	All loans received this reporting period.		\$0
3b	Interest earned on campaign account this reporting period.		\$0
3c	Total amount of investments sold this reporting period.		\$0
3d	Total amount of cash dividends and interest paid out this reporting period.		\$0
4	Total amount of all separate contributions of \$100 or less received in this reporting period and not listed on the "Itemized Contributions" page. "Common Source" contributions must be aggregated on the "Itemized Contributions" page.		\$1434.00
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)	\$0	\$2184.00
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)	\$250.00	\$7984.00

EXPENDITURES MADE

7	I have no expenditures to report.		
	<input checked="" type="checkbox"/> I have the following expenditures to report:		
8	Total expenditures made and reported prior to this reporting period. If this is the A. First report of this Election Cycle*, ENTER 0. B. Second or subsequent filing ENTER Line 12 of previous report.		\$6305.85
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		\$1899.40
10	Total amount of all separate expenditures of \$100.00 or less that were made in this reporting period and not listed on the "Itemized Expenditures" page		\$528.75
11	Total expenditures reported this period. (Line 9 + 10)		\$2428.15
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		\$8734.00

INVESTMENTS

13	Total value of investments held at the beginning of this reporting period.		\$0
14	Total value of investments held at the end of this reporting period.		\$0

TOTAL NET BALANCE ON HAND

15	Net balance on hand. (Line 6 - 12 + 14)		\$0
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* O.C.G.A. 21-5-3(10) : Election cycle means the period from the day following the date of an election or appointment of a person to elective public office through a of the next such election of a person to the same public office and shall be construed and applied separately for each elective office including the date.

State of Georgia
Campaign Contribution Disclosure Report
Itemized Contributions

Must list contributions received by a single contributor for which the aggregate total more than \$100.00.

Note: Loans are no longer reported in "Itemized Contributions" section. See Loan Reporting section below.

Full Name of Contributor Mailing Address (Affiliation of Committee if any)	Contributor		Election Cycle**	Cash Amount	In-Kind Contributions
	Received Date	Occupation & Employer			Estimated Value
	Contribution Type*				Description
First Name or Business Name Robert	Date 5/19/2002	Occupation Retired		Cash Amt. \$250.00	Est. Value
Last Name Smith			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special		
Address 160 Rock Glen Road	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	<input type="checkbox"/> Run-Off Special Primary		Description
Address2					
City Athens					
State GA	Zip 306				
Aff. Comm.					
First Name or Business Name Sean	Date 5/25/2022	Occupation contractor		Cash Amt. \$200.00	Est. Value
Last Name Hogan			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special		
Address 464 Boulevard	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer self	<input type="checkbox"/> Run-Off Special Primary		Description
Address2					
City Athens					
State GA	Zip 30601				
Aff. Comm.					
First Name or Business Name Lucy	Date 5/28/2022	Occupation Retired		Cash Amt. \$300.00	Est. Value
Last Name Rowland			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary		
Address 475 University Drive	<input checked="" type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
Address2					
City Athens					
State GA	Zip 30605				
Aff. Comm.					

Itemized Contributions Page Total \$ 750.00

\$ 0.00

State of Georgia
Campaign Contribution Disclosure Report
Outstanding Indebtness

Election Cycle*: Primary		Election Year: 2022	Amount
1	Outstanding indebtedness at the beginning of this reporting period.		\$0
2	Loans received this reporting period.		\$0
3	Deferred payment of expenses this reporting period		\$0
4	Payments made on loans this reporting period.		\$0
5	Credits received on loans this reporting period		\$0
6	Payments this reporting period on previously deferred expenses.		\$0
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		\$0
Election Cycle*: _____		Election Year: _____	Amount
1	Outstanding indebtedness at the beginning of this reporting period.		
2	Loans received this reporting period.		
3	Deferred payment of expenses this reporting period		
4	Payments made on loans this reporting period.		
5	Credits received on loans this reporting period		
6	Payments this reporting period on previously deferred expenses.		
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		
Election Cycle*: _____		Election Year: _____	Amount
1	Outstanding indebtedness at the beginning of this reporting period.		
2	Loans received this reporting period.		
3	Deferred payment of expenses this reporting period		
4	Payments made on loans this reporting period.		
5	Credits received on loans this reporting period		
6	Payments this reporting period on previously deferred expenses.		
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)		

* Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)
 Public Officer/Candidate/Other Than Candidate Committee Name

First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Last Name						
Address						
Address2		<input type="checkbox"/> Monetary	Employer	<input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Description
City		<input type="checkbox"/> In-Kind				
State	Zip	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Last Name						
Address						
Address2		<input type="checkbox"/> Monetary	Employer	<input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Description
City		<input type="checkbox"/> In-Kind				
State	Zip	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Last Name						
Address						
Address2		<input type="checkbox"/> Monetary	Employer	<input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Description
City		<input type="checkbox"/> In-Kind				
State	Zip	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Last Name						
Address						
Address2		<input type="checkbox"/> Monetary	Employer	<input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan		Description
City		<input type="checkbox"/> In-Kind				
State	Zip	<input type="checkbox"/> Common Source				
Aff. Comm.		<input type="checkbox"/> Credit Received on Loan				
Itemized Contributions Page Total \$ 0 \$ 0						

* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

** Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)

*** If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

Loan Reporting

Name of Lender & Mailing Address Lender Name (First Name, Business, Inst.) N/A		1. Date of Loan 2. Amount of Loan 3. Election Cycle** 1. N/A	Person(s) responsible for repayment of loan & Mailing Address First Name N/A	1. Occupation & 2. Place of Employment 3. Fiduciary Relationship*** 1. N/A	
Lender Last Name		2.	Last Name	2.	
Address		3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address	3. <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name	
Address2			Address2		
City			City		
State	Zip		State	Zip	
Lender Name (First Name, Business, Inst.)		1.	First Name	1.	
Lender Last Name		2.	Last Name	2.	
Address		3. <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Address	3. <input type="checkbox"/> Public Officer <input type="checkbox"/> Candidate <input type="checkbox"/> Other Than Candidate Committee Name	
Address2			Address2		
City			City		
State	Zip		Fort Wayne		
Reference: OCGA § 21-5-34(b)(1) Loan Page Total \$ <u> 0 </u>					

* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

** Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)

*** If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

State of Georgia
Campaign Contribution Disclosure Report
Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total more than \$100.00.

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name Athens Printing Company Last Name	Date 5/26/2022 (\$796.24), 6/9/2022 (\$796.24)	Occupation Printing Company	Campaign Material Printing and mailing services	\$1592.48
Address 1135 Cedar Shoals Drive Address2	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer Athens Printing Company		
City Athens State GA	Zip 30605			
First Name Sweetwater, Inc. Last Name	Date 5/4/2022	Occupation Electronics dealer	Audio recording equipment	\$106.92
Address 5501 US Highway 30 W Address2	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer Sweetwater, Inc.		
City Fort Wayne State IN	Zip 46818			
First Name Cameron Last Name Harrelson	Date 5/24/2022	Occupation Campaign Consultant	Social media and graphic design	\$200.00
Address 905 Henderson Extension Address2	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer Self		
City Athens State GA	Zip 30606			

1899.40

Page Total \$

* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment)
 Public Officer/Candidate/Other Than Candidate Committee Name

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name	Date	Occupation		
Last Name				
Address	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2				
City				
State	Zip			
First Name	Date	Occupation		
Last Name				
Address	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2				
City				
State	Zip			
First Name	Date	Occupation		
Last Name				
Address	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2				
City				
State	Zip			
First Name	Date	Occupation		
Last Name				
Address	<input type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment	Employer		
Address2				
City				
State	Zip			

* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment) Public Officer/Candidate/Other Than Candidate Committee Name Page Total \$ 0.00

State of Georgia
Campaign Contribution Disclosure Report
Investments Statement

1. Investment Name N/A		Account # N/A			
Institution/Person Holding Account		Value at beginning of reporting period \$			
Mailing Address		Value at end of reporting period \$			
Address2		Difference in value \$			
		Interest Paid Out \$			
		Cash Dividends \$			
Investment Transactions					
Date	Person(s) Involved in Transaction	Value of investment purchased	Value of investment sold	Profit	Loss
2. Investment Name		Account #			
Institution/Person Holding Account		Value at beginning of reporting period \$			
Mailing Address		Value at end of reporting period \$			
Address2		Difference in value \$			
		Interest Paid Out \$			
		Cash Dividends \$			
Investment Transactions					
Date	Person(s) Involved in Transaction	Value of investment purchased	Value of investment sold	Profit	Loss
Total value of investments at beginning of reporting period \$		Page Total Cash Dividends: \$ \$0			
Total value of investments at end of reporting period \$		Page Total Interest Paid Out: \$ \$0			
Total difference in value \$		Page Total Profit: \$ \$0			
		Page Total Loss: \$ \$0			

State of Georgia
Campaign Contribution Disclosure Report
Addendum Statement

The Addendum Statement should be used for explanation of any additional information needed to complete an accurate filing of this report.
Information that is to be reported in the body of the report should not be listed on Addendum Statement.

Jared Hugh Bailey

Public Officer/Candidate/Other Than Candidate Committee Name

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