CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

DATE OF REPORT	 								
10 10 10 10 10 INDICATE OF CONTROL TEE									
	JASON	7 0 B B	0661						
2.b. IF COMMITTEE, NAME OF CANDIDATE				3. ELECTION DA					
				AUG 4	12022				
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City								
1013 WHITZE/ PLACE	City HEMOLESO J	rine	State T ∼	Zip Code 37075	9316275377				
4.b. CANDIDATE'S HOME ADDRESS (if differen				<u> </u>	73.0				
Street or Rural Route	City *		State	Zip Code	Phone ♣ 4 (
OFFICE SOUGHT (include district number, if applicable) NAME OF POLITICAL TREASURER (may be candidate)									
COUNTY COMMISSION - DIST 2:	COUNTY COMMISSION - DIST 23 JASON W								
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE-PRIMARY	PRE- GENERAL	MID-YEAR SUPPLEMENTA	YEAR-END SUPPLEMENTAL				
8.a. BEGINNING DATE OF REPORTING PERIOD 4/23/2022			DATE OF REPO	RTING PERIOD					
9. (Check one)									
a. This campaign is exempt from detaile tures total \$1,000 or less for this repo b. This campaign is required to file a det and/or expenditures total more than \$	πing period. (Comp ailed financial disclo	ilete items 12d., isure because c	12e. and 12f.)						
I/we do solemnly swear or affirm that the in accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we she benefit of the candidate or for any other non signature of candidate.	ins and expenditure: swear or affirm that i	s required to be no campaign co	reported by the ntributions hav ederal internal	e candidate committ e been expended fo revenue code.	ee by the Compoier				
signature of candidate	date		signature o	f political treasurer	date				
11. WITNESS SIGNATURE signature of witness	7/7/26 date	L	signati	ure of witness	date				
12. SUMMARY									
a. BALANCE ON HAND LAST REPORT		••••••		\$ 2911.2	.8				
b. TOTAL RECEIPTS THIS PERIOD			******************	_{\$} 735.°	_				
c. TOTAL DISBURSEMENTS THIS PERIOD	ΔM		РМ	\$ 2795.	05				
d. BALANCE ON HAND (12.a. plus 12.b. mi	лиs 12.c.) J UL	11 2022			\$ 851.23				
e. TOTAL LOANS OUTSTANDING	SUMN ELECTIO	ER COUNTY N COMMISSIO	DN		\$				
f. TOTAL OBLIGATIONS OUTSTANDING					\$				

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD							
JASON W BAGGET	FROM: 4 23 (22 TO: 6/30/22							
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	7-00							
a. Unitemized Contributions (\$100 or less from each source this	period)\$							
b. Itemized Contributions (over \$100 from each source this perio	d)s 360 =-							
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add	15.a. and 15.b.)\$ 735-							
16. LOANS RECEIVED THIS REPORTING PERIOD	\$							
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$							
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in it	em 12.b.)\$ 735 ~							
DISBURSEMENTS								
19. EXPENDITURES (other than loan payments)								
a. Expenditures (\$100 or less each payee this period) (must be list	ed by category - e.g., printing, postage, gasoline)							
Bank fees	\$ <u>44.61</u>							
PRINTING	\$ <u>82.3</u> 0							
WG P663	s 104.86							
SIGN HARDWARE	\$ <u>80.10</u>							
	\$							
	\$							
	\$							
	\$							
	\$							
T. 1. 55	. 311 87							
Total of Expenditures (\$100 or less each payee)								
b. Itemized Expenditures (Over \$100 each payee this period)								
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a								
20. LOAN REPAYMENTS MADE THIS PERIOD								
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown i	n item 12.c.)							
22.IN-KIND CONTRIBUTIONS								
a. Unitemized in-kind contributions (\$100 or less from each source	his period)\$							
· · · · · · · · · · · · · · · · · · ·								
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (a	dd 22.a. and 22.b.)\$							
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.) (mu	st be shown i item 12.f.)\$							



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE REPORT COVERING THE PERIOD								
JASON W BACKETT FROM: 4/23/22 TO: (Amount								
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	7 0							
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)								
First Name LYNN	Middle Nam	ę.	Contribution Received For:	Amount of Contribution				
Last Name/Organization Name TAKACS	· · · · · · · · · · · · · · · · · · ·		Primary Election General Election	110.00				
Address 1531 ANDERSON R	OAO		Runoff (Local Elections Only)					
City HENDERSONVILLE	State	Zip Code	Date of Contribution	Aggregate This Election				
Occupation NA - NOT EMPLE	76D		5/29/2022	110.60				
Employer			1	110 33				
NIA - NOT GMOLD								
First Name Steven	Middle Nan	16	Contribution Received For:	Amount of Contribution				
Last Name/Organization Name PUCIKE #			Primary Election General Election	2500				
Address 228 SANOHES FEREN	RD.	421	Runoff (Local Elections Only)	250-				
City HENDESONVILLE	State	Zip Code	Date of Contribution	Aggregate This Election				
Occupation NIGHT STEAK CLOCK	_		5(17(2022	2530-				
MIGHT STEAK CLOCK		· · - · ! · ·		730				
First Name	Middle Nam	e	Contribution Received For:	Amount of Contribution				
Last Name/Organization Name	<u></u>		☐ Primary Election ☐ General Election					
Address			Runoff (Local Elections Only)					
City	State	Zip Code	Date of Contribution	Aggregate This Election				
Occupation	<u></u>	1						
Employer								
First Name	Иiddle Nam		Contribution Received For:	Amount of County is				
	Find of Hall	·	_	Amount of Contribution				
Last Name/Organization Name			Primary Election General Election					
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

1. NAME OF CANDIDATI			٠	2	REPORT COVER	ING THE PERIOD			
) A5001	N N	BAGGETT		FROM:4/23/2	Z TO: 6/36(ZZ			
				GE (enter \$0 if first itemized page					
4. COMPLETE THE APPROPR	IATE ITEMS FOR I	EACH ITEN	IZED IN-KIND CONTR	RIBUTION (in-kind contributions totaling r	nore than \$100 from any co	ontributor during the period)			
First Name Middle Name				In-Kind Contribution Receive		Value of In-Kind Contribution			
Last Name/Organization Name				Runoff (Local Election					
Address				Date of In-Kind Contribution	,,,,,,	Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer								
First Name		Middle N	ame	In-Kind Contribution Receive	_ * * *	Value of In-Kind Contribution			
Last Name/Organization Name		_		Runoff (Local Election	Primary Election General Election				
Address				Date of In-Kind Contribution		Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer	,	\						
First Name		Malata N	7	In-Kind Contribution Receive		Art Contract			
				Primary Election		Value of In-Kind Contribution			
Last Name/Organization Name				Runoff (Local Election	s Only)				
Address				Date of In-Kind Contribution		Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer			abla					
First Name		Middle N	ame	No-Kind Contribution Receive		Value of In-Kind Contribution			
Last Name/Organization Name		1		Primary Election					
Address				Date of in-Kind Contribution	s Only)	Aggregate this Election			
City	 -	State	Zip Code	Description of In-Kind Contribution		<u></u>			
Occupation	Employer	<u>.l</u>							
First Name	<u> </u>	Middle Na	me	In-Kind Contribution Receive		Value of In-Kind Contribution			
ast Name/Organization Name		1		☐ Primary Election ☐ Runoff (Local Elections	General Election				
Address				Date of In-Kind Contribution		Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution	/				
Occupation	Employer	<u> </u>	_ 						
5. TOTAL ITEMIZED IN-KIN (Carry forward to item 3. of next p			are used)	<u> </u>					
(If this is the last page of in-kind o	ontributions, this amou	nt must be s	hown in item 22b. of summ	ary.)					
SS-1128 (Rev. 2/06)				Page	U of 7	DDA 1150			

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		W BASS	-41	2. REPORT COVE	
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT	<u> </u>		- , 		Amount
COMPLETE THE APPROPRIATE ITEMS FOR					
First Name	Middle Na		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			-		
POSTCARD MANIA			MAILLES + PO	STAGE	2077.59
Address 2145 SUNNYDAG	·			,	
City CHARUMER	State	Zip Code 33765			
First Name	Middle Na		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	<u> </u>		-		
MR SIGN MA Address 129 COMMENCE	N LL	, <u>C</u>	_		405.59
	7		SIGNS		
City (1tN0te81NVING	State	37075			
First Name	Middle Nar	me	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			1		
Address	/				·
City	State	Zip Code	-		
	ļ				
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address		,-,,- <u>,-,-</u> ,	†]
City	State	Zip Code	-		
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	· · · · · · · · · · · · · · · · · · ·	*			
Address	<u> </u>				
City	State	Zip Code			
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	'	···			
Address					
City	State	Zíp Code			
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional page (if this is the last page of expenditures, this amount mus					2483,18

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE O					·			2. REPORT	COVER	ING THE PERIOD	
	<u>ل</u>	FON	W	13/	LOGEH			FROM: 4/23/	27	TO: 6/30(2Z	
3. COMPLETE THE APPROP	PRIATE ITEMS F	OR EACH	ITEMIZ	ED LOAN	(loans totaling m	nore than \$10	0 from any so	urce during the	period)		
Complete the Following for the Si	ource of the Loan									-	
First Name	Middle Nam	Middle Name			Loan Balance of Period)	ce Loans Received		Loan Payments		Outstanding Loan Balance (End of Period)	
Last Name/Organization Name											
Address				Loan Receiv			J	Date of L	oan		
City	State	State Zip Code			Primary Election General Election Runoff (Local Elections Only)						
	List All Endors	ers or Guar	antors fo	r Above Los	ın (If more spa	ce is neede	d please atta	ach a page)			
First Name		Middle Nam	e		First Name				Middle	Name	
Last Name/Organization Name					Last Name/Org	anization Na	ne				
Address		$\overline{}$			Address						
City		State	Zip Co	de	City	·			State	Zip Code	
Amount Guaranteed Outstanding	· · ·	/		··	Amount Guarar	teed Outstan	ding	<u> </u>	<u> </u>		
First Name		Middle Nam	•		First Name		-		Middle	Vame	
Last Name/Organization Name				<u> </u>	Last Name/Org	anization Nar	ne		!		
Address				$\overline{}$	Address		 - ·				
City		State	Zip Coo	de	City	.,			State	Zip Code	
Amount Guaranteed Outstanding			-!		Amount Guaran	teed Outstand	ding				
First Name		Middle Name			First Name		<u></u>		Middle	Name	
Last Name/Organization Name	<u>.</u>				Last Name/Orga	nization Nam	 ne		<u> </u>		
Address					Address	$\overline{}$		·			
City		State	Zip Cod	le	City	+	 	·	State	Zip Code	
Amount Guaranteed Outstanding	. <u></u>	<u></u>	<u> </u>	· ·	Amount Guarant	eed Outstand	ling	1-r	<u> </u>	<u>.</u>	
First Name		Middle Name			First Name		\	-	Middle N	ame	
Last Name/Organization Name	1				Last Name/Orga	nization Nam	e \				
Address					Address	<u></u>	- +	 			
City		State	Zip Code	e	City			 	State	Zip Code	
Amount Guaranteed Outstanding	<u></u>		Ļ		Amount Guarante	eed Outstandi	ng	$\overline{}$	<u> </u>		
Totals for all Loans (complete (Total loans received should also be she (Total loan payments should also be she (Total cutstanding loan balance should a	own in item 16, on sun own in item 20, on sun	imary page.)			Outstanding Load (Beginning of I		Loans Received	Loa Paym		Outstanding Loan Balance (End of Period)	
SS-1132 (Rev. 4/02)			<u> </u>		7	Pa	ge 6	. of		RDA 1159	

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	١.			2. REPORT CO	VERING THE PE	RIOD
		3A6664	FROM: 4 2	6/30/22		
COMPLETE THE APPROPRIATE ITEMS OBLIGATION (obligations totaling more that person/vendor at the end of the reporting)	an \$100 o	CH ITEMIZED wed to any	Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balanc (End of Period)
First Name	Middle N	lame				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation	\	_ _ k		<u></u>	<u> </u>	<u> </u>
First Name	Middle N	ame				
Last Name/Business Name	\perp	· · · · · · · · · · · · · · · · · · ·			: 	
Address		\ 				
City	State	ZipCode	-			
Description of Obligation	<u>.i</u>				<u> </u>	
First Name	Middle N	ame				
Last Name/Business Name			 			į
Address			_\			
City	State	7:- 0-2	_ \			
Description of Obligation	State	Zip Code				
Description of Obligation						
First Name	Middle Na	ame				
Last Name/Business Name	<u> </u>					
Address	-	- · · · · · · · · · · · · · · · · · · ·	\dashv			
City	State	Zip Code	7	\	i	
Description of Obligation	<u> </u>				· · · · · · · · · · · · · · · · · · ·	
First Name	Middle Na	me				
Last Name/Business Name	<u> </u>	<u> </u>				
Address			-			į
City	State	Zip Code	-	\		
Description of Obligation	<u> </u>	<u> </u>			<u></u>	
4. TOTALS		-	1	-		
(Total from Outstanding Balance - (End of Period) or in item 23b. on summary page.)	olumn mus	t also be shown		ļ		
Pa						