

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 4/11/2022		2.a. NAME OF CANDIDATE OR COMMITTEE Jodi Polaha Jones		
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE 2022-08-04		
4.a. CAMPAIGN ADDRESS AND PHONE				
Street or Rural Route 315 W Locust St.	City Johnson City	State TN	Zip Code 37604	Phone (423) 946-0444
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)				
Street or Rural Route 315 W Locust St.	City Johnson City	State TN	Zip Code 37604	Phone (423) 946-0444
5. OFFICE SOUGHT (include district number, if applicable) County Commissioner		6. NAME OF POLITICAL TREASURER (may be candidate) Jodi Jones		
7. CATEGORY OR REPORT (Check one)				
☒ FIRST QUARTER	☐ SECOND QUARTER	☐ THIRD QUARTER	☐ FOURTH QUARTER	☐ PRE- PRIMARY
				☐ PRE- GENERAL
				☐ MID-YEAR SUPPLEMENTAL
				☐ YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD 2022-01-16		8.b. ENDING DATE OF REPORTING PERIOD 2022-03-31		
9. (Check one)				
a. ☐ This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.)				
b. ☒ This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.				
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.				
_____ signature of candidate		_____ signature of political treasurer		
_____ signature of witness		_____ signature of witness		
_____ date		_____ date		
11. WITNESS SIGNATURE				
12. SUMMARY				
a. BALANCE ON HAND LAST REPORT		\$291.44		
b. TOTAL RECEIPTS THIS PERIOD		\$1,295.00		
c. TOTAL DISBURSEMENTS THIS PERIOD		\$387.73		
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$1,198.71		
e. TOTAL LOANS OUTSTANDING		\$0.00		
f. TOTAL OBLIGATIONS OUTSTANDING		\$0.00		



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Jodi Polaha Jones	14. REPORT COVERING THE PERIOD FROM: 2022-01-16 TO: 2022-03-31
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RECEIPTS
15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 245.00
 b. Itemized Contributions (over \$100 from each source this period) \$ 1,050.00
 c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 1,295.00

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 item 12.b.) \$ 1,295.00

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)

bank fees \$ 22.65
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____

Total of Expenditures (\$100 or less each payee) \$ 22.65
 b. Itemized Expenditures (Over \$100 each payee this period) \$ 365.08
 c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 387.73

20. LOAN REPAYMENTS MADE THIS PERIOD \$ _____
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 387.73

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ 100.00
 b. Itemized in-kind contributions (over \$100 from each source this period) \$ 150.00
 c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ 250.00

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 in item 12.f.) \$ _____



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jodi Polaha Jones				2. REPORT COVERING THE PERIOD FROM: 2022-01-16 TO: 2022-03-31	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$0.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name Bonnie		Middle Name		Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Last Name/Organization Name Whitfield					
Address 717 W. Pine St.					
City Johnson City		State TN	Zip Code 37604	Date of Contribution 2022-03-27	
Occupation Artist					
Employer Self					
First Name Leigh		Middle Name		Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Last Name/Organization Name McIntyre					
Address 626 W Maple St					
City Johnson City		State TN	Zip Code 37604	Date of Contribution 2022-03-27	
Occupation Physician					
Employer State of Franklin Healthcare					
First Name Amber		Middle Name		Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Last Name/Organization Name Lee					
Address 723 W Pine					
City Johnson City		State TN	Zip Code 37604	Date of Contribution 2022-03-27	
Occupation Lawyer					
Employer Lee Law LLC					
First Name Margie		Middle Name		Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Last Name/Organization Name Kendall					
Address 422 W Locust St.					
City Johnson City		State TN	Zip Code 37604	Date of Contribution 2022-03-27	
Occupation fundraising					
Employer Bloomerang					
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.)					\$600.00



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jodi Polaha Jones				2. REPORT COVERING THE PERIOD FROM: 2022-01-16 TO: 2022-03-31			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$600.00		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name Natalie		Middle Name		Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)		Amount of Contribution \$150.00	
Last Name/Organization Name Smith							
Address 117 W Pine St. Apt 3							
City Johnson City		State TN		Zip Code 37604		Date of Contribution 2022-03-27	Aggregate This Election \$150.00
Occupation Faculty							
Employer ETSU							
First Name Bess		Middle Name		Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)		Amount of Contribution \$150.00	
Last Name/Organization Name Lewis							
Address 312 W Locust St.							
City Johnson City		State TN		Zip Code 37604		Date of Contribution 2022-03-27	Aggregate This Election \$150.00
Occupation Psychologist							
Employer Nashville Psych LLC							
First Name Karyn		Middle Name		Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)		Amount of Contribution \$150.00	
Last Name/Organization Name Cross							
Address 713 Pine St.							
City Johnson City		State TN		Zip Code 37604		Date of Contribution 2022-03-27	Aggregate This Election \$150.00
Occupation none							
Employer none							
First Name		Middle Name		Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)		Amount of Contribution	
Last Name/Organization Name							
Address							
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.)					\$1,050.00		



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jodi Polaha Jones				2. REPORT COVERING THE PERIOD FROM: 2022-01-1 TO: 2022-03-3		
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$0.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)						
First Name Nathan		Middle Name		In-Kind Contribution Received For: ☒ Primary Election ☐ General Election		Value of In-Kind Contribution \$150.00
Last Name/Organization Name Brand				☐ Runoff (Local Elections Only)		
Address 417 W Pine St.				Date of In-Kind Contribution 2022-03-27		Aggregate this Election \$150.00
City Johnson City		State TN	Zip Code 37604		Description of In-Kind Contribution food, drinks, and space for fundraiser	
Occupation Restaurant Owner		Employer Self				
First Name		Middle Name		In-Kind Contribution Received For: ☐ Primary Election ☐ General Election		Value of In-Kind Contribution
Last Name/Organization Name				☐ Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code		Description of In-Kind Contribution	
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For: ☐ Primary Election ☐ General Election		Value of In-Kind Contribution
Last Name/Organization Name				☐ Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code		Description of In-Kind Contribution	
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For: ☐ Primary Election ☐ General Election		Value of In-Kind Contribution
Last Name/Organization Name				☐ Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code		Description of In-Kind Contribution	
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For: ☐ Primary Election ☐ General Election		Value of In-Kind Contribution
Last Name/Organization Name				☐ Runoff (Local Elections 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 CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)					\$150.00	



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jodi Polaha Jones			2. REPORT COVERING THE PERIOD FROM: 2022-01-1 TO: 2022-03-31		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$0.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
First Name Jodi		Middle Name Polaha		Purpose of Expenditure website	Amount of Expenditure \$305.08
Last Name/Business Name Jones					
Address 315 W Locust St.					
City Johnson City	State TN	Zip Code 37604			
First Name Jodi		Middle Name Polaha		Purpose of Expenditure bank fees	Amount of Expenditure \$60.00
Last Name/Business Name Jones					
Address 315 W Locust St.					
City Johnson City	State TN	Zip Code 37604			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)					\$365.08

