



Filing ID #10078335

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • B81 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Jasmine Clark
Status: Congressional Candidate
State/District: GA13

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2026
Filing Date: 08/15/2026
Period Covered: 01/01/2025– 07/14/2026

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
High Yield Savings Acct [BA]		\$15,001 - \$50,000	Interest	\$201 - \$1,000	\$201 - \$1,000
Inherited IRA [IH]		\$1,000,001 - \$5,000,000	None		
Life Insurance [WU]		\$15,001 - \$50,000	Dividends	\$201 - \$1,000	\$201 - \$1,000
Retirement 403(b)(7) [OT]		\$100,001 - \$250,000	None		
DESCRIPTION: Employer Retirement Plan- 403(b)(7)					

* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
GA General Assembly	Salary	\$20,000.00	\$39,000.00
Emory University	Salary	\$59,000.00	\$105,000.00

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	Carrington	Feb 2020	Mortgage	\$100,001 - \$250,000
	Mohela	Dec 2013	Student Loan	\$100,001 - \$250,000

SCHEDULE E: POSITIONS

Position	Name of Organization
State Representative	GA General Assembly
Asst Professor	Emory Univ/GA General Assembly

SCHEDULE F: AGREEMENTS

None disclosed.

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

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

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 benefiting you, your spouse, or dependent child?
☐ Yes ☒ No

Exemption: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?
☐ Yes ☒ No

CERTIFICATION AND SIGNATURE

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Jasmine Clark , 08/15/2026