CAMPAIGN FINANCIAL DISCLOSURE STATEMENT
For State and Local Candidates
For Single-Candidate Committees

1. Date: 2/5/2026 2.a. Candidate or Committee Name: Joseph Day

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026

4. Campaign Address: PO Box 1601

City: Goodlettsville State: TN Zip Code: 37070 Phone: _____

5. Candidate Home Address: 188 Ivy Hill LN

City: Goodlettsville State: TN Zip Code: 37072 Phone: _____

Candidate Email Address: josephpday@gmail.com

6. Office Sought: (include district number, if applicable) Circuit Court Clerk

7. Name of Political Treasurer (may be candidate): Eric Ruffin

Political Treasurer Email Address: eruffin@ruffinpc.com

8. Category or Report: (check one)

☐ First Quarter ☐ Second Quarter ☐ Third Quarter ☐ Fourth Quarter ☐ Pre-Primary ☐ Pre-General
☐ Mid-Year Supplemental ☑ Year-End Supplemental ☐ Runoff Election

9. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

10. Detailed Disclosure: (Check one)

☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total $1,000 or less AND expenditures total $1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)

☑ 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.

11. 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.

DEC1-476B-8823-589L
02/05/26 - 3:05 PM

Candidate Signature	Date	Political Treasurer Signature	Date
Witness Signature	Date	Witness Signature	Date

12. Summary:

a.	Balance On Hand Last Report	$ $7,136.99
b.	Total Receipts This Period	$ $4,050.00
c.	Total Disbursements This Period	$ $6,870.23
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $4,316.76
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Joseph Day

14. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ $400.00
(Note: Effective January 16, 2023, Unitemized Contributions are capped at $2,000. See *Instructions* for more information.)

b. Itemized Contributions (over $100 from each source this period) ..... $ $3,650.00

c. Loans Received This Reporting Period ..... $

d. Interest Received This Reporting Period ..... $

e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) ..... $ $4,050.00

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ $6,870.23
(Note: Effective January 16, 2023, all expenditures must be itemized.)

b. Loan Repayments Made This Period ..... $

c. Total Obligation Payments Made This Period ..... $

d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.) ..... $ $6,870.23

17. In-Kind Contributions:

a. Unitemized In-Kind Contributions Received This Period ..... $

b. Itemized In-Kind Contributions Received This Period ..... $

c. Total In-Kind Contributions Received This Period ..... $

18. Obligations:

a. Total Obligations Outstanding (must be shown in item 12.f.) ..... $

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Joseph Day

2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Don Middle Name: _____ Last Name: Holloman

Address: 16246 Crest Cove Rd City: Charlotte State: NC Zip Code: 28278

Occupation: Tax Accounting Employer: Holloman Taxes

Contribution Received For: Primary Election ■General Election Runoff (Local Elections Only)

Amount of Contribution: $ $250.00 Date of Contribution: 7/8/2025 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Kevin Middle Name: _____ Last Name: Jones

Address: 1801 8th Avenue South City: Nashville State: TN Zip Code: 37203

Occupation: Attorney Employer: Self

Contribution Received For: Primary Election ■General Election Runoff (Local Elections Only)

Amount of Contribution: $ $250.00 Date of Contribution: 9/8/2025 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Alissa Middle Name: _____ Last Name: Poss

Address: 301 Demonbreun Street Unit 1308 City: Nashville State: TN Zip Code: 37203

Occupation: Attorney Employer: Law Office of A. Michelle Poss

Contribution Received For: Primary Election ■General Election Runoff (Local Elections Only)

Amount of Contribution: $ $250.00 Date of Contribution: 9/13/2025 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Crystal Middle Name: _____ Last Name: Cole

Address: PO Box 160760 City: Nashville State: TN Zip Code: 37216

Occupation: Attorney Employer: Self

Contribution Received For: Primary Election ■General Election Runoff (Local Elections Only)

Amount of Contribution: $ $500.00 Date of Contribution: 12/23/2025 Aggregate This Election: $ $500.00

Total Contributions: $ $1,250.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Joseph Day

2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $1,250.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: John Middle Name: _____ Last Name: Cheadle

Address: 503 Belle Meade Blvd City: Nashville State: TN Zip Code: 37205

Occupation: Attorney Employer: Cheadle Law

Contribution Received For: Primary Election ■General Election Runoff (Local Elections Only)

Amount of Contribution: $$1,000.0 Date of Contribution: 1/8/2026 Aggregate This Election: $ $1,000.0

Business or Organization Name: _____ **OR**

First Name: Rachel Middle Name: _____ Last Name: Zamata Swanson

Address: 220 Pebble Glen Drive City: Franklin State: TN Zip Code: 37064

Occupation: Attorney Employer: Law Office of Rachel Zamata LLC

Contribution Received For: Primary Election ■General Election Runoff (Local Elections Only)

Amount of Contribution: $$150.00 Date of Contribution: 1/9/2026 Aggregate This Election: $ $150.00

Business or Organization Name: TN Law Group **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1300 Division St., Suite 102 City: Nashville State: TN Zip Code: 37203

Occupation: Attorney Employer: TN Law Group

Contribution Received For: Primary Election ■General Election Runoff (Local Elections Only)

Amount of Contribution: $$500.00 Date of Contribution: 9/29/2025 Aggregate This Election: $ $500.00

Business or Organization Name: Perdue, Brandon, Fielder Collins & Mott **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1235 North Loop, Suite 600 City: Houston State: TX Zip Code: 77008

Occupation: Attorney Employer: Perdue, Brandon, Fielder Collins & Mott

Contribution Received For: Primary Election ■General Election Runoff (Local Elections Only)

Amount of Contribution: $$500.00 Date of Contribution: 12/17/2025 Aggregate This Election: $ $500.00

Total Contributions: $ $3,400.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Joseph Day

2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $3,400.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: ____ **OR**
First Name: Joe Middle Name: ____ Last Name: Foster
Address: 508 Brooksboro Terrace City: Nashville State: TN Zip Code: 37217
Occupation: Deputy Clerk Employer: Circuit Court
Contribution Received For: Primary Election ■ General Election Runoff (Local Elections Only)
Amount of Contribution: $ $250.00 Date of Contribution: 9/12/2025 Aggregate This Election: $ $250.00

Business or Organization Name: ____ **OR**
First Name: ____ Middle Name: ____ Last Name: ____
Address: ____ City: ____ State: ____ Zip Code: ____
Occupation: ____ Employer: ____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: $____ Date of Contribution: ____ Aggregate This Election: $ ____

Business or Organization Name: ____ **OR**
First Name: ____ Middle Name: ____ Last Name: ____
Address: ____ City: ____ State: ____ Zip Code: ____
Occupation: ____ Employer: ____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: $____ Date of Contribution: ____ Aggregate This Election: $ ____

Business or Organization Name: ____ **OR**
First Name: ____ Middle Name: ____ Last Name: ____
Address: ____ City: ____ State: ____ Zip Code: ____
Occupation: ____ Employer: ____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: $____ Date of Contribution: ____ Aggregate This Election: $ ____

Total Contributions: $ $3,650.00
(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Joseph Day

2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: 4 All Promos **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: Unknown City: Unknown State: TN Zip Code: 12345

Purpose of Expenditure: Advertising

Amount of Expenditure: $ $1,048.11 Date of Expenditure: $ 8/6/2025

Business or Organization Name: Act Blue **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: PO Box 441146 City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Service Fees

Amount of Expenditure: $ $40.38 Date of Expenditure: $ 1/9/2026

Business or Organization Name: Act Blue **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: PO Box 441146 City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Charitable Contribution

Amount of Expenditure: $ $100.00 Date of Expenditure: $ 9/2/2025

Business or Organization Name: Act Blue **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: PO Box 441146 City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Charitable Contribution

Amount of Expenditure: $ $100.00 Date of Expenditure: $ 12/18/2025

Business or Organization Name: Custom Ink **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: Unknown City: Unknown State: TN Zip Code: 12345

Purpose of Expenditure: Advertising

Amount of Expenditure: $ $951.61 Date of Expenditure: $ 10/3/2025

Total Expenditures: $ $2,240.10

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Joseph Day

2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $2,240.10

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Davidson County Democratic Party **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: Unknown City: Nashville State: TN Zip Code: 12345

Purpose of Expenditure: Conference, Convention

Amount of Expenditure: $ $250.00 Date of Expenditure: $ 9/11/2025

Business or Organization Name: Eventbrite **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: Unknown City: Unknown State: N/A Zip Code: 12345

Purpose of Expenditure: Conference, Convention

Amount of Expenditure: $ $323.80 Date of Expenditure: $ 9/2/2025

Business or Organization Name: Eventbrite **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: Unknown City: Unknown State: N/A Zip Code: 12345

Purpose of Expenditure: Conference, Convention

Amount of Expenditure: $ $188.58 Date of Expenditure: $ 9/12/2025

Business or Organization Name: Eventbrite **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: Unknown City: Unknown State: N/A Zip Code: 12345

Purpose of Expenditure: Conference, Convention

Amount of Expenditure: $ $81.88 Date of Expenditure: $ 12/15/2025

Business or Organization Name: Facebook **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: Unknown City: Unknown State: N/A Zip Code: 12345

Purpose of Expenditure: Advertising

Amount of Expenditure: $ $57.79 Date of Expenditure: $ 12/29/2025

Total Expenditures: $ $3,142.15

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Joseph Day

2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $3,142.15

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Google Ads **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: Unknown City: Unknown State: N/A Zip Code: 12345

Purpose of Expenditure: Advertising

Amount of Expenditure: $ $310.00 Date of Expenditure: $ 1/14/2026

Business or Organization Name: Mail Chimp **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: Unknown City: Unknown State: N/A Zip Code: 12345

Purpose of Expenditure: Advertising

Amount of Expenditure: $ $642.03 Date of Expenditure: $ 12/18/2025

Business or Organization Name: Markful **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1912 John Towers Ave City: El Cajon State: CA Zip Code: 92020

Purpose of Expenditure: Advertising

Amount of Expenditure: $ $308.95 Date of Expenditure: $ 1/6/2026

Business or Organization Name: Mason's **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: Unknown City: Unknown State: N/A Zip Code: 12345

Purpose of Expenditure: Event food

Amount of Expenditure: $ $125.00 Date of Expenditure: $ 11/26/2025

Business or Organization Name: Metro Government Election Commission **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: PO Box 650 City: Nashville State: TN Zip Code: 37202

Purpose of Expenditure: Advertising

Amount of Expenditure: $ $76.73 Date of Expenditure: $ 1/6/2026

Total Expenditures: $ $4,604.86

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Joseph Day

2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $4,604.86

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Old Hickory Area Chamber **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 107 Tyne Blvd. City: Old Hickory State: TN Zip Code: 37138

Purpose of Expenditure: Advertising

Amount of Expenditure: $ $150.00 Date of Expenditure: $ 11/19/2025

Business or Organization Name: Pinnacle bank **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 21 Platform Way S., Suite 2300 City: Nashville State: TN Zip Code: 37203

Purpose of Expenditure: Credit card processing fees

Amount of Expenditure: $ $55.81 Date of Expenditure: $ 1/9/2026

Business or Organization Name: Printing Etc **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1100 Menzler Road City: Nashville State: TN Zip Code: 37210

Purpose of Expenditure: Printing

Amount of Expenditure: $ $884.26 Date of Expenditure: $ 7/17/2025

Business or Organization Name: Printing Etc **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1100 Menzler Road City: NASHVILLE State: TN Zip Code: 37210

Purpose of Expenditure: Printing

Amount of Expenditure: $ $239.17 Date of Expenditure: $ 12/17/2025

Business or Organization Name: Real Love Tennis **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: Unknown City: Unknown State: N/A Zip Code: 12345

Purpose of Expenditure: Charitable Contribution

Amount of Expenditure: $ $250.00 Date of Expenditure: $ 9/9/2025

Total Expenditures: $ $6,184.10

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Joseph Day

2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $6,184.10

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: The Contributor, Inc. **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 154 5th Ave N City: Nashviile State: TN Zip Code: 37219

Purpose of Expenditure: Advertising

Amount of Expenditure: $ $150.00 Date of Expenditure: $ 11/2/2025

Business or Organization Name: USPS **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: Unknown City: Unknown State: TN Zip Code: 12345

Purpose of Expenditure: Postage

Amount of Expenditure: $ $192.00 Date of Expenditure: $ 10/2/2025

Business or Organization Name: Women's Political Collaborative of Tennessee **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: PO Box 961 City: Madison State: TN Zip Code: 37116

Purpose of Expenditure: Charitable Contribution

Amount of Expenditure: $ $50.00 Date of Expenditure: $ 11/5/2025

Business or Organization Name: WordPress **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: Unknown City: Unknown State: N/A Zip Code: 12345

Purpose of Expenditure: Website

Amount of Expenditure: $ $294.13 Date of Expenditure: $ 12/18/2025

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Purpose of Expenditure: _____

Amount of Expenditure: $ _____ Date of Expenditure: $ _____

Total Expenditures: $ $6,870.23

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)