



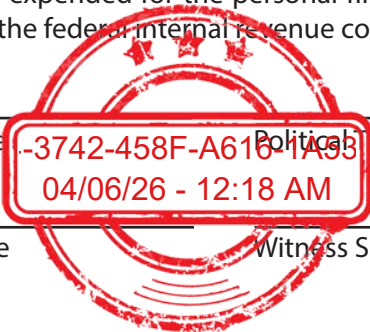
CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 4/5/2026 2.a. Candidate or Committee Name: Ricky D Jones
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
4. Campaign Address: 7231 Northwest Hwy
City: Fairview State: TN Zip Code: 37062 Phone: 6153088381
5. Candidate Home Address: 7231 NW Highway
City: Fairview State: TN Zip Code: 37062 Phone: 6153088381
Candidate Email Address: fhsjacket@gmail.com
6. Office Sought: (include district number, if applicable) County Commissioner - Dist 01
7. Name of Political Treasurer (may be candidate): Amber Mears
Political Treasurer Email Address: Almears25@yahoo.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: 2/18/2026 End Date: 3/31/2026
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.

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



12. Summary:
- | | |
|---|----------------------|
| a. Balance On Hand Last Report | \$ <u>\$1,330.14</u> |
| b. Total Receipts This Period | \$ <u>\$7,250.00</u> |
| c. Total Disbursements This Period | \$ <u>\$4,406.25</u> |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ <u>\$4,173.89</u> |
| e. Total Loans Outstanding | \$ <u>\$1,000.00</u> |
| f. Total Obligations Outstanding | \$ <u>\$0.00</u> |

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Ricky D Jones

14. Reporting Period: Start Date: 2/18/2026 End Date: 3/31/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ _____
(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) \$ \$6,250.00
- c. Loans Received This Reporting Period..... \$ \$1,000.00
- 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.) \$ \$7,250.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$4,406.25
(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.)..... \$ \$4,406.25

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: Ricky D Jones
2. Reporting Period: Start Date: 2/18/2026 End Date: 3/31/2026
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: Jack PAC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 915 Lewisburg Pk City: Franklin State: TN Zip Code: 37064
Occupation: PAC Employer: Jack PAC
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 2/21/2026 Aggregate This Election: \$ \$0.00

Business or Organization Name: _____ **OR**
First Name: Deborah Middle Name: L Last Name: Warnick
Address: 6514 Joseph St City: Franklin State: TN Zip Code: 37064
Occupation: Director Employer: CVB
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 3/9/2026 Aggregate This Election: \$ \$0.00

Business or Organization Name: _____ **OR**
First Name: Marty Middle Name: _____ Last Name: Hunt
Address: 4107 Old Hillsboro Rd City: Franklin State: TN Zip Code: 37064
Occupation: Retired Employer: NA
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 3/9/2026 Aggregate This Election: \$ \$0.00

Business or Organization Name: _____ **OR**
First Name: Michelle Middle Name: Barrett Last Name: Preston
Address: 4295 Old Hillsboro Rd City: Franklin State: TN Zip Code: 37064
Occupation: Veteranarian Employer: Animalia
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 3/9/2026 Aggregate This Election: \$ \$0.00

Total Contributions: \$ \$6,200.00
(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: Ricky D Jones
2. Reporting Period: Start Date: 2/18/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$6,200.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Shirley Middle Name: _____ Last Name: Jones
Address: 7314 Crow Cut Rd City: Fairview State: TN Zip Code: 37062
Occupation: Retired Employer: NA
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 3/13/2026 Aggregate This Election: \$ \$0.00

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: \$ \$6,250.00
(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Ricky D Jones
2. Reporting Period: Start Date: 2/18/2026 End Date: 3/31/2026
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: Vistaprint **OR**

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

Address: 100 Hayden Avenue City: Lexington State: MA Zip Code: 02421

Purpose of Expenditure: Promotional campaign material

Amount of Expenditure: \$ \$76.80 Date of Expenditure: \$ 2/23/2026

Business or Organization Name: Pens.com **OR**

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

Address: 12121 Scripts Summit Dr City: San Diego State: CA Zip Code: 92131

Purpose of Expenditure: Promotional campaign material

Amount of Expenditure: \$ \$438.84 Date of Expenditure: \$ 2/23/2026

Business or Organization Name: TN Republican Party **OR**

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

Address: 95 White Bridge Rd Suite 414 City: Nashville State: TN Zip Code: 37205

Purpose of Expenditure: Partv Reagrstration

Amount of Expenditure: \$ \$50.00 Date of Expenditure: \$ 2/24/2026

Business or Organization Name: SS Graphics Inc. **OR**

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

Address: 4176 6th Street City: Wyandotte State: MI Zip Code: 48192

Purpose of Expenditure: Promotional campaign material

Amount of Expenditure: \$ \$499.00 Date of Expenditure: \$ 2/24/2026

Business or Organization Name: Vistaprint **OR**

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

Address: 100 Hayden Avenue City: Lexington State: MD Zip Code: 02421

Purpose of Expenditure: Promotional campaign material

Amount of Expenditure: \$ \$108.85 Date of Expenditure: \$ 3/2/2026

Total Expenditures: \$ \$1,173.49

(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: Ricky D Jones
2. Reporting Period: Start Date: 2/18/2026 End Date: 3/31/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$1,173.49

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: Vistaprint **OR**

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

Address: 100 Hayden Avenue City: Lexington State: MA Zip Code: 02421

Purpose of Expenditure: Promotional campaign material

Amount of Expenditure: \$ \$122.90 Date of Expenditure: \$ 3/4/2026

Business or Organization Name: SS Graphics Inc. **OR**

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

Address: 4176 6th Street City: Wyandotte State: MI Zip Code: 48192

Purpose of Expenditure: Promotional campaign material

Amount of Expenditure: \$ \$744.03 Date of Expenditure: \$ 3/5/2026

Business or Organization Name: Williamson County Election **OR**

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

Address: 405 Downs Blvd City: Franklin State: TN Zip Code: 37064

Purpose of Expenditure: Voter data

Amount of Expenditure: \$ \$40.00 Date of Expenditure: \$ 2/27/2026

Business or Organization Name: Magnets On The Cheap **OR**

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

Address: 11525A Stonehollow Dr Ste 100 City: Austin State: TX Zip Code: 78758

Purpose of Expenditure: Promotional campaign material

Amount of Expenditure: \$ \$383.38 Date of Expenditure: \$ 3/11/2026

Business or Organization Name: Vistaprint **OR**

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

Address: 100 Hayden Avenue City: Lexington State: MA Zip Code: 02421

Purpose of Expenditure: Promotional campaign material

Amount of Expenditure: \$ \$450.05 Date of Expenditure: \$ 3/11/2026

Total Expenditures: \$ \$2,913.85

(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: Ricky D Jones
2. Reporting Period: Start Date: 2/18/2026 End Date: 3/31/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$2,913.85

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: SS Graphics Inc. **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4176 6th Street City: Wyandotte State: MI Zip Code: 48192
Purpose of Expenditure: Promotional campaign material
Amount of Expenditure: \$ \$499.00 Date of Expenditure: \$ 3/11/2026

Business or Organization Name: Vistaprint **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 100 Hayden Avenue City: Lexington State: MA Zip Code: 02421
Purpose of Expenditure: Promotional campaign material
Amount of Expenditure: \$ \$147.04 Date of Expenditure: \$ 3/16/2026

Business or Organization Name: Vistaprint **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 100 Hayden Avenue City: Lexington State: MA Zip Code: 02421
Purpose of Expenditure: Promotional campaign material
Amount of Expenditure: \$ \$253.48 Date of Expenditure: \$ 3/16/2026

Business or Organization Name: Signs and Wonders **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 208 Scott Street City: Dickson State: TN Zip Code: 37055
Purpose of Expenditure: Promotional campaign material
Amount of Expenditure: \$ \$493.88 Date of Expenditure: \$ 3/16/2026

Business or Organization Name: Ecanvasser- Stripe Inc **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 354 Oyster Point Blvd City: San Francisco State: CA Zip Code: 94080
Purpose of Expenditure: Promotional campaign material
Amount of Expenditure: \$ \$99.00 Date of Expenditure: \$ 3/31/2026

Total Expenditures: \$ \$4,406.25

(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 LOANS - CANDIDATE

1. Candidate or Committee Name: Ricky D Jones
2. Reporting Period: Start Date: 2/18/2026 End Date: 3/31/2026
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: _____ **OR**

First Name: Ricky Middle Name: Dwight Last Name: Jones

Address: 7231 NW Highway City: Fairview State: TN Zip Code: 37062

Outstanding Loan Balance (Beginning) \$ \$1,000.00

Loans Received \$ \$1,000.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$1,000.00

Loan Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

Date of Loan: 2/18/2026

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: _____ **OR**

First Name: Ricky Middle Name: Dwight Last Name: Jones

Address: 7231 NW Highway City: Fairview State: TN Zip Code: 37062

Amount Guaranteed Outstanding: \$ \$1,000.00

Business or Organization Name: _____ **OR**

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

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

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

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

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

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

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

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

Amount Guaranteed Outstanding: \$ _____

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans.)

Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) \$ \$1,000.00

Loans Received \$ \$1,000.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$1,000.00