



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/9/2026 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: josephday@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: 4/28/2026 End Date: 6/30/2026
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>\$1,556.00</u>
b. Total Receipts This Period	\$ <u>\$1,450.00</u>
c. Total Disbursements This Period	\$ <u>\$2,048.56</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$957.44</u>
e. Total Loans Outstanding	\$ <u>\$0.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Joseph Day

14. Reporting Period: Start Date: 4/28/2026 End Date: 6/30/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ \$200.00
(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) \$ \$1,250.00
- 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.) \$ \$1,450.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$2,048.56
(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.)..... \$ \$2,048.56

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: 4/28/2026 End Date: 6/30/2026
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: Briley Middle Name: _____ Last Name: David
Address: 1618 4th Ave N City: Nashville State: TN Zip Code: 37208
Occupation: Judge Employer: Metro Nashville
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 4/30/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: Friends of the Police **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 440 Welshwood Drive City: Nashville State: TN Zip Code: 37211
Occupation: Unknown Employer: Unknown
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 5/4/2026 Aggregate This Election: \$ \$1,000.00

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: \$ _____

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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Joseph Day
2. Reporting Period: Start Date: 4/28/2026 End Date: 6/30/2026
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: _____ **OR**
First Name: Joyce Middle Name: _____ Last Name: Perkins
Address: Unknown City: Unknown State: TN Zip Code: 12345
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$246.96 Date of Expenditure: \$ 5/23/2026

Business or Organization Name: Facebook **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1 Hacker Way City: Menlo Park State: CA Zip Code: 94025
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$149.34 Date of Expenditure: \$ 5/28/2026

Business or Organization Name: Nashville Organized for Action and Hope **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 331144 City: Nashville State: TN Zip Code: 37203
Purpose of Expenditure: Charitable Contributions
Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 5/29/2026

Business or Organization Name: Google Ads **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1600 Amphitheatre Parkway City: Mountain View State: CA Zip Code: 94043
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$45.19 Date of Expenditure: \$ 5/4/2026

Business or Organization Name: MailChimp **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 675 Ponce De Leon Ave Northeast City: Atlanta State: GA Zip Code: 30308
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$148.16 Date of Expenditure: \$ 5/18/2026

Total Expenditures: \$ \$739.65

(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: 4/28/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$739.65

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: Worpress OR

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

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

Purpose of Expenditure: Website

Amount of Expenditure: \$ \$38.41 Date of Expenditure: \$ 4/30/2026

Business or Organization Name: _____ OR

First Name: Venita Middle Name: _____ Last Name: Lewis

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

Purpose of Expenditure: Consulting

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 5/6/2026

Business or Organization Name: _____ OR

First Name: Venita Middle Name: _____ Last Name: Lewis

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

Purpose of Expenditure: Consulting

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 5/6/2026

Business or Organization Name: City of Goodlettsville OR

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

Address: 105 S Main St City: Goodlettsville State: TN Zip Code: 37072

Purpose of Expenditure: Event space rental

Amount of Expenditure: \$ \$105.00 Date of Expenditure: \$ 6/4/2026

Business or Organization Name: MailChimp OR

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

Address: 675 Ponce De Leon Ave Northeast City: Atlanta State: GA Zip Code: 30308

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$148.16 Date of Expenditure: \$ 6/18/2026

Total Expenditures: \$ \$2,031.22

(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: 4/28/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$2,031.22

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: ActBue **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: \$ \$17.34 Date of Expenditure: \$ 6/30/2026

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: \$ _____

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: \$ _____

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: \$ _____

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: \$ \$2,048.56

(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.)