



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 01/19/2026 2.a. Candidate or Committee Name: Friends of Nick Ivey
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 05/05/2026
4. Campaign Address: 104 Nogs Garden
City: Gallatin State: TN Zip Code: 37076 Phone: 513-706-4742
5. Candidate Home Address: 104 Nogs Garden
City: Gallatin State: TN Zip Code: 37076 Phone: 513-706-4742
Candidate Email Address: lvey4sumner@gmail.com
6. Office Sought: (include district number, if applicable) Sumner County Commissioner, District 11
7. Name of Political Treasurer (may be candidate): Will Zasadny
Political Treasurer Email Address: lvey4sumner@gmail.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: July 1, 2025 End Date: Jan 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.

Nick Ivey 1/30/2026 Will Zasadny 1/30/2026
Candidate Signature Date Political Treasurer Signature Date
Will Zasadny 1/30/2026 Nick Ivey 1/30/2026
Witness Signature Date Witness Signature Date

12. Summary:

a. Balance On Hand Last Report **FILED** \$ 0

b. Total Receipts This Period **AM** **PM** \$ 4800

c. Total Disbursements This Period \$ 50

d. Balance On Hand (12.a. plus 12.b. minus 12.c.) **FEB 02 2026** \$ 4750

e. Total Loans Outstanding **SUMNER COUNTY** \$ 0

f. Total Obligations Outstanding **ELECTION COMMISSION** \$ 0

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Friends of Nick Ivey

14. Reporting Period: Start Date: July 1, 2025 End Date: Jan 15, 2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 0000
(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) \$ 3800
- c. Loans Received This Reporting Period \$ 1000
- d. Interest Received This Reporting Period \$ 0000
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 4800

16. Disbursements:

- a. Total Expenditures (other than loan payments) \$ 50
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ 0000
- c. Total Obligation Payments Made This Period \$ 0000
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.) \$ 50

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ 0000
- b. Itemized In-Kind Contributions Received This Period \$ 0000
- c. Total In-Kind Contributions Received This Period \$ 0000

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ 0000

I, Nick Ivey, 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.

Date _____
Political Treasurer Signature

Date _____
Candidate Signature

Date _____
Witness Signature

Date _____
Witness Signature

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Friends of Nick Ivey

2. Reporting Period: Start Date: July 1, 2025 End Date: Jan 15, 2026

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

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR

First Name: Anthony Middle Name: F Last Name: Ivey
State: TN Zip Code: 37075

Address: 141 Windmill Point Circle City: Hendersonville State: TN Zip Code: 37075

Occupation: President Employer: Direct Sales and Marketing

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

Amount of Contribution: \$ 1900 Date of Contribution: 12/31/2025 Aggregate This Election: \$ 1900

Business or Organization Name: _____

First Name: Rebecca Middle Name: S Last Name: Ivey

Address: 141 Windmill Point Circle City: Hendersonville State: TN Zip Code: 37075

Occupation: Homemaker Employer: N/A

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

Amount of Contribution: \$ 1900 Date of Contribution: 12/31/25 Aggregate This Election: \$ 1900

Business or Organization Name: _____

First Name: _____ Middle Name: _____ Last Name: _____
City: _____ Zip Code: _____

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

Occupation: _____ Employer: _____ ☐ **Swaff (Local Elections Only)**

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____

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

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

Occupation: _____ Employer: _____ ☐ (Local Elections Only)

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$3800

Total Contributions: \$3800
(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 LOANS - CANDIDATE

1. Candidate or Committee Name: Friends of Nick Ivey
2. Reporting Period: Start Date: July 1, 2025 End Date: Jan 15, 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: Nicholas Middle Name: Carlton Last Name: Ivey
Address: 141 Nogs Garden City: Gallatin State: TN Zip Code: 37076
Outstanding Loan Balance (Beginning) \$ _____
Loans Received \$ 1000
Loan Payments \$ _____
Outstanding Loan (End) \$ 1000
Loan Received For: ☒ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Date of Loan: 1/2/2026

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

Business or Organization Name: _____ OR
First Name: Nicholas Middle Name: Carlton Last Name: Ivey
Address: 141 Nogs Garden City: Gallatin State: TN Zip Code: 37076
Amount Guaranteed Outstanding: \$ 1000

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) \$ _____
Loans Received \$ 1000
Loan Payments \$ _____
Outstanding Loan (End) \$ 1000

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Friends of Nick Ivey

2. Reporting Period: Start Date: July 1, 2025 End Date: Jan 15, 2026

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

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: TN Republican Party OR

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

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

Purpose of Expenditure: Candidate Filing Fee

Amount of Expenditure: \$ 50 Date of Expenditure: \$ 1/2/2026

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: \$ 50

(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.)