

Disclosure Report Cover

Amendment
☐ Yes ☐ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
 Do not use this form to update information

1. Committee Information	
a. Full Name Committee to Elect Denise Wright	c. ID Number
b. Mailing Address (include City, State and Zip Code) 116 Quail Hollow Dr Kings Mountain, NC 28086	d. Date Filed 02/23/2026
	e. Phone Number 704-692-2859

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2026	01/01/2026	02/14/2026	Susan White

6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
☒ Candidate Campaign ☐ PAC ☐ Independent Expenditure ☐ Legal Expense Fund	☐ Party ☐ Referendum ☐ Joint Fundraiser	Municipal ☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	State/County ☒ Organizational ☐ Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	Referendum ☐ Organizational ☐ Pre-referendum ☐ Final ☐ Supplemental Final ☐ Annual ☐ Special
7. Type of Fund (if applicable, check one)		10. Special Report Name		
☐ "Booster Fund" ☐ Building Fund ☐ Other:				
8. Number of Fundraisers this Report				
0				

11. Account Information		11. Account Information	
a. Financial Institution Full Name Fidelity Bank		a. Financial Institution Full Name	
b. Purpose	c. Account Code 01	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 634.87		d. Period Begin Balance \$

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

Denise Wright

Printed Name of Signer

Denise Wright

Signature of Appointed Treasurer

2/23/2026

Date

FOR OFFICE USE ONLY

Date Received: 2-24-26
 Date Postmarked: _____
 Date Scanned: _____
 Date Data Entered: _____

Employee: CP
 Employee: _____
 Employee: _____
 Employee: _____

Delivery Method

☐ Normal Mail
☐ Registered Mail
☒ Hand Delivered
☐ Electronically Filed
☐ Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment

☐ Yes ☐ No

Use this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if applicable)		2. Type of Report	3. ID Number
Committee to Elect Denise Wright		Organizational	
Start of Election Cycle: January 1, 2026		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 634.87	\$
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 2114.90	\$ 2914.90
6) Contributions from Individuals (CRO-1210)		\$	\$
7) Contributions from Political Party Committees (CRO-1220)		\$	\$
8) Contributions from Other Political Committees (CRO-1230)		\$	\$
9) Loan Proceeds (CRO-1410)		\$ 3000.00	\$ 3250.00
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)		\$	\$
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$	\$
11c) Outside Sources of Income (CRO-1250)		\$	\$
11d) Legal Expense Fund – Other Sources (CRO-1270)		\$	\$
11 e) Exempt Purchase Price Sales (CRO-1265)		\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 5114.90	\$ 6164.90
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 4054.44	\$ 4469.57
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$	\$
13c) Coordinated Party Expenditures (CRO-1310)		\$	\$
14) Aggregated Non-Media Expenditures (CRO-1315)		\$	\$
15) Loan Repayments (CRO-1420)		\$	\$
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$	\$
17) In-Kind Contributions (CRO-1510)		\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 4054.44	\$ 4469.57
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1060.46	\$ 1695.33
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$	
22) Debts and Obligations owed By the Committee (CRO-1610)		\$	
23) Debts and Obligations owed To the Committee (CRO-1620)		\$	
24) Account Transfers Within the Committee (CRO-1720)		\$	
25) Administrative Support (CRO-1710)		\$	\$
26) Forgiven Loans (CRO-1440)		\$	\$
27) 48-Hour Notice Reports Sum (CRO-2220)		\$	\$
28) Contributions to be Refunded (CRO-1215)		\$	\$

CLEVELAND COUNTY BOE
FEB 24 '26 AMB:15

Contributions from Individuals

Pg 1 of 2

Amendment
☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to Elect Denise Wright						
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Jeff Wright 116 Quail Hollow Dr Kings Mountain, NC 28086			IT Analyst			
			c. Employer's Name/Specific Field			
			City of Shelby			
					e. Election Sum to Date	
					\$ 1000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
☐	01	Check		02/10/2026		\$ 1000.00
☐						\$
☐						\$
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Tracy Whisnant 1203 D Northgate Dr Shelby, NC 28150			Real Estate Broker			
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
☐	01	Check		02/11/2026		\$ 500.00
☐						\$
☐						\$
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Marvin Biddix 406 Country Club Acres Kings Mountain, NC 28086			Real Estate Broker		CLEVELAND COUNTY BOE FEB 24 '26 AM 8:15	
			c. Employer's Name/Specific Field			
			Remax Select			
					e. Election Sum to Date	
					\$ 250	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
☐	01	Chexk		02/11/2026		\$ 250.00
☐						\$
☐						\$
4. Total only this Page					\$ 1750.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2114.90	

Contributions from Individuals

Pg 2 of 2

Amendment
☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to Elect Denise Wright						
3. Contributor Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Travis Repman 106N Oakwood Dr Kings Mountain, NC 28086						
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$ 364.90	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
☐	01	ACH		02/02/2026		\$ 364.90
☐						\$
☐						\$
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
☐						\$
☐						\$
☐						\$
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
☐						\$
☐						\$
☐						\$
4. Total only this Page					\$ 364.90	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 2114.90	

CLEVELAND COUNTY BO
 FEB 24 '26 AM 8:15

Loan Proceeds

Pg 1 of 1

Amendment

☐ Yes ☒ No

Use this form to report proceeds from a loan and loan endorser's information

A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Committee to Elect Denise Wright					
3. Lender Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Denise Wright 116 Quail Hollow Dr Kings Mountain, NC 28086		Real Estate Broker02			
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
				02/10/2026	
				f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount	
%		01	Check	\$ 3000.00	
l. Full Name of Lending Institution				m. Loan Number	
4. Endorsers/Makers <i>(The people who guarantee the loan.)</i>					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
		d. Percentage		e. Amount	
		%		\$	
5. Total of ALL CRO-1410 Pages				\$ 3000.00	
<i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>					

CLEVELAND COUNTY BOE
FEB 24 '26 AM 8:15



NORTH CAROLINA

STATE BOARD OF ELECTIONS

Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- Name of committee to receive loan: Committee to Elect Denise
- Person or committee to make loan: Denise Wright
- Date of loan to committee: 02/10/2026
- Name of lending institution (source):

- Amount of loan: 3000.00
- Description (if in-kind loan): _____
- Names of all parties responsible for payment of loan (guarantors): CLEVELAND COUNTY BOE
FEB 24 '26 AM 8:10

- Period of loan: _____
- Rate of interest of loan: _____
- Security pledged for loan: _____

I, Denise Wright, acknowledge that all of the information
(Person lending money to committee)
provided is complete, true, and accurate. I further understand I may not forgive a loan
that has an outstanding balance to any source.

Denise Wright
Signature of Lender

2/23/26

Date Signed

Denise Wright
Signature of Treasurer of Committee

2/23/26
Date Signed

Disbursements

Pg 1 of 2

Amendment
☐ Yes ☐ No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable)					2. ID Number
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
☐ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures					
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) GoBigPrint 834 S Post Rd Shelby, NC 28152			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		
			☐ Federal ☒ County: ☐ State ☐ Municipality:		
					e. Election Sum to Date
				\$ 587.12	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Check	B	01/06/2026	\$293.56	Signs
				\$	
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Anedot 1340 Poydras St #1710 New Orleans, LA 70012			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		
			☐ Federal ☒ County: ☐ State ☐ Municipality:		
					e. Election Sum to Date
				\$ 23.20	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Online	C	02/02/2026	\$14.90	Online Payment Processing Fee
				\$	
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Facebook.com			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		
			☐ Federal ☒ County: ☐ State ☐ Municipality:		
					e. Election Sum to Date
				\$ 52.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Debit	A	02/17/2026	\$25.00	Ad
01	Debit	A	02/18/2026	\$27.00	Ad
5. Total only this Page					\$ 360.46
6. Total of ALL CRO-1310 Pages					
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 4054.44
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
O* - Other				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					

Disbursements

Pg 2 of 2

Amendment

☐ Yes ☐ No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to Elect Denise Wright						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
☐ Operating Expenses		☐ Contributions to Candidates/Political Committees		☐ Coordinated Party Expenditures		
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Westmoreland Printing 2020 E Dixon Blvd Shelby, NC 28150			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			☐ Federal ☒ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
						\$ 3693.98
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
01	Check	B	02/10/2026	\$1605.21	Mauiler	
01	Check	I	02/14/2026	\$2088.77	Mailer Postage	
4. Payee Information ☐ Add ☐ Remove						
			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
4. Payee Information ☐ Add ☐ Remove						
			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
5. Total only this Page						
						\$ 3693.98
6. Total of ALL CRO-1310 Pages						
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>						\$ 4054.44
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>						
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* - Other						
* Codes require detailed explanation in required remarks field (k)						

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FEB 24 '26 AM 8:15