

Disclosure Report Cover

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

Amendment
☒ Yes ☐ No

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 07/07/2026						
			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	2/15/2026	6/30/2026	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	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Municipal</th> <th style="width: 50%;">State/County</th> <th style="width: 50%;">Referendum</th> </tr> <tr> <td> ☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special </td> <td> ☒ Organizational Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special </td> <td> ☐ Organizational ☐ Pre-referendum ☐ Final ☐ Supplemental Final ☐ Annual ☐ Special </td> </tr> </table>			Municipal	State/County	Referendum	☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	☒ Organizational Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	☐ Organizational ☐ Pre-referendum ☐ Final ☐ Supplemental Final ☐ Annual ☐ Special
Municipal	State/County	Referendum							
☐ Organizational ☐ Thirty-five day ☐ Pre-primary ☐ Pre-election ☐ Pre-runoff ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	☒ Organizational Quarterly ☐ First ☐ Second ☐ Third ☐ Fourth ☐ Semi-annual ☐ Mid Year ☐ Year End ☐ Final ☐ Special	☐ 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 \$ 1695.33		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.									
<u>Denise Wright</u> Printed Name of Signer		<u>Susan White</u> Signature of Appointed Treasurer							
<u>7-7-26</u> Date									
FOR OFFICE USE ONLY									
Date Received:	<u>7-8-26</u>	Employee:	<u>WJB</u>						
Date Postmarked:	_____	Employee:	_____						
Date Scanned:	_____	Employee:	_____						
Date Data Entered:	_____	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					
Start of Election Cycle: January 1, 2026		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 1695.33		\$	
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$ 2914.90	
6) Contributions from Individuals (CRO-1210)		\$		\$	
7) Contributions from Political Party Committees (CRO-1220)		\$ 2603.50		\$ 2603.50	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$ 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)		\$ 2603.50		\$ 8768.40	
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 1211.81		\$ 5681.38	
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)		\$ 3000.00		\$ 3000.00	
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)		\$ 4211.81		\$ 8681.38	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 87.02		\$ 87.02	
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)		\$		\$	

Contributions from Political Party Committees

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Amendment

☐ Yes ☐ No

Use this form to report contributions from a political party

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. Comments	
NC REALTORS PAC 4511 Waybridge Lane Greensboro, NC 27407					
				c. Election Sum to Date	
				\$ 2603.50	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
01	Check		02/24/2026	\$ 2603.50	
				\$	
				\$	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Election Sum to Date	
				\$	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
				\$	
				\$	
				\$	
3. Contributor Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Election Sum to Date	
				\$	
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yyyy)	h. Amount	
				\$	
				\$	
				\$	
4. Total only this Page				\$ 2603.50	
5. Total of ALL CRO-1220 Pages (This line must be on line 7 of Detailed Summary Page CRO-1100)				\$ 2603.50	

CLEVELAND COUNTY BO
JUL 8 '26 PM12:00



NORTH CAROLINA

STATE BOARD OF ELECTIONS

Political Party Executive Committee Exempt Sales Plan

Committee Name: Committee to Elect Denise Light
Plan Description: NC REALTORS PAC
Dates Covered: 2/24/2026
Treasurer Name: Susan White
Treasurer Address: 812 Hill St Shelby, NC 28152
Treasurer Phone/FAX: 704-300-1911

Item Description	Fair Market Value	Price Party will Charge	Quantity (maximum)	Anticipated Income (maximum)
Campaign Donation				2603.50

I understand that no purchaser may make total purchases exceeding \$50. I further understand that the total amount raised from sales under all plans by this committee cannot exceed \$20,000 per election cycle.

I understand that the committee must disclose the number of items sold from this sale, the total amount raised from this sale, and the election cycle sum-to-date of all exempt sales on its next disclosure report (CRO-1265). I further understand that all in-kind contributions made to the committee for this sale must be disclosed on the committee's next disclosure report.

I certify that all of the information provided is complete, true and correct.

7-7-2026

Date Signed

Denise Light

Signature of Treasurer

Office Use Only

☐ Approved

☐ Denied

Date Signed

SBOE Authorized Signature

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	
Committee to Elect Denise Wright						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
☒ 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)			b. Coordinated Committee Name		d. Comments	
Community First Media 503 N Lafayette St Shelby, NC 28150						
			c. Level Registered (Specify)			
			☐ Federal ☒ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 640.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
01	Check	A	02/25/2026	\$640.00	Ad Shelby Shopper	
				\$		
4. Payee Information ☒ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Tractor Supply 630 Earl Rd Shelby, NC 28152						
			c. Level Registered (Specify)			
			☐ Federal ☒ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 112.93	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
01	Debit	K	01/07/2026	\$112.93	Stakes for Sign	
				\$		
4. Payee Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Facebook.com						
			c. Level Registered (Specify)			
			☐ Federal ☐ County: ☐ State ☐ Municipality:			
					e. Election Sum to Date	
					\$ 86.05	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
01	Debit	A	03/30/2026	\$23.63	Ad	
01	Debit	A	03/02/2026	\$10.42	Ad	
5. Total only this Page					\$ 786.98	
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)					\$ 1211.81	
7. Purpose Codes (List detailed expenditure code in (h) above)						
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)						

CLEVELAND COUNTY BOE
JUL 8 '26 AM 11:59

Disbursements

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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) Facebook.com		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify)			
		☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
				\$ 121.05	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Debit	A	02/25/2026	\$35.00	Ad
01	Debit			\$	
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Zazzle.com		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify)			
		☐ Federal ☒ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
				\$ 253.11	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Debit	B	02/24/2026	\$139.83	Campaign Cards
				\$	
4. Payee Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) KTC Broadcasting		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify)			
		☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date	
				\$ 250.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
01	Check	A	03/08/2026	\$125.00	Radio Ad
01	Check	A	04/08/2026	\$125.00	Radio Ad
5. Total only this Page					\$ 424.83
6. Total of ALL CRO-1310 Pages					
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <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>					\$ 1211.81
7. Purpose Codes <i>(List detailed expenditure code in (h.) above.)</i>					
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)					

CLEVELAND COUNTY BO
JUL 8 '26 AM 11:59

Loan Repayments

Use this form to report payments on an existing loan.

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Amendment
☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable) Committee to Elect Denise Wright				2. ID Number	
3. Lender Information ☐ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Denise Wright 116 Quail Hollow Dr Kings Mountain, NC 28086				b. Comments	
				c. Original Loan Date	
				11/6/2025	
				d. Original Loan Amount	
\$ 250.00					
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$ 250.00	01	Check	4/7/2026	\$ 3000.00	
\$				\$	
3. Lender Information ☐ Add ☐ Remove					
				b. Comments	
				c. Original Loan Date	
				d. Original Loan Amount	
\$					
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$				\$	
\$				\$	
3. Lender Information ☐ Add ☐ Remove					
				b. Comments	
				c. Original Loan Date	
				d. Original Loan Amount	
\$					
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$				\$	
\$				\$	
4. Total only this Page					
				\$ 3000.00	
5. Total of ALL CRO-1420 Pages (This line must be on line 15 of Detailed Summary Page CRO-1100)					
				\$ 3000.00	

CRO-1420

NC State Board of Elections

December 2007