

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

Friends to Elect Ronnie Nuss

c. ID Number

b. Mailing Address (include City, State and Zip Code)

Ronnie Everett Nuss
2010 Robyn Ave, Shelby N 28152

d. Date Filed

01-24-2026

e. Phone Number

704-739-4445

2. Report Year

3. Period Start Date (mm/dd/yy)

4. Period End Date (mm/dd/yy)

5. Treasurer Full Name

0101-2023

Dec 31, 2025

Ronnie Nuss

6. Type of Committee (Check One)

- ☐ Candidate Campaign
☐ PAC
☐ Independent Expenditure
☐ Legal Expense Fund
☐ Party
☐ Referendum
☐ Joint Fundraiser

9. Type of Report (check only one type of report from one category)

- 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)

- ☐ Booster Fund
☐ Building Fund
☐ Other:

8. Number of Fundraisers this Report

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

Woodforest National Bank

b. Purpose

Campaign

c. Account Code

d. Period Begin Balance

\$ 11.80

11. Account Information

a. Financial Institution Full Name

b. Purpose

c. Account Code

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.

Ronnie Everett Nuss

Printed Name of Signer

Ronnie Everett Nuss

Signature of Appointed Treasurer

01-24-2026

Date

FOR OFFICE USE ONLY

Date Received:

Employee:

Delivery Method

Date Postmarked:

Employee:

- ☐ Normal Mail
☐ Registered Mail
☐ Hand Delivered
☐ Electronically Filed

Date Scanned:

Employee:

☐ Signer has not received mandatory training

Date Data Entered:

Employee:

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
Friends To Elect Ronnie Pugh		Fourth Quarter	
Start of Election Cycle: January 1, 2026		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 11.80	\$
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$
6) Contributions from Individuals (CRO-1210)		\$ 1330.00	\$
7) Contributions from Political Party Committees (CRO-1220)		\$	\$
8) Contributions from Other Political Committees (CRO-1230)		\$	\$
9) Loan Proceeds (CRO-1410)		\$	\$
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)		\$	\$
11e) Exempt Purchase Price Sales (CRO-1265)		\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 1330.00	\$
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 299.70	\$
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)		\$ 299.70	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1042.10	\$
ADDITIONAL INFORMATION			
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)		\$	\$

COUNTY BO
 AM10:09

Contributions from Individuals

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

Pg ____ of ____

Amendment

☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)

Friends to Elect Ronnie Grigg

2. ID Number

3. Contributor Information

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone

(include city, state, & zip)

Tony Berry
115 Den Uym Drive
Shelby NC 28151 704-482-4006

b. Job Title/Profession

Owner

c. Employer's Name/Specific Field

Berry Business System, owner

d. Comments

Donation

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

☒

check

Donation

10-7-2025

\$ 500.00

☒

check

Donation

10-31-2025

\$ 500.00

☐

3. Contributor Information

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone

(include city, state, & zip)

Wayne King 704-689-2000
PO Box 944
King MTN 28086

b. Job Title/Profession

Owner

c. Employer's Name/Specific Field

Old North Strategies, owner

d. Comments

Donation

e. Election Sum to Date

\$ 250.00

f. Prior

g. Account Code

h. Form of Payment

i. In-Kind Description

j. Date (mm/dd/yyyy)

k. Amount

☒

check

Donation

12/31/2025

\$ 250.00

☐

☐

3. Contributor Information

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone

(include city, state, & zip)

Ronnie Grigg 704-739-4445
2010 Robyn Ave
Shelby NC 28152

b. Job Title/Profession

Employee

c. Employer's Name/Specific Field

Belk Dept. Store

d. Comments

Donation

e. Election Sum to Date

\$ 80.00

f. Prior

g. Account Code

h. Form of Payment

i. In-Kind Description

j. Date (mm/dd/yyyy)

k. Amount

☒

Cash/checks

Donation

12/31/2025

\$ 80.00

☐

☐

4. Total only this Page

\$ 1330.00

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

\$ 1330.00

Disbursements

Pg ____ of ____

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) <i>Friends to Elect Ronnie Lutz</i>						2. ID Number	
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) <i>Greensboro Industries</i> <i>Wilmington, NC</i>				b. Coordinated Committee Name		d. Comments <i>Banners</i>	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ <i>90.10</i>	
f. Account Code <i>01</i>	g. Form of Payment <i>card</i>	h. Purpose Code <i>Campaign</i> <i>B</i>	i. Date (mm/dd/yyyy) <i>11/6/25</i>	j. Amount \$ <i>90.10</i>	k. Required Remarks		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Walmart Shelby</i> <i>705 E. Dixon Blvd</i> <i>Shelby NC</i> <i>(704) 484-0021</i>				b. Coordinated Committee Name		d. Comments <i>parade</i> <i>Candy</i>	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ <i>23.86</i>	
f. Account Code <i>01</i>	g. Form of Payment <i>card</i>	h. Purpose Code <i>Campaign</i> <i>O</i>	i. Date (mm/dd/yyyy) <i>11/3/25</i>	j. Amount \$ <i>23.44</i>	k. Required Remarks <i>CLEVELAND COUNTY BOE</i> <i>JAN 30 '26 AM 10:09</i>		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Office Max</i> <i>Shelby NC (704) 480-6327</i>				b. Coordinated Committee Name		d. Comments <i>Letters</i> <i>for Campaign</i>	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ <i>6.15</i>	
f. Account Code <i>01</i>	g. Form of Payment <i>card</i>	h. Purpose Code <i>B</i>	i. Date (mm/dd/yyyy) <i>11/28/25</i>	j. Amount \$ <i>6.15</i>	k. Required Remarks		
5. Total only this Page:						\$ <i>120.11</i>	
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)						\$ <i>299.70</i>	
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)							

Disbursements

Pg ____ of ____

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	
Friends To Elect Ronnie Guiff							
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	
Shelby Shopper 503 N Lafayette St. Shelby NC 704484-1047						Campaign Cards	
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ 69.39	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
01		cards	10/9/25	\$ 69.39			
		A		\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
United States PO Box Friends To Elect Ronnie Guiff P.O. Bx24, Baidens springs						Campaign Box	
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ 39.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	card	Campaign	10-16-25	\$ 39.00			
		I		\$			
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Lewes of Shelby 425 Earl Rd Shelby NC 28158						post for Banners	
				c. Level Registered (Specify)		e. Election Sum to Date	
				☐ Federal ☐ County: ☐ State ☐ Municipality:		\$ 23.44	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	card	campaign	11/3/25	\$ 23.44			
		F		\$			
5. Total only this Page						\$ 131.83 ✓	
6. Total of ALL CRO-1310 Pages						\$ 299.70	
(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)							
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)							

Disbursements

Pg ____ of ____

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) <i>Friends To Elect Ronnie Myers</i>						2. ID Number	
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) <i>Olives Bargain Outlet Dixon Blvd Shelby NC (717) 657-2300</i>				b. Coordinated Committee Name		d. Comments <i>Parade candy</i>	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ <i>14.92</i>	
f. Account Code <i>01</i>	g. Form of Payment <i>Card</i>	h. Purpose Code <i>Campaign</i>	i. Date (mm/dd/yyyy) <i>12/13/2025</i>	j. Amount \$ <i>14.92</i>	k. Required Remarks		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Tractor Supply Co 630 Earl Rd Shelby NC (704) 406-9156</i>				b. Coordinated Committee Name		d. Comments <i>Metal Poles for Banners</i>	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ <i>11.78</i>	
f. Account Code <i>01</i>	g. Form of Payment <i>Card</i>	h. Purpose Code <i>Campaign</i>	i. Date (mm/dd/yyyy) <i>12/26/2025</i>	j. Amount \$ <i>11.78</i>	k. Required Remarks <i>CLEVELAND COUNTY BOE JAN 30 '26 AM 10:10</i>		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Wal-Mart Shelby 705 E. Dixon Blvd Shelby NC (704) 484-0021</i>				b. Coordinated Committee Name		d. Comments <i>Video/ Audio</i>	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ <i>21.06</i>	
f. Account Code <i>01</i>	g. Form of Payment <i>Card</i>	h. Purpose Code <i>Campaign</i>	i. Date (mm/dd/yyyy) <i>12/26/25</i>	j. Amount \$ <i>21.06</i>	k. Required Remarks		
5. Total only this Page						\$ <i>47.76</i>	
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)						\$ <i>299.70</i>	
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)							