

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 Grigg

c. ID Number

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

Ronnie Everett Grigg
2810 Robyn Ave
Shelby NC 28152

d. Date Filed

02/13/2026

e. Phone Number

704-739-4445

2. Report Year

01/01/2026

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

02/14/2026

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

5. Treasurer Full Name

Ronnie Everett Grigg

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

\$ 1042.10

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 Grigg

Printed Name of Signer

Ronnie Everett Grigg

Signature of Appointed Treasurer

02/13/2026

Date

FOR OFFICE USE ONLY

Date Received: 2.23.26

Employee: WFB

Delivery Method

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

Date Postmarked:

Employee:

Date Scanned:

Employee:

Date Data Entered:

Employee:

☐ 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
		First quarter	
Start of Election Cycle: January 1, 2026		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1042.10	\$
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$
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)		\$	\$
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)		\$	\$
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 850.03	\$
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)		\$ 850.03	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 192.07	\$
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)		\$	\$

CRO-1100

NC State Board of Elections

August 2008

CLAY COUNTY BOE
FEB 23 '26 AM 5:40

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>SCT Productions LLC 11358 Jones Rd West STE. E Cypress, Texas 77436-3148-8056</i>				b. Coordinated Committee Name		d. Comments <i>Banner</i>	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ <i>90.00</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>1/11/2026</i>	j. Amount \$ <i>90.00</i>	k. Required Remarks		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Shelby independent San Francisco, Calif Shelby NC</i>				b. Coordinated Committee Name		d. Comments <i>Ad on weather page</i>	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ <i>26.50</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>1/20/26</i>	j. Amount \$ <i>26.50</i>	k. Required Remarks		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>U2 marketing 832-598-7220 5900 Bingle Rd Houston, Texas 77092</i>				b. Coordinated Committee Name		d. Comments <i>Political Signs</i>	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$ <i>192.60</i>	
f. Account Code <i>01</i>	g. Form of Payment <i>Card</i>	h. Purpose Code <i>Campaign</i> <i>A</i>	i. Date (mm/dd/yyyy) <i>01/21/26</i>	j. Amount \$ <i>192.60</i>	k. Required Remarks		
5. Total only this Page						\$	
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)						\$	
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)							

CRO-1310

NC State Board of Elections

December 2009

CLEVELAND COUNTY BOE
FEB 23 '26 AM 8:40

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 Dunn</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>U2 Marketing 832-598-7226 5900 Bingle Rd Houston, Texas 77092</i>				b. Coordinated Committee Name		d. Comments <i>political signs</i>	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date <i>\$ 337.76</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>01/01/2026</i>	j. Amount <i>\$ 337.76</i>	k. Required Remarks		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Mikes Food Stores + Gas 1319 S post Rd 704-406-9137 Shelby NC 28150</i>				b. Coordinated Committee Name		d. Comments <i>gas for sign delivery</i>	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$	
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>01/02/2026</i>	j. Amount <i>\$ 25.00</i>	k. Required Remarks		
4. Payee Information ☐ Add ☐ Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Bizay print 3500 S. Dupont Hwy Dover, Del 19901</i>				b. Coordinated Committee Name		d. Comments <i>Door Hangers</i>	
				c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:		e. Election Sum to Date \$	
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>01/04/2026</i>	j. Amount <i>\$ 110.21</i>	k. Required Remarks		
5. Total only this Page						\$ <i>472.97</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)						\$	
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)							

CRO-1310

NC State Board of Elections

December 2009

CLEVELAND COUNTY BOE
FEB 24 25 AM 8:40

Disbursements

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

Pg ____ of ____ Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable) Friends To Elect Roxie Lutz	2. ID Number
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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) Michae Food Stores 1319 S. Post Rd Shelby NC 704-406-9137	b. Coordinated Committee Name	d. Comments Gas for putting out signs
c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		e. Election Sum to Date \$ 30.06

f. Account Code 01	g. Form of Payment Card	h. Purpose Code campaign	i. Date (mm/dd/yyyy) 02/05/2026	j. Amount \$ 30.06	k. Required Remarks
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4. Payee Information		☐ Add ☐ Remove
a. Full Name, Mailing Address & Phone (Include city, state, & zip) Office Max 704-480-6327 423 Earl Rd Shelby NC 28150	b. Coordinated Committee Name	d. Comments letters
c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		e. Election Sum to Date \$ 8.92

f. Account Code 01	g. Form of Payment Card	h. Purpose Code B	i. Date (mm/dd/yyyy) 02/03/2026	j. Amount \$ 8.92	k. Required Remarks
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4. Payee Information		☐ Add ☐ Remove
a. Full Name, Mailing Address & Phone (Include city, state, & zip) Office Max 423- Earl Rd Shelby NC	b. Coordinated Committee Name	d. Comments Campaign letters
c. Level Registered (Specify) ☐ Federal ☐ County ☐ State ☐ Municipality		e. Election Sum to Date \$ 14.18

f. Account Code 01	g. Form of Payment card	h. Purpose Code B	i. Date (mm/dd/yyyy) 02/08/2026	j. Amount \$ 14.18	k. Required Remarks
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5. Total only this Page	
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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)	

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)

CRO-1310

NC State Board of Elections

December 2009

CLEVELAND COUNTY BOB
FEB 28 2026 AM 8:40

Disbursements

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

Page ____ of ____ Amendment ☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)

Friends for Elect Ronnie Gregg

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)

Office Max 704-480-6327
423 Earl Rd
Shelby NC 28150

b. Coordinated Committee Name

d. Comments

Campaign letters

e. Level Registered (Specify)

☐ Federal

☐ County

☐ State

☐ Municipality

e. Election Sum to Date

\$ 14.80

f. Account Code

g. Form of Payment

h. Purpose Code

i. Date (mm/dd/yyyy)

j. Amount

k. Required Remarks

01

Cash

B

02/12/2026

\$ 14.80

4. Payee Information

☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone

(Include city, state, & zip)

b. Coordinated Committee Name

d. Comments

e. 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

a. Full Name, Mailing Address & Phone

(Include city, state, & zip)

b. Coordinated Committee Name

d. Comments

e. 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

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)

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)

CRO-1310

NC State Board of Elections

December 2009