

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		c. ID Number
Elect Tony Berry for County Commissioner		
b. Mailing Address (include City, State and Zip Code)		d. Date Filed
PO Box 326 Shelby, NC 28151		7/16/26
		e. Phone Number
		704-482-4006

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	06/30/2026	Lesley Bliss-Wright

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

11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
Commercial Bank			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
To fund the campaign for Tony Berry for County Commissioner	ANB-1		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 38.00		\$ CLEVELAND COUNTY BO JUL 16 '26 PM1:39

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.

Lesley B. Wright

Printed Name of Signer

Lesley B. Wright

Signature of Appointed Treasurer

7/16/2026

Date

FOR OFFICE USE ONLY

Date Received: 7-16-26
Date Postmarked: _____
Date Scanned: _____
Date Data Entered: _____

Employee: 
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
Elect Tony Berry for County Commissioner		Mid Year	
Start of Election Cycle: January 1, 2026		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 38.00	\$ 38.00
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$
6) Contributions from Individuals (CRO-1210)		\$ 100.00	\$ 100.00
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)		\$	\$
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)		\$ 138.00	\$ 138.00
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 58.00	\$ 58.00
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)		\$ 58.00	\$ 58.00
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 80.00	\$ 80.00
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)		\$	\$

Contributions from Individuals

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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	
Elect Tony Berry for County Commissioner						
3. Contributor Information ☐ Add ☐ Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) TONY BERRY 108 DORAL CT KINGS MOUNTAIN, NC 28086			b. Job Title/Profession		d. Comments	
			OWNER			
			c. Employer's Name/Specific Field		e. Election Sum to Date	
			BERRY BUSINESS SYSTEMS 119 N. LAFAYETTE ST SHELBY, NC 28150			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
☐	ANB-1	CHECK		05/11/2026	\$ 100.00	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
			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	
☐	ANB-1				\$	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
			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	
☐	ANB-1				\$	
☐					\$	
☐					\$	
3. Contributor Information ☐ Add ☐ Remove						
			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	
☐	ANB-1				\$	
☐					\$	
☐					\$	
4. Total only this Page					\$ 100.00	
5. Total of ALL CRO-1210 Pages					\$ 100.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						

CLEVELAND COUNTY BO
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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
Elect Tony Berry for County Commissioner					
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)		b. Coordinated Committee Name		d. Comments	
Commercial Bank 412 S. Dekalb Street Shelby, NC 28150		c. Level Registered (Specify)		e. Election Sum to Date \$	
		☐ Federal ☐ County: ☐ State ☐ Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ANB-1	WITHDRAWAL	O	1/31/26	\$10.00	SERVICE CHARGE
ANB-1	WITHDRAWAL	O	2/28/26	\$10.00	SERVICE CHARGE
4. Payee Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Commercial Bank 412 S. Dekalb Street Shelby, NC 28150		c. Level Registered (Specify)		e. Election Sum to Date \$	
		☐ Federal ☐ County: ☐ State ☐ Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ANB-1	WITHDRAWAL	O	3/31/26	\$10.00	SERVICE CHARGE
ANB-1	WITHDRAWAL	O	4/30/26	\$8.00	SERVICE CHARGE
4. Payee Information ☒ Add ☐ Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
Commercial Bank 412 S. Dekalb Street helby, NC 28150		c. Level Registered (Specify)		e. Election Sum to Date \$	
		☐ Federal ☐ County: ☐ State ☐ Municipality:			
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
ANB-1	WITHDRAWAL	O	5/31/26	\$10.00	SERVICE CHARGE
ANB-1	WITHDRAWAL	O	6/30/26	\$10.00	SERVICE CHARGE
5. Total only this Page					\$ 58.00
6. Total of ALL CRO-1310 Pages					\$ 58.00
<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>					
7. Purpose Codes <i>(List detailed expenditure code in (h.) above)</i>					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		D - To Another Candidate	
I - Postage		J - Penalties		H* - Holding Public Office Expenses	
O* - Other		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					