

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 Friends to Elect Ronnie Grigg		c. ID Number
b. Mailing Address (include City, State and Zip Code) Ronnie Everette Grigg 114 Corine Court, Shelby, NC 28152		d. Date Filed 10-2021
		e. Phone Number 704-739-4445

2. Report Year 2022	3. Period Start Date (mm/dd/yy) July 2, 2022	4. Period End Date (mm/dd/yy) Oct. 22, 2022	5. Treasurer Full Name Susan Nonnette Leonhart
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Municipal	<input type="checkbox"/> State/County	<input type="checkbox"/> Referendum
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

7. Type of Fund (if applicable, check one)

Booster Fund

Building Fund

Other:

8. Number of Fundraisers this Report

10. Special Report Name

CLEVELAND COUNTY BOE
 OCT 31 '22 PM 4:54

11. Account Information


a. Financial Institution Full Name Woodforest National Bank		a. Financial Institution Full Name	
b. Purpose Campaign	c. Account Code	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 13.92		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 153 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.

Susan Nonnette Leonhart *Susan Nonnette Leonhart* **10-31-2022**
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: **10-31-22** Employee: 

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

Start of Election Cycle: January 1, _____	Total this Reporting Period	Total this Election Cycle
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4) Cash on Hand at Start	\$ 13.92	\$
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RECEIPTS

5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$
6) Contributions from Individuals (CRO-1210)	\$ 95.00	\$
7) Contributions from Political Party Committees (CRO-1220)	\$	\$
8) Contributions from Other Political Committees (CRO-1230)	\$	\$
9) Loan Proceeds (CRO-1410)	\$ 500.00	\$
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)	\$	\$
11e) Exempt Purchase Price Sales (CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 595.00	\$

EXPENDITURES

13) Disbursements		
13a) Operating Expenditures (CRO-1310)	\$ 276.12	\$
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)	\$ 276.12	\$
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 332.80	\$

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)	\$	\$

CLEVELAND COUNTY BOE
 OCT 31 '22 PM4:54

Contributions from Individuals

Amendment
 Pg. ___ of ___ 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) Friends to Elect Ronnie Grigg	2. ID Number
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3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) Lynn W. Bridges 1055 Hunter Valley Road Shelby, N.C. 28150	b. Job Title/Profession Retired	d. Comments	
c. Employer's Name/Specific Field			
e. Election Sum to Date			\$

l. Prior	m. Account Code	n. Form of Payment	o. In-Kind Description	p. Date (mm/dd/yyyy)	q. Amount
<input type="checkbox"/>	01	check # 11214	Campaign donation	10-11-2022	\$ 25.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) Women Republicans of Cleveland County (WeRCCC) P.O. Box 3327 Shelby, N.C. 28151-3327	b. Job Title/Profession	d. Comments CLEVELAND COUNTY BOE OCT 31 '22 PM4:54	
c. Employer's Name/Specific Field			
e. Election Sum to Date			\$

l. Prior	m. Account Code	n. Form of Payment	o. In-Kind Description	p. Date (mm/dd/yyyy)	q. Amount
<input type="checkbox"/>	01	check # 126	Campaign donation	10-11-2022	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) Marjorie Hopper 157 Belmar Road Kings Mountain N.C. 28086-9407	b. Job Title/Profession Retired	d. Comments	
c. Employer's Name/Specific Field			
e. Election Sum to Date			\$

l. Prior	m. Account Code	n. Form of Payment	o. In-Kind Description	p. Date (mm/dd/yyyy)	q. Amount
<input type="checkbox"/>	01	check # 1386	Campaign donation	10-11-2022	\$ 20.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

4. Total only this Page	\$ 95.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)	\$ 95.00

Loan Proceeds

Amendment
Pg ____ of ____ 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	
Friends to Elect Ronnie Grigg					
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Ronnie Grigg 114 Conine Ct Shelby, N.C. 28152		Retired			
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
		Industry Manufacturing			
				f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount	
0%		01	Cash	\$ 500 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				\$ 500 ⁰⁰	
<i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>					

CLEVELAND COUNTY BOE
OCT 31 '22 PM4:54



North Carolina
 State Board of Elections
 441 N. Harrison Street
 Raleigh, NC 27603

Kim Westbrook Strach
 Executive Director

Mailing Address
 PO Box 27255
 Raleigh, NC 27611-7255
 (919) 733-7173

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: Friends to Elect Ronnie Grigg
- Person or committee to make loan: Ronnie Grigg
- Date of loan to committee: 10-11-2022
- Name of lending institution and account number (source):
Woodforest #1852002052
- Amount of loan: \$500⁰⁰
- Description (if in-kind loan): campaign
- Names of all parties responsible for payment of loan (guarantors):

CLEVELAND COUNTY BOE
 OCT 31 '22 PM 4:54

- Period of loan: _____
- Rate of interest of loan: 0
- Security pledged for loan: _____

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

[Signature]
 Signature of Lender

10-31-2022
 Date Signed

[Signature]
 Signature of Treasurer of Committee

10-31-2022
 Date Signed

Disbursements

Amendment
Pg ____ of ____ 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) Friends to Elect Ronnie Grieg						2. ID Number
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) <input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Janet Whisman			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 160⁰⁰	
f. Account Code A	g. Form of Payment check # 1005	h. Purpose Code cards & stakes	i. Date (mm/dd/yyyy) 10-20-2022	j. Amount \$ 160⁰⁰	k. Required Remarks Cards & Stakes	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Dollar Tree 2948-1 Franklin Blvd Gastonia, N.C. 28056-7204			b. Coordinated Committee Name		d. Comments Decorations for Trick or Treat Event	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 41.46	
f. Account Code 01	g. Form of Payment Cash	h. Purpose Code Event	i. Date (mm/dd/yyyy) 10-17-2022	j. Amount \$ 41.46	k. Required Remarks	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Walmart 705 E. Dixon Blvd. Shelby, NC 28152			b. Coordinated Committee Name		d. Comments Candy for Event	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 74.66	
f. Account Code 01	g. Form of Payment Debit card	h. Purpose Code Event	i. Date (mm/dd/yyyy) 10-18-2022	j. Amount \$ 74.66	k. Required Remarks	
5. Total only this Page						\$ 276.12
6. Total of ALL CRO-1310 Pages						\$
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
OCT 31 '22 PM 4:54