



COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE

CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE

2012 2009 [X] GENERAL [ ] SPECIAL ELECTION
(Year)

Report Type:
[X] Final Report
[ ] Amendment

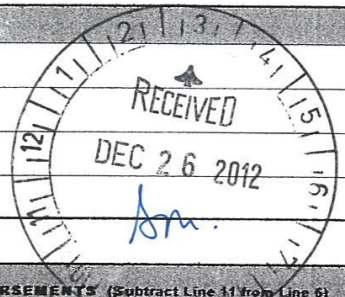
IMPORTANT: FILE THIS REPORT NOT LATER THAN DECEMBER 28, 2009.
FILE ORIGINAL AND TWO COPIES WITH THE OFFICE OF THE PUBLIC AUDITOR.

OFFICE OF THE PUBLIC AUDITOR
SIGNATURE [Signature] 12-26-12

This Campaign Statement of Account form is mandatory. Candidates may use the suggested reports and schedules furnished by the Election Commission, or they may use their own detailed formats. Should you use an alternative schedule format, you must provide, at a minimum, detailed information as required in the Act.

Candidate Name (Last Name, First Name, MI): AQUINO, DANIEL I.
Office Sought: HOUSE OF REPRESENTATIVES
Treasurer Name (Last Name, First Name, MI): AQUINO, JOANN T.
Preferred Mailing (P.O. Box) Address: P.O. Box 504275
Telephone: 235.5437

Table with columns: Description, CASH, IN-KIND. Rows include: BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S), RECEIPTS FROM FUNDRAISING EVENTS, MULTI-CANDIDATE CONTRIBUTIONS, RECEIPTS FROM GENERAL CONTRIBUTIONS, OTHER RECEIPTS, TOTAL AVAILABLE, DISBURSEMENTS FOR FUNDRAISING EVENTS, MULTI-CANDIDATE EXPENSES, DISBURSEMENTS FOR GENERAL EXPENDITURES, OTHER DISBURSEMENTS, TOTAL DISBURSEMENTS, EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS.



VERIFICATION

Commonwealth of the Northern Mariana Islands )
Island of saipan ) s.s.
I, Daniel I. Aquino, being duly sworn on oath, depose and say:
That I am the individual named above; that I prepared the foregoing Campaign Statement of Account, that I have used all reasonable diligence in preparing this Statement, and that the contents thereof, including the contents of all supporting attachments, are a true, full and explicit accounting of all contributions received and expenses incurred in aid of the campaign. I understand that providing false information herein may subject me to civil and criminal penalties as provided by the Northern Mariana Islands Election Reform Act of 2000, 1 CMC §6428.
Signature of Candidate: [Signature] Date (Month, Day, Year): 12-26-12
Subscribed and sworn before me this 26th day of December, 2012.
Notary Seal: SOCORRO S. BORJA, NOTARY PUBLIC, BY AND FOR THE COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS, My Commission Expires April 18, 2014

Commonwealth of the Northern Mariana Islands )
Island of saipan ) s.s.
I, Joann T. Aquino, being duly sworn on oath, depose and say:
That I am the individual named above; that the foregoing Campaign Statement of Account, and the contents thereof, including the contents of all supporting attachments, are true, full and explicit accounting of all contributions received and expenses incurred in aid of the campaign. I understand that providing false information herein may subject me to civil and criminal penalties as provided by the Northern Mariana Islands Election Reform Act of 2000, 1 CMC §6428.
Signature of Treasurer: [Signature] Date (Month, Day, Year): 12/26/2012
Subscribed and sworn before me this 26th day of December, 2012.
Notary Seal: SOCORRO S. BORJA, NOTARY PUBLIC, BY AND FOR THE COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS, My Commission Expires April 18, 2014

**COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS  
CAMPAIGN FINANCIAL DISCLOSURE**

**FUNDRAISING EVENT REPORT**

**FUNDRAISING DATE(S):** OCT. 19, 2012

**IMPORTANT:** USE A SEPARATE REPORT FOR EACH FUNDRAISING EVENT.

Candidate Name (Last Name, First Name, MI): <u>AQUINO, DANIEL I.</u>	Treasurer Full Name (Last Name, First Name, MI): <u>AQUINO, JOANN T.</u>
Name of Fundraising Event: <u>Dinner Fundraiser</u>	Date(s) Held: <u>OCT. 19, 2012</u>

**SUMMARY OF FUNDRAISING RECEIPTS AND DISBURSEMENTS**  
(Complete Supporting Schedules Before Completing This Section)


	CASH	IN-KIND
<b>1. GROSS PROCEEDS FROM FUNDRAISING EVENT</b> (Total Cash Proceeds from Line 3 of Result Summary of Supporting Schedule FR-A)	\$2,430.00	
<b>2. IN-KIND CONTRIBUTIONS RECEIVED</b> (Total In-kind Contributions Received from Schedule FR-B. Bring down this value to Line 6 below.)		- 0 -
<b>3. CONTRIBUTED PROPERTY RECEIVED</b> (Total Contributed Property Received from Schedule FR-C)		- 0 -
<b>4. TOTAL RECEIPTS</b> (Transfer to Line 1 of Campaign Statement of Account)	\$2,430.00	- 0 -
<b>DISBURSEMENTS</b>		
<b>5. FUNDRAISING EXPENSES</b> (Total Fundraising Expenses from Line 4 of Result Summary of Schedule FR-A)	\$1,888.45	
<b>6. ADJUSTMENT FOR IN-KIND CONTRIBUTIONS RECEIVED</b> (From Line 2 above)		- 0 -
<b>7. TOTAL DISBURSEMENTS</b> (Transfer to Line 6 of Campaign Statement of Account)	\$1,888.45	- 0 -
<b>NET RECEIPTS AND DISBURSEMENTS</b> (Subtract Line 7 from Line 4)	\$541.55	- 0 -





**IMPORTANT:** FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

**SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S):** 10-19-2012 PAGE 5 OF 11

Candidate Name (In Full): <u>AQUINO, DANIEL IWASHITA</u>	Signature of Treasurer: 	Date: <u>12-26-12</u>
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### SUPPORTING SCHEDULE FR-B IN-KIND CONTRIBUTIONS RECEIVED

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE
Example : ABC Retail	Give-away t-shirts (250 pcs @ \$ 5.00)	\$ 1,250
	N/A	
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary).....		➔
TOTAL RECEIPTS (IF LAST PAGE ONLY) (Transfer Total to Line 2 of either the Fundraising Event Report or the General Contribution and Expense Report).....		➔

### SUPPORTING SCHEDULE FR-C CONTRIBUTED PROPERTY RECEIVED

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF PROPERTY RECEIVED	FAIR MARKET VALUE
Example : Island Computers	Old Computer with printer	\$ 600
	N/A	
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary).....		➔
TOTAL RECEIPTS (IF LAST PAGE ONLY) (Transfer Total to Line 3 of either the Fundraising Event Report or the General Contribution and Expense Report).....		➔

**COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS  
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## GENERAL CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name, MI): <b>AQUINO, DANIEL I.</b>	Treasurer Full Name (Last Name, First Name, MI): <b>AQUINO JOANN T.</b>
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### SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

	CASH	IN-KIND
<b>1. MONETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS</b> <small>(Total Contributions from Schedule GC-A)</small>	\$ 1,450.00	
<b>2. IN-KIND CONTRIBUTIONS RECEIVED</b> <small>(Total In-kind Contributions Received from Schedule GC-B. Bring down this value to Line 7 below.)</small>		- 0 -
<b>3. CONTRIBUTED PROPERTY RECEIVED</b> <small>(Total Contributed Property Received from Schedule GC-C)</small>		- 0 -
<b>4. TOTAL RECEIPTS</b> <small>(Transfer to Line 4 of Campaign Statement of Account)</small>	\$ 1,450.00	- 0 -
<b>DISBURSEMENTS</b>		
<b>5. GENERAL EXPENDITURES</b> <small>(Total General Expenditures from Schedule GC-D)</small>		
<b>6. CONTRIBUTIONS TO OTHER CANDIDATES</b> <small>(Total Contributions To Other Candidates from Schedule E)</small>	- 0 -	
<b>7. ADJUSTMENT FOR IN-KIND CONTRIBUTIONS RECEIVED</b> <small>(From Line 2 above)</small>		- 0 -
<b>8. TOTAL DISBURSEMENTS</b> <small>(Transfer to Line 9 of Campaign Statement of Account)</small>		
<b>NET RECEIPTS AND DISBURSEMENTS</b> <small>(Subtract Line 8 from Line 4)</small>		









**COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS  
CAMPAIGN FINANCIAL DISCLOSURE**

**MULTI-CANDIDATE  
CONTRIBUTION AND EXPENSE REPORT**

Candidate Name (Last Name, First Name, MI): <b>AQUINO, DANIEL I.</b>	Treasurer Full Name (Last Name, First Name, MI): <b>AQUINO, JOANN T.</b>
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**CONTRIBUTIONS RECEIVED**

RECEIVED FROM	DESCRIPTION	AMOUNT
Example : BEST PARTY IN THE LAND	Cash Allocation of Party General Fundraising Proceeds	\$ 20,000
	N/A	
SUB-TOTAL OF CONTRIBUTIONS RECEIVED THIS PAGE ONLY (Use additional sheets as necessary) .....		➔
TOTAL CONTRIBUTIONS RECEIVED (IF LAST PAGE ONLY) (Transfer Total to Line 2 of Campaign Statement of Account) .....		➔

**EXPENSES**

FULL NAME OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT
Example : BEST PARTY IN THE LAND	Allocation of Party General Expenses	\$ 15,000
	N/A	
SUB-TOTAL OF EXPENSES THIS PAGE ONLY (Use additional sheets as necessary) .....		➔
TOTAL ALLOCATED EXPENDITURES (IF LAST PAGE ONLY) (Transfer Total to Line 7 of Campaign Statement of Account) .....		➔