



COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE

COPY

CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE

2012 [] GENERAL [] SPECIAL ELECTION
(Year)

Report Type:
[] Final Report
[] Amendment

OFFICE OF THE PUBLIC AUDITOR
12-14-12
SIGNATURE [Signature]

IMPORTANT: FILE THIS REPORT NOT LATER THAN DECEMBER 26, 2012.
FILE ORIGINAL AND TWO COPIES WITH THE OFFICE OF THE PUBLIC AUDITOR.

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): Dela Cruz, Francisco S.
Office Sought: House of Representatives
Treasurer Name (Last Name, First Name, MI): Salalila, Cheryl D.
Preferred Mailing (P.O. Box) Address: P.O. Box 500342 Saipan, MP 96950
Telephone: 285-6843

Table with 3 columns: Description, CASH, IN-KIND. Rows include BALANCE CARRIED FORWARD, 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, Francisco S. Delacruz, 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) 12/14/12
Subscribed and sworn before me this 14th day of December, 2012.
Notary Seal: MICHELLE A. CAMACHO, Notary Public, P.O. Box 50053 CK, Saipan, MP 96950 0053

Commonwealth of the Northern Mariana Islands)
Island of Saipan) s.s.
I, Cheryl D. Salalila, 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) 12/14/12
Subscribed and sworn before me this 14th day of December, 2012.
Notary Seal: MICHELLE A. CAMACHO, Notary Public, P.O. Box 50053 CK, Saipan, MP 96950 0053

IMPORTANT: FILE SEPARATE SCHEDULE A FOR EACH FUNDRAISING EVENT.

SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S): N/A PAGE OF

Candidate Name (In Full): Dela Cruz, Francisco S.	Signature of Treasurer: 	Date: <u>12/14/12</u>
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**SUPPORTING SCHEDULE FR-A
GROSS PROCEEDS AND EXPENSES FROM FUNDRAISING EVENT**

SECTION 2 - FUNDRAISING EXPENSES

FULL NAME OF PAYEE OR VENDOR	PARTICULARS/ DESCRIPTION	AMOUNT				
		Food & Drinks	Advertising	Supplies	Fees/Donation	Other
Example : Taste Good Restaurant	Food catering	\$ 600				
N/A	N/A	-0-	-0-	-0-	-0-	-0-
TOTAL FUNDRAISING EXPENSES (Transfer Total to Line 4, Section 1 of Schedule A)		(Total) -0- ←				

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S): N/A PAGE OF

Candidate Name (In Full): Dela Cruz, Francisco S.	Signature of Treasurer: 	Date: 12/14/12
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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	N/A	-0-
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary).....		-0-
TOTAL RECEIPTS (IF LAST PAGE ONLY) (Transfer Total to Line 2 of either the Fundraising Event Report or the General Contribution and Expense Report)		-0-

**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	N/A	-0-
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary).....		-0-
TOTAL RECEIPTS (IF LAST PAGE ONLY) (Transfer Total to Line 3 of either the Fundraising Event Report or the General Contribution and Expense Report)		-0-

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

**MULTI-CANDIDATE
CONTRIBUTION AND EXPENSE REPORT**

Candidate Name (Last Name, First Name, MI): Dela Cruz, Francisco S.	Treasurer Full Name (Last Name, First Name, MI): Salalila, Cheryl D.
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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	N/A	-0-
SUB-TOTAL OF CONTRIBUTIONS RECEIVED THIS PAGE ONLY (Use additional sheets as necessary)		➔ -0-
TOTAL CONTRIBUTIONS RECEIVED (IF LAST PAGE ONLY) (Transfer Total to Line 2 of Campaign Statement of Account)		➔ -0-

EXPENSES

FULL NAME OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT
Example : BEST PARTY IN THE LAND	Allocation of Party General Expenses	\$ 15,000
N/A	N/A	-0-
SUB-TOTAL OF EXPENSES THIS PAGE ONLY (Use additional sheets as necessary)		➔ -0-
TOTAL ALLOCATED EXPENDITURES (IF LAST PAGE ONLY) (Transfer Total to Line 7 of Campaign Statement of Account)		➔ -0-

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

**MULTI-CANDIDATE
CONTRIBUTION AND EXPENSE REPORT**

Candidate Name (Last Name, First Name, MI): Dela Cruz, Francisco S.	Treasurer Full Name (Last Name, First Name, MI): Salalila, Cheryl D.
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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	N/A	-0-
SUB-TOTAL OF CONTRIBUTIONS RECEIVED THIS PAGE ONLY (Use additional sheets as necessary)		-0-
TOTAL CONTRIBUTIONS RECEIVED (IF LAST PAGE ONLY) (Transfer Total to Line 2 of Campaign Statement of Account)		-0-

EXPENSES

FULL NAME OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT
Example : BEST PARTY IN THE LAND	Allocation of Party General Expenses	\$ 15,000
N/A	N/A	-0-
SUB-TOTAL OF EXPENSES THIS PAGE ONLY (Use additional sheets as necessary)		-0-
TOTAL ALLOCATED EXPENDITURES (IF LAST PAGE ONLY) (Transfer Total to Line 7 of Campaign Statement of Account)		-0-

SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

Candidate Name (In Full): Dela Cruz, Francisco S.	Signature of Treasurer: <i>[Signature]</i>	Date: 12/14/12
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**SUPPORTING SCHEDULE GC-A
MONETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS**

FULL NAME OF CONTRIBUTOR	AMOUNT	FULL NAME OF CONTRIBUTOR	AMOUNT
Example: Ms. Jane Doe	\$ 1,500.00	Marben & Associates	\$1,000.00
		D&W Saipan Inc.	\$ 500.00
TOTAL CONTRIBUTIONS RECEIVED, IF LAST PAGE OTHERWISE CONTINUE ON NEXT COLUMN		TOTAL CONTRIBUTIONS RECEIVED (LAST PAGE ONLY) (Transfer to Line 1 of Gen. Contrib.& Exp. Report)	\$1,500.00

SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

PAGE ____ OF ____

Candidate Name (In Full): Dela Cruz, Francisco S.	Signature of Treasurer: 	Date: 12/14/12
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**SUPPORTING SCHEDULE GC-E
CONTRIBUTIONS TO OTHER CANDIDATES (EXPENDITURES)**

FULL NAME OF PAYEE	DESCRIPTION	AMOUNT
Example: Mr. Winning Candidate Like Me	Fundraising tickets purchased (10 tickets @ \$50)	\$ 500
N/A	N/A	-0-
SUB-TOTAL OF EXPENSES THIS PAGE ONLY (Use additional sheets as necessary)		-0-
TOTAL CONTRIBUTIONS TO OTHER CANDIDATES (IF LAST PAGE ONLY)		-0-

SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

Candidate Name (In Full) : Dela Cruz, Francisco S.	Signature of Treasurer 	Date: 12/14/12
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**SUPPORTING SCHEDULE GC-D
GENERAL EXPENDITURES**

FULL NAME OF PAYEE OR VENDOR	PARTICULARS/ DESCRIPTION	AMOUNT				
		Food &	Advertising	Supplies	Fees/Donation	Other
Example : Marianas Daily	One-page ad		\$ 500			
CNMI Treasury	Candidate Filing Fee				\$100.00	
CNMI Treasury	Political Sign		\$25.00			
Dept. of Public Land	Political SignBoard		\$100.00			
Transamerica Corp.	Political SignBoard		\$17.84			
Transamerica Corp.	Political SignBoard		\$15.60			
Transamerica Corp.	Board		\$49.70			
Saipan Tribune	Political Ad		\$135.00			
Twins Supermarket	Meeting	\$39.00				
Twins Supermarket	Meeting	\$94.95				
Rosal Zest Ent.	Bumper Stickers		\$88.00			
Wushin Corp.	Gas	\$34.00				
Joeten Shopping Center	Food/Drinks	\$535.53				
Rosal Zest Ent.	Banner		\$40.00			
Ginen Saipan	Paper Products			\$118.00		
Joeten Hafa Adai Center	Ice/Drinks	\$224.42				
Mattys Catering	Food	\$75.00				
Twins Supermarket	Meeting	\$27.96				
SUB-TOTAL OF PAYMENTS THIS PAGE ONLY (Use additional sheets as necessary)	(Sub-Total) ←	\$2,000.00				
TOTAL GEN. EXPENDITURES (IF LAST PAGE ONLY) (Transfer to Line 5 of Gen. Contribution & Exp. Report)	(Total) ←	\$2,000.00				

SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

PAGE _____ OF _____

Candidate Name (In Full): Dela Cruz, Francisco S.	Signature of Treasurer: <i>[Handwritten Signature]</i>	Date: 12/14/12
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**SUPPORTING SCHEDULE GC-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
Joeten Enterprises	Gift Certificate	\$500.000
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		➔ \$500.00
TOTAL IN-KIND CONTRIBUTIONS RECEIVED (IF LAST PAGE ONLY) (Transfer Total to Line 2 of the General Contribution and Expense Report)		➔ \$500.00

**SUPPORTING SCHEDULE GC-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	N/A	-0-
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		➔ -0-
TOTAL CONTRIBUTOR PROPERTY RECEIVED (IF LAST PAGE ONLY)		➔ -0-

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

GENERAL CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name, MI): Dela Cruz, Francisco S.	Treasurer Full Name (Last Name, First Name, MI): Salalila, Cheryl D.
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SUMMARY OF RECEIPTS AND DISBURSEMENTS
(Complete Supporting Schedules Before Completing This Section)

	CASH	IN-KIND
1. MONETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS (Total Contributions from Schedule GC-A)	\$1,500.00	
2. IN-KIND CONTRIBUTIONS RECEIVED (Total In-kind Contributions Received from Schedule GC-B. Bring down this value to Line 7 below.)		\$500.00
3. CONTRIBUTED PROPERTY RECEIVED (Total Contributed Property Received from Schedule GC-C)		-0-
4. TOTAL RECEIPTS (Transfer to Line 4 of Campaign Statement of Account)	\$1,500.00	\$500.00
DISBURSEMENTS		
5. GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D)	\$1,500.00	
6. CONTRIBUTIONS TO OTHER CANDIDATES (Total Contributions To Other Candidates from Schedule E)	-0-	
7. ADJUSTMENT FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		\$500.00
8. TOTAL DISBURSEMENTS (Transfer to Line 9 of Campaign Statement of Account)	\$1,500.00	\$500.00
NET RECEIPTS AND DISBURSEMENTS (Subtract Line 8 from Line 4)	-0-	-0-