

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

Report Type: X Final Report Amendment

CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE 2014 GENERAL SPECIAL ELECTION

IMPORTANT:

FILE THIS REPORT NOT LATER THAN DECEMBER 24, 2014.

FILE ORIGINAL AND TWO COPIES WITH THE OFFICE OF THE PUBLIC AUDITOR.

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, design to make an arequired in the Act.

Candidate Name (Last Name, First Name, MI):	Office Sought: Senate		
Treasurer Name (Last Name, First Name, MI): TENORIO, VONNE B.	Preferred Mailing (P.O. Box) Address:		Telephone:
		CASH	IN-KIND

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1.	BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)	\$980.58	Ø
1.0	ADD: RECEIPTS THIS ELECTION PERIOD 3		
2.	RECEIPTS FROM FUNDRAISING EVENTS	\$15,324	\$2,355
3.	MULTI-CANDIDATE CONTRIBUTIONS	Ø	Ø
4.	RECEIPTS FROM GENERAL CONTRIBUTIONS	0	Ø
5.	OTHER RECEIPTS	10	Ø
6.	TOTAL AVAILABLE (Add Lines 1 through 5)	\$16,304.58	\$2,355
	LESS: DISBURSEMENTS THIS ELECTION PERIOD RECEIVED		
7.	DISBURSEMENTS FOR FUNDRAISING EVENTS	\$6,259.42	Ø
8.	MULTI-CANDIDATE EXPENSES*	Ø	Ø
9.	DISBURSEMENTS FOR GENERAL EXPENDITURES	\$10,045.16	Ø
10.	OTHER DISBURSEMENTS	Ø	Ø
11.	TOTAL DISBURSEMENTS (Add Lines 7 through10)	\$16,304.18	Ø
12.	EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS. (Subtract Line 11 from Line 8)	B	Ø

VERIFICATION

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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 folse 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.	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 Condidote Subscribed and Sorm before mental 3 V day of Secretary Surger CASTRO RICARDO B. CASTRO	Subscribed and swam before me this 13 Loday of Jecunia 20 M. RICATION B. CAPTRO NOTARY PUBLIC
NOTARY PUBLIC Commonwealth of the Northern Mariana Islands My Commiscion (18% 3 m 28.14 (U 3 SFD 20.16). P.O. Box 504043	Onemonwealth of the Northern Mariana Islands My Commission expires: 2 SEP 2016 P.O. Box 504043
Saipan, MP 96359-4043	Salpan, Mr 96959-4043