

CAMPAIGN	STATEMENT	OF ACCOU	NT -	CANDID	ATE
2016 X	GENERAL	SPECIAL	ELEC	TION	an de

Report Type:			
×	Final Report		
	Amendment		

IMPORTANT:

FILE THIS REPORT NOT LATER THAN DECEMBER 28, 2016.

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

Office Sought: House of Reps.

Preferred Malling (P.O. Box) Address:

P.O. Box 503548 Candidate Name (Last Name, First Name, MI):

CABRERA, (TOTALS

Treasurer Name (Last Name, First Name, MI): Telephone: AGUON, JUAN L. 783-5649

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.

		CASH	IN-KIND
1.	BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)	-0 -	-0-
	ADD: RECEIPTS THIS ELECTION PERIOD	-9-	-6-
2.	RECEIPTS FROM FUNDRAISING EVENTS	-0-	-0-
3.	MULTI-CANDIDATE CONTRIBUTIONS	-0-	-0-
4.	RECEIPTS FROM GENERAL CONTRIBUTIONS	-0-	-0-
5.	OTHER RECEIPTS	-0-	-0-
6.	TOTAL AVAILABLE (Add Lines 1 through 5)	-0-	-0-
	LESS: DISBURSEMENTS THIS ELECTION PERIOD	-0-	-0-
7.	DISBURSEMENTS FOR FUNDRAISING EVENTS	-0-	-0-
В.	MULTI-CANDIDATE EXPENSES	-0-	-o-a
9.	DISBURSEMENTS FOR GENERAL EXPENDITURES	-0-	-0- 595
10.	OTHER DISBURSEMENTS	-0 -	-0- 395
11	TOTAL DISBURSEMENTS (Add Lines 7 through10)	-0-	-0-595 -0+595.
12.	EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS (Subtract Line 11 from Line 6)	-0-	-0- 595

#### VERIFICATION

Commonwealth of the Northern Mariana Islands ) Island of SAIPAN ) s.s.	Commonwealth of the Northern Mariana Islands ) Island of SAIPAN ) s.s.
I, James D. Calvera, being duly sworn on oath, depose and say:	Tunn L. Aduay, 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.	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 Candidate Date (Month, Day, Year)	Signature of Treasurer Date (Month, Day, Year)
Subscribed and sworn before me this day of , 20	Subscribed and sworn before me this day of day of John Metany Stans
P.O. Box, 50005, CK, Saipan, MP 96950 0053  Notary Public  RV AND FOR THE COMMONWEATH  GFD-001, Roylsed July 29, 2016 NORTHERN MAINTENANDS  My Commission Expires:	P.C. Box, Serios C.K., Saipan, MP 96950-6953  Notary Public  BY AND FOR THE COMMONWEALTH  OF THE NORTHERN MARIANAIST ANDS  My Commission Expires 4 10 17

# FUNDRAISING EVENT REPORT FUNDRAISING DATE(S):

IMPORTANT: USE A SEPARATE REPORT FOR EACH FUNDRAISING EVENT.

Candidate Name (Last Name, First Name, MI):	14 mg 2 15 15 15 15 15 15 15 15 15 15 15 15 15	Treasurer Full Name (Last Name, First Name, MI):
Name of Fundralsing Event:		Date(s) Held:

#### SUMMARY OF FUNDRAISING RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

RECE	PTS	CASH	IN-KIND
1.	GROSS PROCEEDS FROM FUNDRAISING EVENT (Total Cash Proceeds from Line 3 of Result Summary of Supporting Schedule FR-A)		
2.	IN-KIND CONTRIBUTIONS RECEIVED (Total In-kind Contributions Received from Schedule FR-B. Bring down this value to Line 6 below.)		
3.	CONTRIBUTED PROPERTY RECEIVED (Total Contributed Properly Received from Schedule FR-C)		
4.	TOTAL RECEIPTS (Transfer to Line 1 of Campaign Statement of Account)		
DISBU	RSEMENTS		
5.	FUNDRAISING EXPENSES (Total Fundraising Expenses from Line 4 of Resull Summary of Schedule FR- A)		
	ADJUSTMENT FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		
4	TOTAL DISBURSEMENTS (Transfer to Line 6 of Campaign Statement of Account)		
	CEIPTS AND DISBURSEMENTS Line 7 from Line 4)		

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S): \_\_

AGE	OF

Candidate Name (In Full):

Signature of Treasurer:

Date:

## SUPPORTING SCHEDULE FR-A GROSS PROCEEDS AND EXPENSES FROM FUNDRAISING EVENT

#### RESULT SUMMARY

1. TOTAL CASH PROCEEDS FROM INDIVIDUALS WHO CONTRIBUTED LESS THAN \$500	\$
2. TOTAL CASH PROCEEDS FROM INDIVIDUALS WHO CONTRIBUTED MORE THAN \$500 (Details on Section 1 below)	+
3. TOTAL CASH PROCEEDS FROM THIS FUNDRAISING EVENT (Transfer this total to Line 1 of Fundraising Event	
4. TOTAL FUNDRAISING EXPENSES (Details on Section 2 on the reverse side of this form. Transfer this total to Line 5 of Fundraising Event Report)	
5. NET CASH PROCEEDS	\$

#### SECTION 1 - NAMES OF CONTRIBUTORS WITH \$500 OR MORE TOTAL AGGREGATE CONTRIBUTIONS

FULL NAME OF CONTRIBUTOR	AMOUNT	FULL NAME OF CONTRIBUTOR	AMOUNT
Example : Mr. John Doe	\$ 600.00		
TOTAL PROCEEDS OF CONTRIBUTIONS, IF LAST PAGE OTHERWISE CONTINUE ON NEXT COLUMN		TOTAL PROCEEDS OF CONTRIBUTIONS \$500 OR MORE (LAST PAGE ONLY - MUST AGREE WITH LINE 2 ABOVE)	

IMPORTANT: FILE SEPARATE SCHEDULE A FOR EACH FUNDRAISING EVENT.

SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S): PAGE	OF _	
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Candidate Name (in Full) :	Signature of Treasurer:	Date:

## SUPPORTING SCHEDULE FR-A GROSS PROCEEDS AND EXPENSES FROM FUNDRAISING EVENT

### SECTION 2 - FUNDRAISING EXPENSES

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

Candidate Name (In Full) :	Signature of Treasurer:	Date	
	IPPORTING SCHEDULE FR-B N-KIND CONTRIBUTIONS RECEIVED		154
FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	to the same of	FAIR MARKE VALUE
Example : ABC Retail	Give-away t-shirts (250 pcs @ \$ 5.00)		\$ 1,2
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			1000

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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		
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY				
Use additional sheets as necessary				
OTAL RECEIPTS (IF LAST PAGE ONLY) Transfer Total to Line 3 of either the Fundralsing Event Rep	ort or the General Contribution and Expense Report)			

### **GENERAL CONTRIBUTION AND EXPENSE REPORT**

Candidate Name (Last Name, First Name, MI):  CABRERA, Janves D.	Treasurer Full Name (Last Name, First Name, MI):  AGUON, JUAN L.

#### **SUMMARY OF RECEIPTS AND DISBURSEMENTS**

(Complete Supporting Schedules Before Completing This Section)

REC	EIPTS	CASH	IN-KIND
1.	MONETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS (Total Contributions from Schedule GC-A)	-0-	-0-
2.	IN-KIND CONTRIBUTIONS RECEIVED (Total In-kind Contributions Received from Schedule GC-B. Bring down this value to Line 7 below.)	-0-	-0-
3.	CONTRIBUTED PROPERTY RECEIVED (Total Contributed Property Received from Schedule GC-C)	-0-	-0-
4.	TOTAL RECEIPTS (Transfer to Line 4 of Campaign Statement of Account)	-0-	-0 -
DISB	URSEMENTS	-0-	HEALON
5.	GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D)	-0-	4445.00
6.	CONTRIBUTIONS TO OTHER CANDIDATES (Total Contributions To Other Candidates from Schedule E)	-0-	-0-
7.	ADJUSTMENT FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)	-0-	-0-
8.	TOTAL DISBURSEMENTS (Transfer to Line 9 of Campaign Statement of Account)	-0-	\$595.00
NETR	ECEIPTS AND DISBURSEMENTS (Subtract Line 8 from Line 4)	-0-	\$595.00

#### SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

PAGE	OF	

Candidate Name (in Full):	Signature of Treasurer:	Date:

## 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		
			-
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)	

#### SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

PAGE OF

Candidate Name (in Full):	Signature of Treasurer:	Date:			

### SUPPORTING SCHEDULE GC-B IN-KIND CONTRIBUTIONS RECEIVED

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION		R MARKET VALUE	
Example : ABC Retail	Give-away t-shirts (250 pcs @ \$ 5.00)	\$	1,250	
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)				
TOTAL IN-KIND CONTRIBUTIONS RECEIVED (IF LAST P (Transfer Total to Line 2 of the General Contribution and	AGE ONLY) Expense Report)			

## 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
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary		
TOTAL CONTRIBUTED PROPERTY RECEIVED (IF LAST (Transfer Total to Line 3 of the General Contribution and	PAGE ONLY) Expense Report)	

PAGE	OF
LAGE	OI .

Candidate Name (In Full) :

JAMES DUENAS CABRERA

Ignature of Treasurer:

Date: 12/27/16

## SUPPORTING SCHEDULE GC-D GENERAL EXPENDITURES

FULL NAME OF PAYEE OR VENDOR	PARTICULARS/ AMOUNT					
THE PARTY OF THE P	DESCRIPTION	Food & Advertising		Supplies	Fees/Donation	Other
Example : Marianas Daily	One-page ad		\$ 500			
Self	Banner			\$45.00		
Self	Posters			\$100.00		
Anonymous	Donuts	#30.00				
Anmymous	water	#120.00				
Self	Tents			\$150.00		
Self	Filing Fee				\$100.00	
CEC	Filing Fee Roster				\$50.00	
	0					
JB-TOTAL OF PAYMENTS THIS PAGE ONLY	(Sub-Total) 595.00	ALEA M		#29F.00	WIEN 00	
ise additional sheets as necessary )  OTAL GEN. EXPENDITURES (IF LAST PAGE ONLY)	(Total) (Latel Cont.)	\$150.00		\$295.00 \$295.00	#INC.	
ransfer to Line 5 of Gen. Contribution & Exp. Report)	FOF 00	#150.00		#245.00	#150.00	

PAGE	OF

			COLUMN SERVICE AND ADDRESS OF THE PARTY OF T	
Candidate Name (In Full) :	3 3 4 1	Signature of Treasurer:	Date:	
21/10/20	. surrilla	DUBLING EASKERA	C En INAL	

## 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
55.75.45			
	CARACI C		-11616
No. of the	C series (	-	4000
	13.78% C(14.75C	S. I. L. H	As a reason -
	Fight 6 Festivity		TALL STATE
े. शहास-	CELOI		7000
1.4	- Files Fee		.599
	101-12		(1)(1)
T. C.			
SUB-TOTAL OF EXPENSES THIS PAGE ONLY (Use additional sheets as necessary )	* Joseph		
TOTAL CONTRIBUTIONS TO OTHER CANDIDATES (IF (Transfer Total to Line 6 of General Contribution and Ex	LAST PAGE ONLY) (pense Report)		

## MULTI-CANDIDATE CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name, Mi):	Treasurer Full Name (Last Name, First Name, MI):

RECEIVED FROM DESCRIPTION	AMOUNT		
Example : BEST PARTY IN THE LAND	Cash Allocation of Party General Fundraising Proceeds	\$	20,000
			1
UB-TOTAL OF CONTRIBUTIONS RECEIVED THIS Use additional sheets as necessary )	PAGE ONLY		
OTAL CONTRIBUTIONS RECEIVED (IF LAST PAG Transfer Total to Line 2 of Campaign Statement of	E ONLY) Account)		

### **EXPENSES**

FULL NAME OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT
Example: BEST PARTY IN THE LAND	Allocation of Party General Expenses	\$ 15,000
SUB-TOTAL OF EXPENSES THIS PAGE ONLY Use additional sheets as necessary )		
OTAL ALLOCATED EXPENDITURES (IF LAST PA	GE ONLY)	

