

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE 2016 GENERAL SPECIAL ELECTION

Rep	ort Type:
X	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.

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):	Office Sought: Representat	ive	
Treasurer Name (Last Name, First Name, MI):	Preferred Mailing (P.O. Box) Address:	Saran MA	Telephone: 287-3515
Sau C. Maria	1.0. (Do & 2019 a)	SATIFACE INC	00 73 3
		CASH	IN-KIND
BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION	ON(S)	O	-0-
ADD: RECEIPTS THIS ELECTION PERIOD		-0-	- 01
2. RECEIPTS FROM FUNDRAISING EVENTS		-0"	-0"
3, MULTI-CANDIDATE CONTRIBUTIONS		-0-	~ O ~
4. RECEIPTS FROM GENERAL CONTRIBUTIONS		-0-	-0-
5. OTHER RECEIPTS		-0-	-0-
6. TOTAL AVAILABLE (Add Lines 1 through 5)		-O.	-0-
LESS: DISBURSEMENTS THIS ELECTION PERIOD			0
7. DISBURSEMENTS FOR FUNDRAISING EVENTS		-0-	-0-
8. MULTI-CANDIDATE EXPENSES		-0-	-0-
9. DISBURSEMENTS FOR GENERAL EXPENDITURES		\$ 5,438.00	- (O ^
10. OTHER DISBURSEMENTS		-0-	-0-
11. TOTAL DISBURSEMENTS (Add Lines 7 through10)		\$ 5,438.00	-0-
12. EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEME	ENTS (Subtract Line 11 from Line 6)	\$ 5,438.00	-0-
	VERIFICATION		
Commonwealth of the Northern Mariana Islands) s.s.	Commonwealth of the Northern Marian	no Islands)	
Island of Stipm	Island of Saigna	note	
I, VONAN C GANGELLE, being duly sworn on oath, depose of (Candidate)	and say: 1, Junious 102 (Treasurer)	nairente , being duly sworn	on oath, depose and say:
That I am the individual named above; that I prepared the foregoing Campaign State Account, that I have used all reasonable diligence in preparing this Statement, and contents thereof, including the contents of all supporting attachments, are a true, full on accounting of all contributions received and expenses incurred in aid of the campunderstand that providing false information herein may subject me to civil and criminal as provided by the Northern Mariana Islands Election Reform Act of 2000, 1 CMC §6.	that the contents thereof, including the content d explicit accounting of all contributions received arign. I that providing false information herein a benalties the Northern Mariana Islands Election I	s of all supporting attachment and expenses incurred in aid of nay subject me to civil and crim	s, are true, full and explicit the campaign. I understand inal penalties as provided by
Signature of Candidate Subscribed and sworn before me this Aday of Ad	Stighature of Texasurer Subscribed and sworn before me this	Daty/Mon Daty/Mon	th, porteon 2016
MICH A MACHO P.O. Box 500053 CK, Saipau, MP 96950 18053 Notary Public RY AND FOR THE COMMONWEALTH	P.O. Box So Notair BY AND	YOUNG PARK 12990 CK Supun. MP 9695 Y Public Reg. No. 3564 FOR THE COMMONWEALTH THERY MARIANA ISLANDS US	
D-001, Revised July 21, 2016 ommission Expires: 410	My Com	nission Expires June 18, 2017	

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

FUNDRAISING EVENT REPORT FUNDRAISING DATE(S):

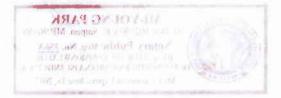
IMPORTANT: USE A **SEPARATE** REPORT FOR **EACH** FUNDRAISING EVENT.

Candidate Name (Last Name, First Name, MJ):	Treasurer Full Name (Last Name, First Name, MI):
Name of Fundraising Event:	Date(s) Held:

SUMMARY OF FUNDRAISING RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

REG	EIPTS	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 Property Received from Schedule FR-C)		
4.	TOTAL RECEIPTS (Transfer to Line 1 of Campaign Statement of Account)		
DISE	URSEMENTS		
5.	FUNDRAISING EXPENSES (Total Fundraising Expenses from Line 4 of Result Summary of Schedule FR- A)		
6.	ADJUSTMENT FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		
7.	TOTAL DISBURSEMENTS (Transfer to Line 6 of Campaign Statement of Account)		
NET	RECEIPTS AND DISBURSEMENTS		



 	 FUNDDAISING	

PAGE

OF_

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l	C	at	е:

Candidate Name (In Full):

5. NET CASH PROCEEDS

Signature of Treasurer:

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 Fundralsing 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)	

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		
1,			
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)	

SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S):		PAGE OF
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	Advertising	Supplies	Fees/Donation	Other
Example : Taste Good Restaurant	Food catering	\$ 600				
2732 30172 31172						
TOTAL FUNDRAISING EXPENSES Transfer Total to Line 4, Section 1 of Schedule A)	(Total)					

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S): _____PAGE ___OF ____

Candidate Name (In Full): ______Date:

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

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

GENERAL CONTRIBUTION AND EXPENSE REPORT

Candidate) Name (Last Name, First Name, M):	Treasurer Full Name (Last Name, First Mame, MI):
1	1 100) - 1100)

SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

REC	EIPTS 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	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.)	- Or -	- 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-
DISE	URSEMENTS	0	- 0 -
5.	GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D)	\$5,428.00	-01
6.	CONTRIBUTIONS TO OTHER CANDIDATES (Total Contributions To Other Candidates from Schedule E)	- 8-	-0-
7.	ADJUSTMENT FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)	0-	-6-
8.	TOTAL DISBURSEMENTS (Transfer to Line 9 of Campaign Statement of Account)	\$5438.00	
NET R	ECEIPTS AND DISBURSEMENTS (Subtract Line 8 from Line 4)	\$5,438.00	

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	-	
	1		
OTAL CONTRIBUTIONS RECEIVED, IF LAST PAGE THERWISE CONTINUE ON NEXT COLUMN		TOTAL CONTRIBUTIONS RECEIVED (LAST PAGE ONLY) (Transfer to Line 1 of Gen. Contrib.& Exp. Report)	

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			

SUPPORTING SCHEDULE GC-C CONTRIBUTED PROPERTY RECEIVED

FULL NAME OF CONTRIBUTOR	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 ____

Candidate Name (In Full) Roman Cepeda Benavente

Signature of Treasurer:

Date: 12/28/16

SUPPORTING SCHEDULE GC-D GENERAL EXPENDITURES

FULL NAME OF PAYEE OR VENDOR	PARTICULARS/		AMOUNT			
	DESCRIPTION	Food &	Advertising	Supplies	Fees/Donation	Other
Example : Marianas Dally	One-page ad		\$ 500			
Marianas Variety	2/3 Pg. ad		4 348			
Saipan Tribune	43 Ps ad		\$39D			
Saipan Tribune Tropical Instant Press	Posters/sucken		\$ 250			
Nations Kitchen	Food	F USD				
Deter	Drinks	5200				
Guangdong Hardware Funeral Expenses Board of Eletion	Imaterials for Sign	4	\$ 900			
Funeral Expenses	Donations				\$2,600	
Board of Election	Donations filing fee				\$100	
	7.					
	1					
UB-TOTAL OF PAYMENTS THIS PAGE ONLY Use additional sheets as necessary)	(Sub-Total)	850	1,888	2,700		
TOTAL GEN. EXPENDITURES (IF LAST PAGE ONLY) Transfer to Line 5 of Gen. Contribution & Exp. Report)	(Total) 438 +	_	1000			

PAGE ____ OF ____

Candidate Name (In Full) :	Signature of Treasurer:	Date:	
Candidate Name (m r dil) .	Meson Calledon Colones Villandia	10-1	

SUPPORTING SCHEDULE GC-E CONTRIBUTIONS TO OTHER CANDIDATES (EXPENDITURES)

FULL NAME OF PAYEE	DESCRIPTION	AMOUNT		
Example : Mr. Winning Candidate Like Me	Winning Candidate Like Me Fundralsing tickets purchased (10 tickets @ \$50)		r. Winning Candidate Like Me Fundraising tickets purchased (10 tickets @ \$50)	
8.17	Marky Garno	Contact.		
- 41		I -WILL		
3	2) contributed as follows			
	27 CON EXE - 2000 120	The second second		
	2 to 000 to 3000 M.	-value.		
535	the safety at described the same of the			
00 V V 4	Englished springles			
901 \$	We have been	AT TANK		
		<u>. </u>		
SUB-TOTAL OF EXPENSES THIS PAGE ONLY (Use additional sheets as necessary)				
TOTAL CONTRIBUTIONS TO OTHER CANDIDATES (IF L (Transfer Total to Line 6 of General Contribution and Ex	AST PAGE ONLY) ense Report)			

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

MULTI-CANDIDATE CONTRIBUTION AND EXPENSE REPORT

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

CONTRIBUTIONS RECEIVED			
RECEIVED FROM	DESCRIPTION	AMOUNT	
Example : BEST PARTY IN THE LAND	Cash Allocation of Party General Fundraising Proceeds	\$ 20,000	
SUB-TOTAL OF CONTRIBUTIONS RECEIVED THIS	PAGE ONLY		
TOTAL CONTRIBUTIONS RECEIVED (IF LAST PAGI (Transfer Total to Line 2 of Campaign Statement of	E ONLY) Account)		

EXPENSES

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

