

# COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS

# CAMPAIGN FINANCIAL DISCLOSURE

## Report Type: ☐ Final Report Amendment

## CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE ∠ □ GENERAL □ SPECIAL ELECTION

IMPORTANT: THIS REPORT MUST BE FILED WITHIN 50 DAYS AFTER THE ELECTION. 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 the minimum, detailed information as required in the Act.

Cand	TU dela Antonia Nt Saina & Northery Isla	ale Masse	you Course
Treas	Wer Name (Last Name, First Name, MI):  Preferred Mailing (P.O. Box) Address:  P. D. Box 500723 1.1.		7 Telephone: 285-0070
	1.0 (1000 100)		124 1070
1 7940		CASH	IN-KIND
1:	BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)	10-	-0-
	ADD: RECEIPTS THIS ELECTION PERIOD		
2	RECEIPT FROM FUNDRAISING EVENTS	-0-	-0-
3	MULTI-CANDIDATE CONTRIBUTIONS	-0-	-0-
4	RECEIPTS FROM GENERAL CONTRIBUTIONS	100.00)-11	-0-
5	OTHER RECEIPTS Filing Fee (laudidate)	100100	-0-
6	TOTAL AVAILABLE (Add Lines 1 through 5)	100.00	_0-
	LESS: DISBURSEMENTS THIS ELECTION PERIOD		
7	DISBURSEMENTS FOR FUNDRAISING EVENTS	-0-	-0-
8	MULTI-CANDIDATE EXPENSES	-0-	-0-
9	DISBURSEMENTS FOR GENERAL EXPENDITURES	0 -	-0-
10.	OTHER DISBURSEMENTS	100.10	-0-
11	TOTAL DISBURSEMENTS (Add Lines 7 through 10)	100. 11	-9-
12	EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS (Subtract Line 11 from Line 6)	-0-	-0-

8	MULTI-CANDIDATE EXPENSES		-0-	-0-
9	DISBURSEMENTS FOR GENERAL EXPENDITURES	_0 -	-1-	
10.	OTHER DISBURSEMENTS	100.10	-0-	
11_	TOTAL DISBURSEMENTS (Add Lines 7 through 10)		100. 11	_9 -
12	EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS (Subtract Line 11 from Line 6)		-0-	-0-
_				
	VERIFIC	CATION		
That State and the attack and entry the N	being duly sworn on oath, depose and say (Candidate)  I am the individual named above, that I prepared the foregoing Campaign ment of Account, that I have used all diligence in preparing this Statement, hat the contents thereof, including the contents of all supporting ments, are a true, full and explicit accounting of all contributions received expenses incurred in aid of the campaign. I understand that providing false mation herein may subject me to civil and criminal penalties as provided by orthern Mariana Islands Election Reform Act of 2000, 1 CMC §6428.  Signature of Candidate  Date (Month, Day, Year)  Etibed and sworn before me this 19 day of Caroline 1, 2014	Island of Commonwealth of the Northern Island of Commonwealth of the Northern Island of Commonwealth of Account, that I have and that the contents thereof, in attachments, are a true, full and and expenses incurred in aid of information herein may subject the Northern Mariana Islands E.  Signature of Treasurer  Subscribed and sworn before may	above, that I prepared we used all diligence in cluding the contents of explicit accounting of the campaign. I under me to civil and crimin lection Reform. Act of	in on oath, depose and say  If the foregoing Campaign in preparing this Statement, If all supporting If all contributions received stand that providing false had penalties as provided by 12000, 1 CMC \$6428.  Date (Month, Day, Year)
FD-00	Notary Stamp CHRISTINE MAGOFNA FRANCISCO P.O. Box 501399, Saipan. MP 96950	NOtary Stamp CHI	RISTINE MAGOFNA O. Box 501399, Saipar Notary Public Res BY AND FOR THE COMMI THE NORTHERN MARIANA Commission Expires: CA	PRANCISCO  1. MP 96950 2. No. 20A ONWEALTH AJSLANDS U.S.A



## Commonwealth of the Northern Mariana Islands COMMONWEALTH ELECTION COMMISSION

# CANDIDATE'S COMMITTEE ORGANIZATIONAL REPORT

1.	0.111	IOANIZATI	ONAL REPORT	
100000	Candidate			
Candidate	's Name Antonia	Jones -	usan Tudala	
Mailing A	ddress P. D. Box	500723	O.V.	
	Candidate's Name Antonia Warrbusan Tudala  Mailing Address P. D. Box 500723 Qx  Contact No.: 285-0070 Email Address			
Business:	Other:		None	
Office Sou		Munic	111 / 121 / 1	
Ingrate 6	apal Coursel	(hu	end Sonatonal Son pan	
2	C-PI ( ) C			
	Candidate's Committe	e		
Party Affili	ation:			
Committee	Name:	1130-1111-1111-1111-1111-1111-1111-1111		
Mailing Ad	dress:			
7	G1 000.		Contact No:	
3. Chai	irperson (Required)		4. Treasurer (Required)	
Full Name:	Doloves S. No dress: + 500713 Say		Full Name:	
	Joloves S. M.	rque	Full Name: Michael M. Jakai	
Mailing Add	lress:	0	Mailing Address:	
ED. Do	× 200113 2 orbi	an Mil	DO. BOX 8044 SVRB	
Contact No.:	1287-713 V		Mailing Address:  2	
Business:	Oth			
Dusiness,	Other:		Business: Other:	
I hereby acce	ent this appointment as (	Chairmangan and	Toronto C. d. 1	
Candidate.	opt and appointment as (	onamperson and	Treasurer for the above mentioned Committee and	
Chairperson	's Signature/Date		Treasurer's Signature/Data	
	5	8/7/18	Treasurer's Signature/Date	
Lolar	- Janes Nu	Ne en	N. laki 8 7/2018	
I hereby certify	that the information on the	us report is true, c	correct and complete to the best of my knowledge.	
Candidate's	Signature:		Date: /	
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tall	- altered		8/1/18	

# COMMONWEALT OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

## GENERAL CONTRIBUTION AND EXPENSE REPORT

Condidate Name (Last Name, First Name, MI):	Treasurer Full Name (Last Name, First Name, MI);
Antonia M. Tudela	Michael M. Takai

## SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

RE	CEIPTS	CASH	IN-KIND
1.	MONETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS (Total Contributions from Schedule GC-A)	\$100.00	
2.	IN-KIND CONTRIBUTIONS RECEIVED (Total In-Kind Contributions Received from Schedule GC-B. Bring down this value to Line 7 below.)		0
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)	\$100.00	0
DIS	BURSEMENTS		
5.	GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D)	\$100.00	
6.	CONTRIBUTIONS TO OTHER CANDIDATES (Total Contribution to Other Candidates from Schedule GC-E)	0	
7.	ADJUSTMENTS FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		0
8.	TOTAL DISBURSEMENTS (Transfer to Line 9 of Campaign Statement of Account)	\$100.00	0
	RECEIPTS AND DISBURSEMENTS ract Line 8 from Line 4)	0	0

#### SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

PAGE OF

Candidate Name (In Full):

Antonia M. Tudela

Signature of Trestures

12/19/18

# SUPPORTING SCHEDULE GC-A MONETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS

# RESULT SUMMARY 1. TOTAL MONETARY CONTRIBUTIONS FROM INDIVIDUALS WHO CONTRIBUTED LESS THAN \$500 \$ \$100,00 \$ 100

FULL NAME OF CONTRIBUTOR	AMOUNT	FULL NAME OF CONTRIBUTOR	AMOUNT
Example: Ms. Jane Doe	\$ 1,500.00		
			П
		Tant + The life	
T-12-20-11-2-20-20-20-20-20-20-20-20-20-20-20-20-2		PERSONAL PROPERTY.	W F T
		The Live Springer	
		152747	
TOTAL CONTRIBUTIONS RECEIVED, IF LAST PAGE OTHERWISE CONTINUE ON NEXT COLUMN	0	TOTAL CONTRIBUTIONS RECEIVED (LAST PAGE ONLY) (Transfer to Line 2 of Result Summary above)	0

SUPPORTING SCHEDULE FOR GENERAL	CONTRIBUTIONS
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Candidate Name (In Full):	Signature of T casurer:	Date:
Antonia M. Tudela	Milaki	12/19/18

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

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION		MARKET LUE
Example: ABC Retail	Give-away t-shirts (250 @ \$5.00)	\$	1,250
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		0	
TOTAL RECEIPTS (IF LAST PAGE ONLY)	pense Report, Summary of Receipts and Disbursements)	0	

## SUPPORTING SCHEDULE GC-C CONTRIBUTED PROPERTY RECEIVED

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MA VAL	
Example: Island Computers	Old Computer with printer	\$	600
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)	<b>⇒</b>	0	
TOTAL CONTRIBUTED PROPERTY RECEIVED		0	

SUPPORTING SCH	EDULE FOR	GENERAL (	CONTRIBUTIONS

PAGE	OF	
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	1 / 1	
Candidate Name (In Full):	Signature of Transurer:	Date:
Antonia M. Tudela	N. CIalla	12/19/13

# SUPPORTING SCHEDULE GC-D GENERAL EXPENDITURES

FULL NAME OF PAYEE OR VENDOR	PARTICULARS/	AMOUNT				
	DESCRIPTION	Food & Drinks	Advertising	Supplies	Fees/Donation	Other
Example: Marianas Daily	One-page ad		\$ 500			
CNMI Treasury	Filing Fee				\$100.00	
			-		+	
						u j
					-	-
						-
UB-TOTAL OF PAYMENTS THIS PAGE	\$100.00 <b>\$</b>				\$100.00	
NLY (Use additional sheets as necessary) OTAL GEN. EXPENDITURES (IF LAST	(l'otal)					
AGE ONLY) (Transfer Total to Line 5 of Gen. ontributions & Exp. Report, Summary of Receipts	4111					
ontributions & Exp. Report, Summary of Receipts d Disbursements)	\$100.00					

### SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

PAGE \_\_\_\_OF \_\_\_

		-	
Candidate	Name	(In	Full):

Antonia M. Tudela

			ш
Signature	of	Treasi	ī
		850	

Date: 12/19/18

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

FULL NAME OF PAYEE	DESCRIPTION	AM	AMOUNT		
Example: Mr. Winning Candidate Like Me	Fundraising tickets purchased (10 tickets @ \$50)	\$	500		
A PERSONAL PROPERTY.					
<u></u>					
L MARIE PLAN					
the state of the					
The medical series					
or the second					
SUB-TOTAL OF EXPENSES THIS PAGE ONLY					
Use additional sheets as necessary)		0			
OTAL CONTRIBUTIONS TO OTHER CANDIDA  Transfer Total to Line 6 of General Contribution and Expension	ATES (IF LAST PAGE ONLY) nses Report, Summary of Receipts and Disbursements)				
Control of the Control of the Control of the Control	Topots, Juninary of receipts and Disbutsements)	0			