

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

Re	port Type:
	Final Report
	Amendment

CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE 2018 | GENERAL | SPECIAL ELECTION

IMPORTANT:

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.

Candidate Name (Last Name, First Name, MI):	Office Sought:	
Manibusan, Edward E	Attorney General	
Treasurer Name (Last Name, First Name, MI);	Preferred Mailing (P.O. Box) Address:	Telephone:
Larry Anthony Doleon Guerrero	P.O. Box 7934 SVRB, Saipan, MP 96950	(670) 285-5996

			CASH	IN-KIND
L.	BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)		0	0
	ADD: RECEIPTS THIS ELECTION PERIOD		0	0
2.	RECEIPT FROM FUNDRAISING EVENTS		0	0
3.	MULTI-CANDIDATE CONTRIBUTIONS		N/A	N/A
4,	RECEIPTS FROM GENERAL CONTRIBUTIONS	(8-1)	\$ 500.00	
5.	OTHER RECEIPTS	2000	0	0
6.	TOTAL AVAILABLE (Add Lines through 5)	(bw)	\$ 500.00	0
	LESS: DISBURSEMENTS THIS ELECTION PERIOD	AN D	5-00	0
7,,	DISBURSEMENTS FOR FUNDRAISING EVENTS	(a) to	0	0
8.	MULTI-CANDIDATE EXPENSES		N/A	N/A
9.	DISBURSEMENTS FOR GENERAL EXPENDITURES	(ISMA)	\$ 500.00	
10.	OTHER DISBURSEMENTS		0	0
11.	TOTAL DISBURSEMENTS (Add Lines 7 through 10)	(the)	N.C.	0
12.	EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS (Subtract Line	116-15-0	- 000	0
	Cauditact Line	11 from Line 6)	0	0

VERIFI	CATION
Commonwealth of the Northern Mariana Islands) Island of Saipan) s.s. Island of Saipan) I. Edward E. Manibusan being duly sworn on oath, depose and say (Candidate) That I am the individual named above; that I prepared the foregoing Campaign Statement of Account, that I have used all 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 Date (Month, Day, Year) Subscribed and sworn before me this day of Decomber 120 68	Island of SA(PAN) Island of SA(PAN) I, Larry Anibas, Delem, being duly sworn on oath, depose and say: (Treasurer) That I am the individual named above; that I prepared the foregoing Campaign Statement of Account, that I have used all 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. Subscribed and sworn before me this Subscribed
CHRISTINE MAGOFNA FRANCISCO P.O. Box 501399, Saipan. MP 96950 2018 otary Public Reg. No. 20A BY AND FOR THE COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS U.S.A. My Commission Expires: CUCU 3019	MA. KRISTINA H. ROMERO PMB 432 Box 1000 Saipan MP 96950 Notary Public Reg. No. 762A BY AND FOR THE COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS My Commission Expires:

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

FUNDRAISING EVENT REPORT FUNDRAISING DATES: None

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

Candidate Name (Last Name, First Name, MI):	Treasurer Full Name (Last Name, First Name, MI):	
Manibusan, Edward E.	Larry Anthony Deleon Guerrero	
Name of Fundraising Event:	Date(s) Held:	
None Held	N/A	

SUMMARY OF FUNDRAISING RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

	CEIPTS	CASH	IN-KIND
1.	GROSS PROCEEDS FROM FUNDRAISING EVENT (Total Cash Proceeds from Line 3 of the Result Summary of Supporting Schedule FR-A)	0	
2.	IN-KIND CONTRIBUTIONS RECEIVED (Total In-Kind Contributions Received from Schedule FR-B. Bring down this value to Line 6 below.)		0
3.	(Total Contributed Property Received from Schedule FR-C)		0
4.	TOTAL RECEIPTS (Add Lines 1 through 3) (Transfer to Line 2 of Campaign Statement of Account)	0	0
			1
DIS	BURSEMENTS		
	FUNDRAISING EXPENSES (Total Fundraising Expenses from Line 4 of Result Summary of Schedule FR-A)	0	
DIS 5.	FUNDRAISING EXPENSES	0	0
5	FUNDRAISING EXPENSES (Total Fundraising Expenses from Line 4 of Result Summary of Schedule FR-A) ADJUSTMENTS FOR IN-KIND CONTRIBUTIONS RECEIVED	0	0

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

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

N	1//	١.
13	10	٦.

PAGE 1 OF 3

Candidate	Name	(In	Full)
Cimarattic		(,,,,	/

Edward E. Manibusan

Signature of Treasurer:

Date: 12/28/18

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

1. TOTAL CASH PROCEEDS FROM INDIVIDUALS WHO CONTRIBUTED LESS THAN \$500 \$ 0 2. TOTAL CASH PROCEEDS FROM INDIVIDUALS WHO CONTRIBUTED MORE THAN \$500 (Details on Section 1 below) + 0 3. TOTAL CASH PROCEEDS FROM FUNDRAISING EVENT (Transfer this total to Line 1 of Fundraising Event Report) 0 4. TOTAL FUNDRAISING EXPENSES (Details of Section 2-Fundraising Expense on the reverse side of this form. Transfer this total to Line 5 of Fundraising Event Report) 5. NET CASH PROCEEDS (Subtract Line 4 from Line 3)

FULL NAME OF CONTRIBUTOR	AMOUNT	500 OR MORE TOTAL AGGREGATE CONTRIBUT FULL NAME OF CONTRIBUTOR	AMOUNT
Example: Mr. John Doe	\$ 600.00		AMOUNT
N/A		N/A	
OTAL PROCEEDS OF CONTRIBUTIONS, IF LAST AGE 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 FOR EACH FUNDRAISING EVENT.

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

NI/A	
IN/A	

PAGE 2

2	OF	3
	OF	

Candidate Name (In Full):

Edward E. Manibusan

Sign	ature of	Treasure	era	
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	U			

12/28/18

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				
N/A						
					1	
						-
	(Total)					
OTAL FUNDRAISING EXPENSES ransfer Total to Line 4, Result Summary of Schedule FR-A)	0	0	0	0	0	0

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

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

PAGE 3 OF 3

Candidate Name (In Full): Edward E. Manibusan

12/28/18

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 @ \$5.00)	\$	1,250	
N/A			.,,,,,	
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY Use additional sheets as necessary)		C)	
)	

SUPPORTING SCHEDULE FR-C CONTRIBUTED PROPERTY RECEIVED

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE	
Example: Island Computers	Old Computer with printer	\$ 600	
N/A			
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY			
Use additional sheets as necessary)	***************************************	0	
I OTAL RECEIPTS (IF LAST PAGE ONLY)		0	

COMMONWEALT OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

GENERAL CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name, MI):	Treasurer Full Name (Last Name, First Name, MI):
Edward E. Manibusan	Deleon Guerrero, Larry Anthony
	- 1

SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

	CEIPTS	CASH	IN-KIND
Ι.	MONETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS (Total Contributions from Schedule GC-A)	500.00	
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)	500.00	0
	BURSEMENTS		
	GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D)	500, 60	
5.	GENERAL EXPENDITURES	500, 6 0	
5. 6.	GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D) CONTRIBUTIONS TO OTHER CANDIDATES		0
5. 6.	GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D) CONTRIBUTIONS TO OTHER CANDIDATES (Total Contribution to Other Candidates from Schedule GC-E) ADJUSTMENTS FOR IN-KIND CONTRIBUTIONS RECEIVED		0

PAGE _ 1 _ OF _ 4

Candidate Name (In Full):	Signature of Treasurer:	Tr
Edward E. Manibusan	Juglino	1.
	() 0	

Date: 12/28/18

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

RESULT SUMMARY	-1 -1 -1
 TOTAL MONETARY CONTRIBUTIONS FROM INDIVIDUALS WHO CONTRIBUTED LESS THAN \$500 TOTAL MONETARY CONTRIBUTIONS FROM INDIVIDUALS WHO CONTRIBUTED MORE THAN \$500 TOTAL MONETARY CONTRIBUTIONS (Transfer to Line 1 of the General Contribution and Expense Report) 	+

FULL NAME OF CONTRIBUTO	R AMOUNT	FULL NAME OF CONTRIBUTOR	AMOUNT
Example: Ms. Jane Doe	\$ 1,500.00		
N/A			
Edward Maribusin	\$ 500.00		
P			
TAL CONTRIBUTIONS RECEIVED, IF LAST	DACE	TOTAL CONTINUES IN	
THERWISE CONTINUE ON NEXT COLUMN	Sc 0. 00	TOTAL CONTRIBUTIONS RECEIVED (LAST PAGE ONLY) (Transfer to Line 2 of Result Summary above)	0

PAGE 2 OF 4

Candidate Name (In Full):	200	
	Signature of Treasurer:	Date:
Edward E. Manibusan	1 . ///	1 1 1
The state of the s	Justlunce	12/28/10
	To American	12/28/18

SUPPORTING SCHEDULE GC-B IN-KIND CONTRIBUTIONS RECEIVED

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE	
Example: ABC Retail N/A	Give-away t-shirts (250 @ \$5.00)	\$	1,25(
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary) TOTAL RECEIPTS (IF LAST PAGE ONLY) Transfer Total to Line 2 of the General Contribution and Ex	pense Report, Summary of Receipts and Disbursements)	→	0

SUPPORTING SCHEDULE GC-C CONTRIBUTED PROPERTY RECEIVED

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE	
Example: Island Computers	Old Computer with printer	\$	600
N/A			
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY Use additional sheets as necessary)	AFL CT D. C.	0	
Transfer Total to Line 3 of the General Contribution and Ex	pense Report, Summary of Receipts and Disbursements).	0	

SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

PAGE __3 __OF __4

Candidate Name (In Full);	Signature of Treasurer:	Date:
Edward E. Manibusan	Justlings	13/28/81

SUPPORTING SCHEDULE GC-D GENERAL EXPENDITURES

FULL NAME OF PAYEE OR VENDOR	PARTICULARS/ DESCRIPTION	AMOUNT CONTRACTOR OF THE PROPERTY OF THE PROPE					
xample: Marianas Daily		Food & Drinks	Advertising	Supplies	Fees/Donation	Other	
	One-page ad		\$ 500				
N/A							
Candidate Fee					500	,65°	
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LY (Use additional sheets as necessary)	0 😓			500		(1-	The last
FAL GEN. EXPENDITURES (IF LAST EE ONLY) (Transfer Total to Line 5 of Gen.	(Total)					1	-
ibutions & Exp. Report Summary of Receipts /	0						/
SC (D), 2018				500		(4

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Candidate Name (In Full):	Signature of Treasurer:	Date:
Edward E. Manibusan	Justling	12/28/18
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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)	\$ 50
N/A		
PB-TOTAL OF EXPENSES THIS PAGE ONLY se additional sheets as necessary)		0
OTAL CONTRIBUTIONS TO OTHER CANDIDA	ATES (IF LAST PAGE ONLY) nses Report, Summary of Receipts and Disbursements)	0

COMMONWEALT 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);
Edward E. Manibusan	Deleon Guerrero, Larry Anthon
	TOTIED TO CONTRACT OF THE TOTIES

CONTRIBUTIONS RECEIVED

RECEIVED FROM	DESCRIPTION		AMOUNT	
Imple: BEST PARTY IN THE LAND Cash Allocation of Party General Fundraising Proceeds		\$	20,000	
N/A			20,000	
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 3 of the Campaign Statement of Account)			0	

EXPENSES

FULL NAME OF PAYEE	DESCRIPTION OF EXPENDITURE	Al	AMOUNT	
Example: BEST PARTY IN THE LAND	Allocation of Party General Expenses	s	15,000	
N/A			15,000	
SHD TOTAL OF EVDENCES THIS BASE ON A				
SUB-TOTAL OF EXPENSES THIS PAGE ONLY (Use additional sheets as necessary) FOTAL ALLOCATED EXPENDITURES (IF LAST PAGE ONLY)		→	0	
FOTAL ALLOCATED EXPENDITURES (IF LAS Transfer Total to Line 8 of the Campaign Statement of A	ST PAGE ONLY) ccount)	→	0	

