

IMPORTANT:

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

Report Type:

☐ Final Report

☐ Amendment

CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE

□GENERAL □SPECIAL ELECTION

THIS REPORT MUST BE FILED WITHIN 50 DAYS AFTER THE ELECTION.

OFFICE OF THE PUBLIC AUDITOR

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

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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, M1):	Office Sought:	
SANTOS, Felix M.	Senate	
Treasurer Name (Last Name, First Name, MI):	Preferred Mailing (P.O. Box) Address:	Telephone:
MESNGON, Sheena Ann	P.O. Box 507 Rota, MP 96951	(671) 797-434

		CASH	IN-KIND
1,	BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)	0	0
1	ADD: RECEIPTS THIS ELECTION PERIOD		
2	RECEIPT FROM FUNDRAISING EVENTS	0	0
3	MULTI-CANDIDATE CONTRIBUTIONS	0	0
4	RECEIPTS FROM GENERAL CONTRIBUTIONS	0	\$1,300
5.,	OTHER RECEIPTS	0	0
6.	TOTAL AVAILABLE (Add Lines 1 through 5)	0	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	\$1,300
10.	OTHER DISBURSEMENTS	0	0
11_	TOTAL DISBURSEMENTS (Add Lines 7 through 10)	0	0
12.	EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS (Subtract Line 11 from Line 6)		

VERIFICATION

Commonwealth of the Northern Mariana Islands)	Commonwealth of the Northern Mariana Islands)
Island of Rota)s.s.	Island of
I, Felix M. Santos, 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)	(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. Signature of Treasurer Date (Month, Day, Year)
Subscribed and sworn before me this Bay of	Subscribed and swom before me this 67 day of January , 2019
Notary Stamp Notary Seal ANTONIA M. MANGLONA Pt) Box 813 Rotu, MP 96951 9 Motary Public Reg. No. 51A BY AND FOR THE COMMONWEALTH OF THE MORTHERN MARIANA STANOS U.S.A.	Notary Stamp ANTONIA M. MANGLONA PO Box 813 Rota. MP 96951 Notary Public Reg. No. 51A By AND FOR THE COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS U.S.A. My Commission Expires: (2/61/2-20)

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S):	PAGE	_ OF
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	Signature of Breasurer:	Date:
Candidate Name (In Full):	engulature of incessurer.	1 7.18
SANTOS, Felix Mundo	X Will	1. 7.10

SUPPORTING SCHEDULE FR-A CROSS PROCEEDS AND EXPENSES FROM ELNDRAISING EVEN

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	FULL NAME OF CONTRIBUTOR	AMOUNT
Example: Mr. John Doe	\$ 600.00		
M			
land the state of			
FOTAL 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)	

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

FUNDRAISING EVENT REPORT FUNDRAISING DATES:

IMPORTANT: USE A SEPARATE REPORT FOR EACH FUNDRAISING EVENT.

Candidate Name (Last Name, First Name, MI):	Treasurer Fuli Name (Last Name, First Name, MI):	
SANTOS, Felix M.	MESNGON, Sheena Ann	
Name of Fundralsing Event:	Date(s) Held:	

SUMMARY OF FUNDRAISING RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

RE	CEIPTS	cAsii	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.	CONTRIBUTED PROPERTY RECEIVED (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
DIS	BURSEMENTS		
5.	FUNDRAISING EXPENSES (Total Fundraising Expenses from Line 4 of Result Summary of Schedule FR-A)	0	
-	ADJUSTMENTS FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		0
0.			
7.	TOTAL DISBURSEMENTS (Add Lines 5 and 6) (Transfer to Line 7 of Campaign Statement of Account)	0	0

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S):	PAGE	_OF
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Candidate Name (In Full):
SANTOS, Felix Mundo

Well Date: 1.7.19

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

SECTION 2 - ELADRAISING EXPENSES

	PARTICULARS/	AMOUNT				
FULL NAME OF PAYEE OR VENDOR	PARTICULARS/ DESCRIPTION	Food & Drinks	Advertising	Supplies	Fees/Donation	Other
Example: Taste Good Restaurant	Food Catering	\$ 600				
NONE						
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TOTAL FUNDRAISING EXPENSES	(isto Z)					

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE	
Example: ABC Retail	Give-away t-shirts (250 @ \$5.00)	\$	1,250
NONE			
		-	
		-	
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY		,	
TOTAL RECEIPTS (IF LAST PAGE ONLY)	Þ		

SUPPORTING SCHEDULE FR-C CONTRIBUTED PROPERTY RECEIVED

	FAIR MARKET VALUE		
Old Computer with printer	\$	600	
	-		
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12			

COMMONWEALT OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

GENERAL CONTRIBUTION AND EXPENSE REPORT

Cardidate Name (Last Name, First Name, MI):	Treasurer Full Name (Last Name, First Name, MI):
SANTOS, Felix Mundo	MESNGON, Sheena Ann

SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

RE	CEIPTS	CASIL	IN-KIND
1	MONETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS (Total Contributions from Schedule GC-A)	0	
2.	IN-KIND CONTRIBUTIONS RECEIVED (Total In-Kind Contributions Received from Schedule GC-B, Bring down this value to Line 7 below.)		\$1,300.00
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)	0	\$1,300.00
DIS	BURSEMENTS		
5.	GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D)	0	
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)		\$1,300.00
8.	TOTAL DISBURSEMENTS (Transfer to Line 9 of Campaign Statement of Account)	0	\$1,300.00
	RECEIPTS AND DISBURSEMENTS tract Line 8 from Line 4)	0	0

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SANTOS, Felix Mundo

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Date:

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

MONETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS

TOTAL MONETARY CONTRIBUTIONS FROM INDIVIDUALS WHO CONTRIBUTED LESS THAN \$500

FULL NAME OF CONTRIBUTOR	AMOUNT	FULL NAME OF CONTRIBUTOR	AMOUNT
Example: Ms. Jane Doe	\$ 1,500.00		
NONE			

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SANTOS, Felix Mundo

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

RESULT SUMMARY
TOTAL MONETARY CONTRIBUTIONS FROM INDIVIDUALS WHO CONTRIBUTED LESS THAN \$500

FULL NAME OF CONTRIBUTOR	AMOUNT	FULL NAME OF CONTRIBUTOR	AMOUNT
Example: Ms. Jane Doe	\$ 1,500.00		
NONE			
	10.000 10.000		
	e sannansan		

OTAL CONTRIBUTIONS RECEIVED, IF LAST PAGE THERWISE CONTINUE ON NEXT COLUMN		TOTAL CONTRIBUTIONS RECEIVED (LAST PAGE ONLY) (Transfer to Line 2 of Result Summary above)	

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SANTOS, Felix Mundo

Signature of Treasurers

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Date: 1. 7

SUPPORTING SCHEDULE GC-D GENERAL EXPENDITURES

ENERGY WITH WELL UND AN ALLEGE OF STRUCK ON	PARTICULARS/	AMOUNT				
FULL NAME OF PAYEE OR VENDOR	DESCRIPTION	Food & Drinks	Advertising	Supplies	Fees/Donation	Other
Example: Marianas Daily	One-page ad		\$ 500			
NONE						
NONE					# Y	
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SUB-TOTAL OF PAYMENTS THIS PAGE	(Sub-total)					
ONLY (Use additional sheets as necessary)	(Foral)					
FOTAL GEN. EXPENDITURES (IF LAST PAGE ONLY) (Transfer Total to Line 5 of Gen.	40					
AGE ONLY) (Transfer Total to Line 5 of Gen Contributions & Exp. Report, Summary of Receipts and Disbursements)						

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SANTOS, Felix Mundo

Signature of	Treasurer:	
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1.7.19

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)	\$ 5	00
NONE			
			-
			735
SUB-TOTAL OF EXPENSES THIS PAGE ONLY (Use additional sheets as necessary)	>		
			-
(Transfer Total to Line 6 of General Contribution and Exp	DATES (IF LAST PAGE ONLY) senses Report, Summary of Receipts and Disbursements)		

COMMONWEALT OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

MULTI-CANDIDATE CONTRIBUTION AND EXPENSE REPORT

Caudidate Name (Last Name, First Name, MI):	Treasurer Full Name (Last Name, First Name, MI):
SANTOS, Feix Mundo	MESNGON, Sheena Ann

RECEIVED FROM DESCRIPTION AMOUNT Example: BEST PARTY IN THE LAND Cash Allocation of Party General Fundraising Proceeds \$ 20,000 NONE SUB-TOTAL OF CONTRIBUTIONS RECEIVED (THIS PAGE ONLY) (Use additional sheets as necessary). TOTAL CONTRIBUTIONS RECEIVED (IF LAST PAGE ONLY) (Transfer Total to Line 3 of the Campaign Statement of Account)

FULL NAME OF PAYEE DESCRIPTION OF EXPENDITURE AMOUNT Example: BEST PARTY IN THE LAND Allocation of Party General Expenses \$ 15,000 NONE SUB-TOTAL OF EXPENSES THIS PAGE ONLY (Use additional sheets as necessary) TOTAL ALLOCATED EXPENDITURES (IF LAST PAGE ONLY) (Transfer Total to Line 8 of the Campaign Statement of Account)

EXPENSES

Christine Francisco

From: Sandra Masga <smasga671@gmail.com>

Sent: Monday, January 7, 2019 4:15 PM

To: cfrancisco@opacnmi.com

Subject: Fwd: Campaign Financial Disclosure

Attachments: FMS1.pdf; FMS3.pdf; FMS2.pdf; FMS4.pdf; FMS5.pdf; FMS6.pdf; FMS7.pdf; FMS8.pdf;

FMS9.pdf; FMS10.pdf; FMS11.pdf

----- Forwarded message -----

From: Sandra Masga < smasga671@gmail.com>

Date: Mon, Jan 7, 2019, 4:03 PM

Subject: Campaign Financial Disclosure

To: <mcamacho@opacnmi.com>

Please find attached Campaign Financial Disclosure for Felix Mundo Santos

Thanks - Sandy