#### OMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

IN STATEMENT OF ACCOUNT – CANDIDATE 2018 DGENERAL SPECIAL ELECTION

Report Type: ☐ Final Report

☐ Amendment

IMPORTANT:

THIS REPORT MUST BE FILED WITHIN 50 DAYS AFTER THE ELECTION. FILE ORIGINAL AND TWO COPIES WITH THE OFFICE OF THE PUBLIC AUDITOR

P.O BOX 588

information as required in the et.

Candidate Name (Last Name, First Nam

This Campaign Statement of A count form is mandatory. Candidates may use the suggested reports and schedules furnished by the Election Commission, or they may use deir own detailed formats. Should you use an alternative schedule format, you must provide, at the minimum, detailed

		PROPERTY OF THE PROPERTY OF TH	DESCRIPTION OF THE PARTY OF THE	CASH	IN-KIND
1.	BALANCE CARRIED I	DRWARD FROM PREVIOUS ELECTION	A	8	
HEELE STATES	ADD: RECEIPTS THIS	ELECTION PERIOD			
2.	RECEIPT FROM FUNDS	AISING EVENTS	2.40.00	A	
3.	MULTI-CANDIDATE CO	NTRIBUTIONS	-0-	A	
4.	RECEIPTS FROM GENE	LAL CONTRIBUTIONS	0	378 90	
5.	OTHER RECEIPTS				
6.	TOTAL AVAILABLE (	dd Lines 1 through 5)		240.00	378 90
	LESS: DISBURSEMEN	'S THIS ELECTION PERIOD			
7.	DISBURSEMENTS FOR	UNDRAISING EVENTS		0	P
8.	MULTI-CANDIDATE EX	PENSES		A	A
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10.	OTHER DISBURSEMEN	rs		9	A
11.	TOTAL DISBURSEMEN	S (Add Lines 7 through 10)		A	D.
12,	EXCESS (SHORTFALL	OF RECEIPTS OVER DISBURSEMENTS	(Subtract Line 11 from Line 6)	9	9
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.1	ucia S Mo	geting duly sworn on oath, depose and say:	1 00 12 1		
1,	(Caldidato)	Disary .	(Treasurer)	being duly sworn on	
That States	I am the individual named a ment of Account, that I have	ove; that I prepared the foregoing Campaign used all diligence in preparing this Statement,	That I am the individual named a Statement of Account, that I have	above; that I prepared the	foregoing Campaign
and the	hat the contents thereof, incl	ding the contents of all supporting	and that the contents thereof, inc	luding the contents of all	supporting
and e	xpenses incurred in aid of the	plicit accounting of all contributions received campaign. I understand that providing false	attachments, are a true, full and and expenses incurred in aid of the	explicit accounting of all	contributions received
infor	mation herein may subject in	to civil and criminal penalties as provided by tion Reform Act of 2000, 1 CMC §6428.	information herein may subject in	to civil and criminal pe	enalties as provided by
ine iv	Ordicin Ivialialia Islands Ele	non Retorn Act of 2000, I CMC 90428.	the Northern Mariana Islands Ele	tion Reform Act of 2006	0, 1 CMC §6428.
de	ucies maca	~ 01/02/19	Winter W W	) D	1102119
	Signature of Candidate	Date (Month, Day, Year)	Signature of Treasure	Date	(Month, Day, Year)
Subsc	cribed and swom before me	nis 02 day of January , 2019	Subscribed and sworn before me	this 22 day of Jan	vary 2019
					7
	Notary Stamp	Notary Scal	Notary Stamp	50	votary Seal
	ANT	NIA M. MANGLONA	ANT	ONIA M. MANGL	ONA
CFD-0	H. CONTROL NO. 10 P. L.	Post 813 Rota, MP 96951		PO Box 813 Rote, MP 9695 tary Public Reg. No. 1	
	DE STRUMENTONS AND ENGINEERS OF	D FOR THE COMMONWEALTH	BY BY	AND FOR THE COMMONWEAT	THE
	My Co	IRTHERN MARIANA ISLAMOS US.A. Unission Expires: (0/04/2020	OF THE	NORTHERN MARIANA ISLAND ontmission Expires: 10/09	I APUR

#### COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

# FUNDRAISING EVENT REPORT FUNDRAISING DATES:

IMPORTANT: USE A SI PARATE REPORT FOR EACH FUNDRAISING EVENT.

Manalona Lucia S.  Name of Fundraising Event:	Treasurer Full Name (Last Name, First Name, MI):  Manalona, Wita M.
Dinner Fund rousing	October 13, 2018

### SUMMARY OF FUNDRAISING RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

KI	CEIPTS		CASH	IN-KIND
1.	GROSS PROCEEDS (Total Cash Proceeds from	ROM FUNDRAISING EVENT Line 3 of the Result Summary of Supporting Schedule FR-A)	240.00	
2.	IN-KIND CONTRIBU (Total In-Kind Contributio	TIONS RECEIVED s Received from Schedule FR-B. Bring down this value to Line 6 below.)		
3.	CONTRIBUTED PRO (Total Contributed Propert	PERTY RECEIVED Received from Schedule FR-C)		378.90
4.	TOTAL RECEIPTS (/ (Transfer to Line 2 of Cam	dd Lines 1 through 3) aign Statement of Account)	240.00	378.90
DIS	BURSEMENTS	E CONTRACTOR DE		
5.	FUNDRAISING EXPE (Total Fundraising Expense	NSES from Line 4 of Result Summary of Schedule FR-A)	A	
5.	ADJUSTMENTS FOR (From Line 2 above)	IN-KIND CONTRIBUTIONS RECEIVED		A
		NTS (Add Lines 5 and 6)	BARRER FEREN	
7.	TOTAL DISBURSEM (Transfer to Line 7 of Cam	lign Statement of Account)	0	0

FILE SEP RATE SCHEDULE FOR EACH FUNDRAISING EVENT. **IMPORTANT:** SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S): **PAGE** GROSS PROCEEDS AND EXPENSES PROPERTURE ASING EVENT TOTAL CASH PROCEED: FROM INDIVIDUALS WHO CONTRIBUTED LESS THAN \$500 TOTAL CASH PROCEEDS FROM INDIVIDUALS WHO CONTRIBUTED MORE THAN \$500 (Details on Section 1 below) TOTAL CASH PROCEEDS FROM FUNDRAISING EVENT (Transfer this total to Line 1 of Fundraising Event Report) TOTAL FUNDRAISING E. PENSES (Details of Section 2-Fundraising Expense on the reverse side of this form. Transfer this total to Line 5 of Fundraisin Event Report) NET CASH PROCEEDS (Subtract Line 4 from Line 3) SECTION 1 - NA VIES OF CONTINUES OF CONTINUE THE AGGREGATE CONTRIBUTIONS FULL NAME OF CONTRIBUTOR AMOUNT FULL NAME OF CONTRIBUTOR AMOUNT Example: Mr. John Doe 600.00 None TOTAL PROCEEDS OF CONTRIBUTIONS, IF LAST TOTAL PROCEEDS OF CONTRIBUTIONS \$500 OR PAGE OTHERWISE CONTINUE IN NEXT COLUMN MORE (LAST PAGE ONLY-MUST AGREE WITH LINE 2 ABOVE) CFD-FR (A-1), 2018

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT. SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S): PAGE Candidate Name (In Full): ucia GROSS PROCEEDS AND PAPEASES FROM FUNDINAISING EVENT FULL NAME OF PAYEE OF VENDOR PARTICULARS/ AMOUNT DESCRIPTION Food & Drinks Advertising Rese/Donation Rotas BBO Restauran 240.00 Da'waves AMOUNT RECEIVED 10 11 EDIFORM\_ 5A200 240.00<sup>(Total)</sup> TOTAL FUNDRAISING EXPENSES (Transfer Total to Line 4, Result Summary of Sciedule FR-A) CFD-FR (A-2), 2018

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KEEP THIS SLIP FOR REFERENCE

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT. PAGE OF\_ SUPPORTING SCHEDULE HOR FUNDRAISING EVENT HELD ON DATE(S): LCLa 1/2 SUPPORTING SCHEDULE FR-B IN-KIND CONTRIBUTIONS RECEIVED FAIR MARKET DESCRIPTION OF CONTRIBUTION FULL NAME OF COUTRIBUTOR VALUE 1,250 Give-away t-shirts (250 @ \$5.00) Example: ABC Retail 43,90 80.00 plater chicken OUT 20.00 15.00 00 80.00 40.00 20.00 ona 30.00 2.0.00 RICE SUB-TOTAL OF RECEIPTS T HIS PACE ONLY (Use additional sheets as necessary) TOTAL RECEIPTS (IF LAST AGE ONLY) (Transfer Total to Line 2 of the Fun raising Event Report) .... SUPPORTING SCHEDULE FR-C CONTRIBUTED PROPERTY RECEIVED FAIR MARKET DESCRIPTION OF CONTRIBUTION FULL NAME OF CONTRIBUTOR VALUE 600 Old Computer with printer Example: Island Computers one SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary TOTAL RECEIPTS (IF LAST PAGE ONLY) (Transfer Total to Line 3 of Fundra ing Event Report ing Event Report) .....

### COMMONWEALT OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

#### GENERAL CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name, A		8.	Treasurer Full Name (Last Name, First Name, MI):	
	100			_

#### SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

RE	CEIPTS		CASH	IN-KIND
1.	MONETARY CONTRI (Total Contributions from So	UTIONS FROM NON-FUNDRAISING EVENTS nedule GC-A)	0	
2.	IN-KIND CONTRIBUT (Total In-Kind Contributions	ONS RECEIVED Received from Schedule GC-B. Bring down this value to Line 7 below.)		15 70.00
3.	CONTRIBUTED PROF (Total Contributed Property	ERTY RECEIVED eccived from Schedule GC-C)		-0
4.	TOTAL RECEIPTS (Transfer to Line 4 of Campa	8	1570.00	
DIS	BURSEMENTS			
5.	GENERAL EXPENDIT (Total General Expenditures		0	
6.	CONTRIBUTIONS TO (Total Contribution to Otl	DTHER CANDIDATES or Candidates from Schedule GC-E)	0	
7.	ADJUSTMENTS FOR (From Line 2 above)	N-KIND CONTRIBUTIONS RECEIVED		0
8.	TOTAL DISBURSEME (Transfer to Line 9 of Campa		0	0-
	RECEIPTS AND DISBU	RSEMEN'IS	-0	0

# SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS PAGE OF ucia SUPPORTING SCHEDULE GC-A MODETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS RESULT SUMMARY TOTAL MONETARY CON RIBUTIONS FROM INDIVIDUALS WHO CONTRIBUTED LESS THAN \$500 TOTAL MONETARY CON RIBUTIONS FROM INDIVIDUALS WHO CONTRIBUTED MORE THAN \$500 TOTAL MONETARY CON RIBUTIONS (Transfer to Line 1 of the General Contribution and Expense Report) FULL NAME OF CONTRIBUTOR AMOUNT FULL NAME OF CONTRIBUTOR AMOUNT None Example: Ms. Jane Doe 1,500.00 None

D

TOTAL CONTRIBUTIONS RECEIVED (LAST PAGE

ONLY) (Transfer to Line 2 of Result Summary above)

TOTAL CONTRIBUTIONS REC IVED, IF LAST PAGE OTHERWISE CONTINUE ON N XT COLUMN

SUPPORTING SCHEDULE	OR GENE AL CONT	RIBUTIONS	PAGE OF
Candidate Name (In Full):  Manglona,	Lucia S	Signature of Treasurer:	Date: 1 2 19
	SUPPO IN-KI	ORTING SCHEDULE GC-B ND CONTRIBUTIONS RECEIVED	
FULL NAME OF CO	VTRIBUTC, 3	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE
Example: ABC Retail	0.1.	Give-away t-shirts (250 (a) \$5.00)	\$ 1,250
Manglana	ramily	Osstal Hood/drinks	- Q00-00
	amily!	Ossta Tood drinks	300.00
Tairtano 9 Barcinas	amily	Ossta Food drinks	4 100.00
	svaznik.	5 coses water	d 120.00
Banglades	Oussidation	5 cases water 20 bagice	d 150.00
SUB-TOTAL OF RECEIPTS T (Use additional sheets as necessary)			1570-00
TOTAL RECEIPTS (IF LAST	AGE ONLY	America Company	1570.00
(Transfer Total to Line 2 of the Gen	al Contribute and Expense	Report, Summary of Receipts and Disbursements)	18 10.00
		PRTING SCHEDULE GC-C RIBUTED PROPERTY RECEIVED	
FULL NAME OF CO	TRIBUTCR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE
Example: Island Computers		old Computer with printer	\$ 600
		None	-0
			1
SUB-TOTAL OF RECEIPTS T	IS PAGE ONLY		P
(Use additional sheets as necessary) TOTAL CONTRIBUTED PRO	ERTY RECEIVED (IF LA		0
	C C	, or composition of the control of t	

#### SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

PAGE \_\_\_OF\_

Candidate Name	(In Ful	i):	
n A -		1 -	2/22/
Mai	$\mathcal{L}$	IN	M
_	PLA	W-2-2-E	100

Lucia S.

Signar	re of Tleasurer:	$\sim$ $H$
congust	1 -4 - 0/	`\(/ .
	NEW D. VY	14
		1/1

## SUPPORTING SCHEDULE GC-D GENERAL EXPENDITURES

	GENERAL EXPENDITURES					74 II.,	
FULL NAME OF PAYER	OK VENDOR	PARTICULARS/		A	MOUNT		
		DESCRIPTION	Food & Drinks	Advertising	Supplies	Fees/Donation	Other
Example: Marianas Daily Cardidate Fil	0 -1	One-page ad	8	\$ 500	2	M	0
Corpidone -til	ung tee	, 10	70	8	D	4100.00	-6
					100		
	-						
			81				
SUB-TOTAL OF PAYMENT		(Sub-total)	-0	Ð	0	1 00.00	0
ONLY (Use additional sheets a TOTAL GEN. EXPENDITU PAGE ONLY) (Transfer Total to Contributions & Exp. Report, Sumi	RE (IF LAST ) Li e 5 of Gen.	(Total)	0	2	0	100.00	
and Disbursements) FD-GC (D), 2018						700,00	NEXE :

# urn lax bystem Nelease $\delta_{\rm u}()$ Commonwealth of the Northern Mariana Islands

# OFFICIAL CASH RECEIPT

Payment Entered: 7/13/2018

Receipt No.: 003561880

Received From: Manglona, Lucia S.

Received by : Catherine C Licop-Mendoza ... 7/13/2018 10:41:38 50210 999

Payment to Account(s):

Candidate Filing Fee
Municipal Council #7 Rota/

CHESTO 0001

100,00

Payment(s) Tendered:

100,00

00,001

\*\* KEEP THIS RECEIPT FOR YOUR REDUNDS \*\*\*



SUPPORTING SCHEDULE	FOR CENEDAL C		
	FOR GENERAL CO	UNTRIBUTIONS	PAGEOF
Candidate Name (In Full):		Signature of Tressurer:	Date:
Manalona	Lucia S	5.	I la la la
			11717
	SUP	PORTING SCHEDULE GC-E	
	CONTRIBUT	IONS TO OTHER CANDIDATES (EXPENDITURES)	
FULL NAME O			
Example: Mr. Winning Candidate	A CONTRACTOR OF THE PARTY OF TH	DESCRIPTION	AMOUNT
resimple, ser. winning continuan	Like Wie	Fundraising tickets purchased (10 tickets @ \$50)	\$ 50
		None	0
		100170	-0
SUB-TOTAL OF EXPENSES TH (Use additional sheets as necessary)			0
			0

TOTAL CONTRIBUTIONS TO C THER CANDIDATES (IF LAST PAGE ONLY)
(Transfer Total to Line 6 of General Co tribution and Expenses Report, Summary of Receipts and Disbursements)...

CFD-GC (E), 2018

# COMMONWEALT OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

# MULTI-CANDIDATE CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name	Lucia		۸-
	C	ONTRIBUTIONS RECEIVED	
RECEIVED F	ROM	DESCRIPTION	AMOUNT
SUB-TOTAL OF CONTRIBUTI (Use additional sheets as necessary). TOTAL CONTRIBUTIONS RE	DNS RECEIVED (		\$ 20,000
(Transfer Total to Line 3 of the Camp	ign Statement of Acc	EXPENSES	<b>→</b> D-
FULL NAME OF	PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT
Example: BEST PARTY IN THE I		Allocation of Party General Expenses  None	\$ 15,000
TOTAL ALLOCATED EAFEND	FURES (IF LAST I	PAGE ONLY)	<ul><li>₽</li><li>D</li></ul>

#### OFFICE OF THE PUBLIC AUDITOR SIGNATURE AND 1/2/2011



#### COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

Report Type:

#### CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE □GENERAL. ☐SPECIAL ELECTION (Yeor)

☐ Final Report ☐ Amendment

IMPORTANT:

THIS REPURT 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 thir own detailed formats. Should you use an alternative schedule format, you must provide, at the minimum, detailed

	ndlidate Name (Last Name, First Name  Langlen  Anglen  Ample  Authority  Auth	Lucia S Ports n	1 Counci	Telephone:   783-7965
1.	BALANCE CARRYED FO	RWARD FROM PREVIOUS ELECTION(S)	CASH	IN-KIND
	Construction of the	AWARD FROM PREVIOUS ELECTION(S)	D	9
2.	RECEIPT FROM FUNDRA	SING EVENTS		
3,	MULTI-CANDIDATE CO		240.00	-0
4.	RECEIPTS FROM GENER		-0-	0
5.	OTHER RECEIPTS	10110	0	378,90
6.	TOTAL AVAILABLE (Ac	Lines 1 through 5)	9	-0
		DHS verte to kensham	240.00	378.90
7.	DISBURSEMENTS FOR FI	NDRAISING EVENTS		
8.	MULTI-CANDIDATE EXP			D'
9.	DISBURSEMENTS FOR G		0	0
10.	OTHER DISBURSEMENTS		-	0
11.	TOTAL DISBURSEMENTS	Add Lines 7 through 10)	-0	0
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THE R			0	0
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Compressional Co. N. A.			
Commonwealth of the Northern May and Isl Island of  (Candidate)  That I am the individual named above that I Statement of Account, that I have use I all did and that the contents thereof, including the eastlachments, are a true, full and explicit account expenses incurred in aid of the empaign information herein may subject me to divid an the Northern Mariana Islands Election  Signature of Cardidate	) 8.5.  http://www.non.oath, depose and say:  prepared the foregoing Campaign ligence in preparing this Statement, ontents of all supporting unting of all contributions received a. I understand that providing false and criminal penalties as provided by an Act of 2000, 1 CMC §6428.	Commonwealth of the Northern Mariena Island of  L	y sworn on oath, depose and say: repared the foregoing Campaign gence in preparing this Statement atents of all supporting ating of all contributions received funderstand that providing false
Signature of Cardddate Subscribed and sworn before me this 22 d	Date (Month, Day, Year) ay of January , 2019	Signature of Treasurer Subscribed and sworn before me this 22 day	Date (Month, Day, Year)

CFD-00



ANTON A M. MANGLONA
PO BE 813 ROM MP 96951

9/Vision y Bible Reg. No. 61A
BY AND F RTHE COMMUNICATIVE
OF THE NORTH RIVE MARIANA ISLANDS U.S.A.
My Committee on Expires: (0/04/2012)

Notary Scal

Notary Stamp

Motary Scal ANTONIA M. MANGLONA
PO Box 813 Rosa, MP 96951

Votary Public Reg. No. 11A BY AND FOR THE COSCANNWEALTH THE NORTHERN MASHANA ISLANDS U.S.A. My Commission Expires: 10/09/2020

#### COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

#### FUNDRAISING EVENT REPORT FUNDRAISING DATES:

Confidence of a serial confidence of the seria	FUNDRAISING EVENT.
Candidate Name (Lest Name, First Name, 61):  Manalona Lucia S.  Nume of Fundraising Event:	Treasurer Full Name (Last Name, First Name, MI):
Dinner Fund rousing	October 13 2018

# SUMMARY OF FUNDRAISING RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

	CAMP.		CASH	IN-KIND
I.	(10tal Cash Proceeds from	ROM FUNDRAISING EVENT ine 3 of the Result Summary of Supporting Schedule FR-A)	240.00	
2.	IN-KIND CONTRIBU'. (Total In-Kind Contribution	IONS RECEIVED Received from Schedule FR-B. Bring down this value to Line 6 below.)		
3.	(Total Contributed Property	ERTY RECEIVED teceived from Schedule FR-C)		378.90
4.	TOTAL RECEIPTS (Ac (Transfer to Line 2 of Camp	I Lines 1 through 3) ign Statement of Account)	240.00	378.90
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5.	FUNDRAISING EXPER (Total Fundraising Expenses	SES rom Line 4 of Result Summary of Schedule FR-A)	B	
5.	ADJUSTMENTS FOR 1 (From Line 2 above)	N-KIND CONTRIBUTIONS RECEIVED		A-
7.	TOTAL DISBURSEME	ITS (Add Lines 5 and 6)		-0
	(Transfer to Line 7 of Campa	an Substituti of Account)	10	1

IMPORTANT:	FILE SEP	RATE SCHEDULE	FOR <u>EACH</u> FUN	DRAISING EVENT.	
SUPPORTING SO	HEDULE	FOR FUNDRAISING	DACE		
Candidate Name (In Full)				of reasurer:	PAGE OF
Mangli	ona,	Lucia S	5. (	Asta Menton	1/2/10
THE PARTY OF		SIED	POPTING	SCHEDULE FR-A	1-1-119
		GROSS PROCE	EDS AND EXPE	SCHEDULE FR-A NSES FROM FUNDRAISING EVENT	
				FSUMMARY	A STATE OF THE PARTY OF THE PAR
1. TOTAL CASH	PROCEEDS	FROM INDIVIDUALS	WHO CONTO DI 17	TED I TEO TWAN- AND	6
2. TOTAL CASH I	PROCEEDS	ROM INDIVIDUALS	WHO CONTRIBUT	ED MORE THAN \$500 (Datable on Datable	8 -6
3. TOTAL CASH	ROCEEDS	ROM FUNDRAISING	EVENT (Transfer th	nis total to Line 1 of Fundraising Event Report)	240.00
4. TOTAL FUNDR total to Line 5 of	ATRING ITS	TENERS (Desile of Par	ion 2-Fundraising E	xpense on the reverse side of this form. Transfer this	82-70-00
		tract Line 4 from Line 3		The total remote this	240.00
					-0-
FULL NAME	IN I - NA	TRIBUTOR	TORS WITH S5	00 OR MORE TOTAL AGGREGATE CONT	RIBUTIONS
	CHIPPET DE MANGE	TRIBUTOR	AMOUNT	FULL NAME OF CONTRIBUTOR	AMOUNT
Example: Mr. John I			\$ 600.00		
Nor	re		0		
	-				
OTAL BROWERS OF	0.002				
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CA-1), 2018					

IMPORTANT: FILES	EPARATE SCI	EDULE FOR EACH	FUNDRAISING	FVENT			
SUPPORTING SCHEDE	E FOR FUND	RAISING EVENT E	IFI D ON DATE	EV.		7	
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D-FR (A-2), 2018							

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KEEP THIS SLIP FOR REFERENCE

IMPORTANT: FILE SEE	RATE SCHEDUI	LE FOR <u>EACH</u> FUNDRAISING EVENT.	
SUPPORTING SCHEDULE	FOR FUNDRAIS	ING EVENT HELD ON DATE(S):	PAGEOF
Candidate Name (In Fuil):	Lucia	Supply of Postures	Date: 1 2 19
	SU	PPORTING SCHEDULE, FR-13 N-KIND CONTRIBUTIONS RECEIVED	
FULL NAME OF CO	TRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET
Example ABC ROLL II		Cive over relative (210 or \$5,00)	VALUE
0 1	ano	(2) Co green tea (21.95)	43,90
Mateo Sou	tos	(1) Plater tork (2) plater chicker	20.00
Chana atal	0	(I) Bowl Pickles	15.00
Terry Santo	5	(2) plater Pastries	40.00
Lorita Man	alona (	(1) Plater Potodoe Salad	30.00
Lorna Kina	3.01.01	5) Banners	20.00
SUB-TOTAL OF RECEIPTS TI	IS PASE ONLY	(1) plater Rice	20.00
TOTAL RECEIPTS (IF LAST P	GE ONLY)		378,90
Common Point to Line 2 to the Fund	ising Event Report)	<b>S</b>	378.90
	SUP	PORTING SCHEDULE FR-C	
FULL NAME OF CON	RIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET
Exemple: Island Computing		Old Computer with printer	VALUE 800
		None	-0
SUB-TOTAL OF RECEIPTS THE	PAGE ONLY		
TOTAL RECEIPTS (IF LAST PA	E ONLY)		0
Tundrasing	Event Keport)		4

# COMMONWEALT OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

# GENERAL CONTRIBUTION AND EXPENSE REPORT

Circ	ndidate Name (Lost Name, First Name,			
1	<u>Janglona</u>	Lucia S. Mana on L	Name, MD:	1.
	13	JMMARY OF RECEIPTS AND DISBURSI (Complete Supporting Schedules Before Completing This	EMENTS Section)	
			CASH	IN-KIND
1.	(10th Controllions from 5	BUTTONS FROM NON-FUNDRAISING EVENTS hedule GC-A)	9	
2.	IN-KIND CONTRIBUT	IONS RECEIVED Received from Schedule GC-B. Bring down this value to Line 7 below.)		15.50.00
3.		ERTY RECEIVED teceived from Schedule GC-C)		15 70.00
4.	TOTAL RECEIPTS (Transfer to Line 4 of Camp.		-0-	1570.00
DIS	BURSEMENTS			
5.	GENERAL EXPENDIT (Total General Expenditures	IRIS		
6.	CONTRIBUTIONS TO (Total Contribution to Oth	THER CANDIDATES or Candidates from Schedule GC-E)	4	
7.	ADJUSTMENTS FOR I	-KIND CONTRIBUTIONS RECEIVED	<u> </u>	-A
8.	TOTAL DISBURSEME (Transfer to Line 9 of Campa	TS in Statement of Account)	-A	A-
NET (Subt	RECEIPTS AND DISBU	SEMENTS TO ESTABLISH THE STATE OF THE SECOND	-0	0
		THE STATE OF THE S		
		n.		
FD-GC	CER, 2018			

SCITOKING SCHEDULE	OR GENERAL COM	NTRIBUTIONS		PAGEOF
Candidate Name (In Fully: Manalona	Lucia	S. Signard	of Tradsurer:	Date: 1 2 19
MOV	SUPP ETARY CONTR	ORTING SO	CHEDULE GC-A ROM NON-FUNDRAISING EVEN	TS
TOTAL MONETARY CONTE     TOTAL MONETARY CONTE	RIBUTIONS FROM INI	RESULT S DIVIDUALS WHO CO		S
FULL NAME OF COV	TRIBUTOR	AMOUNT	FULL NAME OF CONTRIBUTO	R AMOUNT
Example Value		\$ 1,500.00	None	D
None		0		
FOTAL CONTRIBUTIONS RECEITED OTHERWISE CONTINUE ON NEXT (	D, IF LAST PAGE COLUMN	D TO	TAL CONTRIBUTIONS RECEIVED (LAST PAILY) (Transfer to Line 2 of Result Summary above)	GE O

CFD-GC (A), 2018

SUPPORTING SCHEDULE	FOR GENE, AL CO	ONTRIBUTIONS	PAGEOF
Candidate Name (fo Fuil):  Manglona,	Lucia.	S. Separation Treatment of the State of the	Date: 1 2 1 9
	SUP	PORTING SCHEDULE GC-B KIND CONTRIBUTIONS RECEIVED	
FULL NAME OF CO	NTRIBUT(. 3	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE
SUB-TOTAL OF RECEIPTS T (Use additional sheets as necessary) TOTAL RECEIPTS (IF LAST)	IS PAGE COLLY AGE ONLY all Contribution and Expe	Give-away t-shirts (250 @ \$5.00)  USSTA Flood drinks  OLSSTA Flood drink	\$ 600.00 \$ 600.00 \$ 300.00 \$ 100.00 \$ 120.00 \$ 150.00
FULL NAME OF COR	TRIBUTGR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET
Example Island Computers		Old Computer with printer.	VALUE
		None	-0
SUB-TOTAL OF RECEIPTS TH (Use additional sheets as necessary) TOTAL CONTRIBUTED PROPI (Transfer Total to Line 3 of the General	RTY RECEIVED OF	LAST PAGE ONLY) se Report, Summary of Receipts and Disbursements).	<b>D</b>
1		The state of the s	

SUPPORTING SCHEDULE	FOR GENE	RAL CONTRIBU	TIONS			PAGE	OF
Condidate Name (In Full):	1 112	19 5.	Signature of Thesurers	$\sim 0$		Date:	
Ivanglona	LINC	19 5.	( day	N K	للــــ	1/2	19
		SUPPORT	ING SCHED	ULE GC-	D		
		GEN	ERAL EXPENDITE	JRES			
FULL NAME OF PAYEE O	: VENDOR	PARTICULARS, DESCRIPTION	Food & Drinks	Advertising	AMOUNT	T 25 - 75	
Exemple: Migranus Dailo		Oan page ad		\$ 500		Fees/Donation	Other
Condidate Filli	ig te	2 0	-8	0	-8-	#100.00	8
							-
		V					
SUB-TOTAL OF PAYMENTS T ONLY (Use additional sheets as ne	essarvì	(Sub-total) 🖨 🔄	0	0	0	1 00.00	0
TOTAL GEN. EXPENDITURES PAGE ONLY) (Transfer Total to Line Contributions & Exp. Report, Summary and Disbursements)	Enfilled	(Tetal)	0	0	0 1	100.00	0
CFD-GC (D), 2018						,00,00	

# CMNI Tax System Release 4.0 Commonwealth of the Morthern Mariana Islands

OFFICIAL CASH RECEIPT

Receipt Mr.: 003561880

Payment Entered: 7/13/2018

Raceived From: Manglone, Lucia S.

Received by : Catherine C Licop Hendooa · · .7/13/2018 10:41:38

Payment to Account(s): Candidate Filing Fee
Municipal Council #7 Rota/

Payment(s) Tendered: Cash

100,00

50710 999

1000 43340

100.00

100,00

"SWANGER" THIS RECEIPT FOR YOUR NEUDROS SHA

SUPPORTING SCHEDULE	FOR GENERAL CO	NTRIBUTIONS	PAGEOF_
Candidate Name (In Full):		Squatures Transurer:	Date:
Manalona,	Lucia S	· I hat WILL	117119
	SUPE	ORTING SCHEDULE CC E	11411
	CONTRIBLTIC	ONS TO OTHER CANDIDATES (EXPENDITURES)	
FULL NAME O	PAYEE	DESCRIPTION	AMOUNT
exemple: Mr. Williams, Chambelle.	die Ma	DESCRIPTION Pundraising ticketh purchased (1th ticknis (6) \$50)	AWOUNT
		None	0
		13017	-0
			7
3-TOTAL OF EXPENSES THIS	PAGE ONLY		
I ANTAR A DISCUSSION OF THE PARTY OF THE PAR	LEAD TO A TAXABLE A COURSE OF	CLAST PACE ONLY	2-
nsfer Total to Line 6 of General Con-	ibution and Expenses Repo	rt, Summary of Receipts and Disbursements)	-0-

#### COMMONWEALT OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

# MULTI-CANDIDATE CONTRIBUTION AND EXPENSE REPORT

Cardidate Name (Last Name, First Name Manalotta	Lucia S. Marana, pris M.				
		NTRIBUTIONS RECEIVED			
RECEIVED 1	ROM	DESCRIPTION	AMOUNT		
Complete No. 100		Costs Allocation of Party General Fundsolsting Proposets None	The second secon		
SUB-TOTAL OF CONTRIBUT	ONS RECEIVED (TH	IS PAGE ONLY)	8-		
(Use additional sheets as Inccessary)  TOTAL CONTRIBUTIONS RE TIVED (IF LAST PAGE ONLY)  (Transfer Total to Line 3 of the Campaign Statement of Account)			2		
		EXPENSES	Mile Park		
FULL NAME OF	Control of the Contro	DESCRIPTION OF EXPENDITURE	AMOUNT		
Radofie BESTPART A VINE		Allbertien of Party General Experient None	8 15,000°		
SHE TOTAL OF EVENTSON					
UB-TOTAL OF EXPENSES THE SPAGE ONLY Use additional sheets as necessary) OTAL ALLOCATED EXPEND FURES (IF LAST PAGE ONLY)			20		
		SE ONLY)	2		

CFD-MCCER, 2018

NOTE:

not provided

are family help.

They only want

to help.

Thank You for

Under standing

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