



COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE

Report Type:
 Final Report
 Amendment

CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE
 2009 GENERAL SPECIAL ELECTION

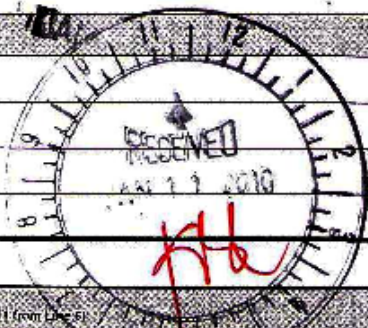
OFFICE OF THE PUBLIC AUDITOR
 1-11-10
 SIGNATURE *[Signature]*

IMPORTANT: FILE THIS REPORT NOT LATER THAN DECEMBER 28, 2009.
 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): Maratita, David R.	Office Sought: House of Representatives, Precinct 3
Treasurer Name (Last Name, First Name, MI): Dr. Dela Cruz, Ignacio T.	Preferred Mailing (P.O. Box) Address: P.O. Box 504515 Saipan, MP 96950
	Telephone: 664-3055 (w) 234-1954 (h)

	CASH	IN-KIND
1. BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION (S)	\$0.00	\$0.00
2. RECEIPTS FROM FUNDRAISING EVENTS	\$750.00	\$30.00
3. MULTI-CANDIDATE CONTRIBUTIONS	\$3,021.27	
4. RECEIPTS FROM GENERAL CONTRIBUTIONS		\$100.00
5. OTHER RECEIPTS		
6. TOTAL AVAILABLE (Add Lines 1 through 5)	\$3,771.27	\$130.00
7. DISBURSEMENTS FOR FUNDRAISING EVENTS	\$773.45	
8. MULTI-CANDIDATE EXPENSES	\$2,906.33	
9. DISBURSEMENTS FOR GENERAL EXPENDITURES	\$731.82	
10. OTHER DISBURSEMENTS	\$659.00 Outstanding Expense	
11. TOTAL DISBURSEMENTS (Add Lines 7 through 10)	\$5,080.70	
12. EXCESS (SHORTFALL) (NET RECEIPTS) (OVER) (UNDER) DISBURSEMENTS (Subtract Line 11 from Line 6)	(\$1,309.43)	\$130.00



VERIFICATION

Commonwealth of the Northern Mariana Islands } ss.
 Island of Saipan

I, David R. Maratita 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 reasonable diligence in preparing this Statement, and that the contents thereof, including the contents of all supporting attachments, are 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 CM 3195-128.

[Signature]
 Signature of Candidate

11/11/10
 Date (Month, Day, Year)

Subscribed and sworn before me this 11th day of January, 20 10

MICHELLE A. CAMACHO
 Notary Public
 BY AND FOR THE COMMONWEALTH

Commonwealth of the Northern Mariana Islands } ss.
 Island of Saipan

I, Dr. Ignacio T. Dela Cruz being duly sworn on oath, depose and say:
 (Treasurer)

That I am the individual named above, that the foregoing Campaign Statement of Account, and the contents thereof, including the contents of all supporting attachments, are 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 CM 3195-128.

[Signature]
 Signature of Treasurer

11/11/10
 Date (Month, Day, Year)

Subscribed and sworn before me this 11th day of January, 20 10

MICHELLE A. CAMACHO
 Notary Public
 BY AND FOR THE COMMONWEALTH

Notary Seal: My Commission Expires: 5/7/11

Notary Seal: My Commission Expires: 5/7/11