



COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
P.O. BOX 1899 CNMI
1941 20 HIGHLIGHTING

OFFICE OF THE PUBLIC AUDITOR

Report Type:
<input checked="" type="checkbox"/> Final Report
<input type="checkbox"/> Amendment

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE 2009 GENERAL SPECIAL ELECTION

(Year)



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): SANCHEZ JOSE DLG	Office Sought: Mayor
Treasurer Name (Last Name, First Name, MI): SANCHEZ BERNADITA P	Preferred Mailing (P.O. Box) Address: POB 501576 CK
	Telephone: 256-0688

	CASH	IN-KIND
1. BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)	0	0
2. RECEIPTS THIS ELECTION PERIOD	0	0
3. MULTI-CANDIDATE CONTRIBUTIONS	0	0
4. RECEIPTS FROM GENERAL CONTRIBUTIONS	-	1,321.50
5. OTHER RECEIPTS	2,092.19	
6. TOTAL AVAILABLE (Add Lines 1 through 5)	2,092.19	1,321.50
7. DISBURSEMENTS THIS ELECTION PERIOD	0	0
8. MULTI-CANDIDATE EXPENSES	0	0
9. DISBURSEMENTS FOR GENERAL EXPENDITURES	2,092.19	1,321.50
10. OTHER DISBURSEMENTS	0	0
11. TOTAL DISBURSEMENTS (Add Lines 7 through 10)	2,092.19	1,321.50
12. EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS (Available Funds)	0	0

VERIFICATION

Commonwealth of the Northern Mariana Islands Island of <u>Saipan</u>	Commonwealth of the Northern Mariana Islands Island of <u>Saipan</u>
<u>JOSE DLG. SANCHEZ</u> , being duly sworn on oath, depose and say: (Candidate)	<u>BERNADITA P. SANCHEZ</u> , 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 reasonable 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 §6128.	
<u>November 25th, 2009</u> Signature of Candidate Date (Month, Day, Year) Subscribed and sworn before me this day of <u>November 25th, 2009</u> MICHELLE A. CAMACHO Notary Public BY AND FOR THE COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS My Commission Expires: <u>5/6/11</u>	
<u>November 25th, 2009</u> Signature of Treasurer Date (Month, Day, Year) Subscribed and sworn before me this day of <u>November 25th, 2009</u> MICHELLE A. CAMACHO Notary Public BY AND FOR THE COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS My Commission Expires: <u>5/6/11</u>	