



COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE

Report Type
 Final Report
 Amendment

CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE
2014 **GENERAL** **SPECIAL ELECTION**
(Year)

1-26-15
OFFICE OF THE PUBLIC AUDITOR
SIGNATURE

IMPORTANT: FILE THIS REPORT NOT LATER THAN **DECEMBER 24, 2014**.
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, details as required in the Act.

Candidate Name (Last Name, First Name, MI): Inos, Eloy S/Torres, Ralph G.	Office Sought: Governor/Lt. Governor	Telephone: 285-1121
Treasurer Name (Last Name, First Name, MI): Pangelinan, Judith I.	Preferred Mailing (P.O. Box) Address: P.O. Box 502825, Saipan, MP 96950	

	CASH	IN-KIND
1. BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)	0.00	0.00
2. RECEIPTS FROM FUNDRAISING EVENTS	279,730.00	2,928.05
3. MULTI-CANDIDATE CONTRIBUTIONS		
4. RECEIPTS FROM GENERAL CONTRIBUTIONS	129,910.00	18,859.72
5. OTHER RECEIPTS		
6. TOTAL AVAILABLE (Add Lines 1 through 5)	409,640.00	21,787.77
7. DISBURSEMENTS FOR FUNDRAISING EVENTS	75,259.03	2,928.05
8. MULTI-CANDIDATE EXPENSES		
9. DISBURSEMENTS FOR GENERAL EXPENDITURES	332,260.59	18,859.72
10. OTHER DISBURSEMENTS		
11. TOTAL DISBURSEMENTS (Add Lines 7 through 10)	407,519.52	21,787.77
	2,120.38	0.00



VERIFICATION

Commonwealth of the Northern Mariana Islands) Island of <u>Saipan</u>) s.s. I, <u>Eloy S. Inos</u> (Candidate), <u>Ralph D.G. Torres</u> , being duly sworn on oath, depose and say: 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 §6428. Signature of Candidate: <u>[Signature]</u> Date (Month, Day, Year): <u>1/23/15</u> Subscribed and sworn to before me this <u>23rd</u> day of <u>January</u> , 20 <u>15</u> . Notary Public: <u>EDILYNN SIMRAM BENJAMIN</u> , Reg. No. 759A, Commission Expires: <u>2/13/16</u> .	Commonwealth of the Northern Mariana Islands) Island of <u>Saipan</u>) s.s. I, <u>Judith I. Pangelinan</u> (Treasurer), being duly sworn on oath, depose and say: 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 CMC §6428. Signature of Treasurer: <u>[Signature]</u> Date (Month, Day, Year): <u>1/26/15</u> Subscribed and sworn before me this <u>26th</u> day of <u>January</u> , 20 <u>15</u> . Notary Public: <u>MARIA P. MUÑA</u> , P.O. Box 500826 Saipan, MP 96950, Reg. No. 43A, Commission Expires: <u>2/16/2016</u> .
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CFD-001, Revised May 2, 2014

[Handwritten Signature]

