



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

Report Type:

Final Report

Amendment

CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE

2016 **GENERAL** **SPECIAL ELECTION**

(Year)

IMPORTANT: FILE THIS REPORT NOT LATER THAN **DECEMBER 28, 2016**.
FILE ORIGINAL AND TWO COPIES WITH THE OFFICE OF THE PUBLIC AUDITOR.

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): <i>CAMACHO, Joseph James Morita</i>	Office Sought: <i>CSMI Superior Court Associate Judge</i>
Treasurer Name (Last Name, First Name, MI): <i>None</i>	Preferred Mailing (P.O. Box) Address: <i>Saipan, mp PO Box 5506 CHR B 96950</i>
	Telephone: <i>483-8536</i>

	CASH	IN-KIND
1. BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)	<i>0</i>	<i>0</i>
ADD: RECEIPTS THIS ELECTION PERIOD		
2. RECEIPTS FROM FUNDRAISING EVENTS	<i>0</i>	<i>0</i>
3. MULTI-CANDIDATE CONTRIBUTIONS	<i>0</i>	<i>0</i>
4. RECEIPTS FROM GENERAL CONTRIBUTIONS	<i>0</i>	<i>0</i>
5. OTHER RECEIPTS	<i>1,928.94</i>	<i>0</i>
6. TOTAL AVAILABLE (Add Lines 1 through 5)	<i>1,928.94</i>	<i>0</i>
LESS: DISBURSEMENTS THIS ELECTION PERIOD		
7. DISBURSEMENTS FOR FUNDRAISING EVENTS	<i>0</i>	<i>0</i>
8. MULTI-CANDIDATE EXPENSES	<i>0</i>	<i>0</i>
9. DISBURSEMENTS FOR GENERAL EXPENDITURES	<i>0</i>	<i>0</i>
10. OTHER DISBURSEMENTS	<i>1,928.94</i>	<i>0</i>
11. TOTAL DISBURSEMENTS (Add Lines 7 through 10)	<i>1,928.94</i>	<i>0</i>
12. EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS (Subtract Line 11 from Line 6)	<i>0</i>	<i>0</i>

VERIFICATION

<p>Commonwealth of the Northern Mariana Islands) Island of _____) s.s.</p> <p>I, <u>Joseph James M. Camacho</u>, being duly sworn on oath, depose and say: (Candidate)</p> <p>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.</p> <p><u>Joseph James M. Camacho</u> <u>Dec 23, 2016</u> Signature of Candidate Date (Month, Day, Year)</p> <p>Subscribed and sworn before me this <u>23rd</u> day of <u>Dec</u>, 20<u>16</u>.</p> <p>Notary Stamp: </p>	<p>Commonwealth of the Northern Mariana Islands) Island of _____) s.s.</p> <p>I, _____, being duly sworn on oath, depose and say: (Treasurer)</p> <p>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.</p> <p>_____ Signature of Treasurer _____ Date (Month, Day, Year)</p> <p>Subscribed and sworn before me this _____ day of _____, 20____.</p> <p>Notary Stamp: _____ Notary Seal: _____</p>
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MARLOU C. LAMBAT
P.O. Box 505697 CK, Saipan, MP 96950
Notary Public Reg. No. 483A
BY AND FOR THE COMMONWEALTH
OF THE NORTHERN MARIANA ISLANDS
My Commission Expires: 8/7/17

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

FUNDRAISING EVENT REPORT

FUNDRAISING DATE(S): None

IMPORTANT: USE A SEPARATE REPORT FOR EACH FUNDRAISING EVENT.

Candidate Name (Last Name, First Name, MI):	Treasurer Full Name (Last Name, First Name, MI):
Name of Fundraising Event:	Date(s) Held:

SUMMARY OF FUNDRAISING RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

RECEIPTS		CASH	IN-KIND
1. GROSS PROCEEDS FROM FUNDRAISING EVENT (Total Cash Proceeds from Line 3 of Result Summary of Supporting Schedule FR-A)			
2. IN-KIND CONTRIBUTIONS RECEIVED (Total In-kind Contributions Received from Schedule FR-B. Bring down this value to Line 6 below.)			
3. CONTRIBUTED PROPERTY RECEIVED (Total Contributed Property Received from Schedule FR-C)			
4. TOTAL RECEIPTS (Transfer to Line 1 of Campaign Statement of Account)			
DISBURSEMENTS			
5. FUNDRAISING EXPENSES (Total Fundraising Expenses from Line 4 of Result Summary of Schedule FR-A)			
6. ADJUSTMENT FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)			
7. TOTAL DISBURSEMENTS (Transfer to Line 6 of Campaign Statement of Account)			
NET RECEIPTS AND DISBURSEMENTS (Subtract Line 7 from Line 4)			

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

GENERAL CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name, MI): <i>Mano</i>	Treasurer Full Name (Last Name, First Name, MI):
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SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

RECEIPTS	CASH	IN-KIND
1. MONETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS (Total Contributions from Schedule GC-A)		
2. IN-KIND CONTRIBUTIONS RECEIVED (Total In-kind Contributions Received from Schedule GC-B. Bring down this value to Line 7 below.)		
3. CONTRIBUTED PROPERTY RECEIVED (Total Contributed Property Received from Schedule GC-C)		
4. TOTAL RECEIPTS (Transfer to Line 4 of Campaign Statement of Account)		
DISBURSEMENTS		
5. GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D)		
6. CONTRIBUTIONS TO OTHER CANDIDATES (Total Contributions To Other Candidates from Schedule E)		
7. ADJUSTMENT FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		
8. TOTAL DISBURSEMENTS (Transfer to Line 9 of Campaign Statement of Account)		
NET RECEIPTS AND DISBURSEMENTS (Subtract Line 8 from Line 4)		

Candidate Name (In Full) :	Signature of Treasurer:	Date:
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**SUPPORTING SCHEDULE GC-B
IN-KIND CONTRIBUTIONS RECEIVED**

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE
Example : ABC Retail	Give-away t-shirts (250 pcs @ \$ 5.00)	\$ 1,250
None		
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		➔
TOTAL IN-KIND CONTRIBUTIONS RECEIVED (IF LAST PAGE ONLY) (Transfer Total to Line 2 of the General Contribution and Expense Report)		➔

**SUPPORTING SCHEDULE GC-C
CONTRIBUTED PROPERTY RECEIVED**

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF PROPERTY RECEIVED	FAIR MARKET VALUE
Example : Island Computers	Old Computer with printer	\$ 600
None		
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		➔
TOTAL CONTRIBUTED PROPERTY RECEIVED (IF LAST PAGE ONLY) (Transfer Total to Line 3 of the General Contribution and Expense Report)		➔

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

**MULTI-CANDIDATE
CONTRIBUTION AND EXPENSE REPORT**

Candidate Name (Last Name, First Name, MI):	Treasurer Full Name (Last Name, First Name, MI):
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CONTRIBUTIONS RECEIVED

RECEIVED FROM	DESCRIPTION	AMOUNT
Example : BEST PARTY IN THE LAND	Cash Allocation of Party General Fundraising Expenses	\$ 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 2 of Campaign Statement of Account)		➔

EXPENSES

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 7 of Campaign Statement of Account)		➔