



COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE

CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE
2016 GENERAL SPECIAL ELECTION

Report Type:
Final Report
Amendment

OFFICE OF THE PUBLIC AUDITOR
1/13/17

IMPORTANT: FILE THIS REPORT NOT LATER THAN DECEMBER 28, 2016.
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): TORRES, STANLEY T. M.
Office Sought: REPRESENTATIVE
Treasurer Name (Last Name, First Name, MI): TORRES, ANA C.
Preferred Mailing (P.O. Box) Address: P.O. BOX 500610
Telephone: 297-7824

Table with columns: Description, CASH, IN-KIND. Rows include: BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S), ADD: RECEIPTS THIS ELECTION PERIOD, RECEIPTS FROM FUNDRAISING EVENTS, MULTI-CANDIDATE CONTRIBUTIONS, RECEIPTS FROM GENERAL CONTRIBUTIONS, OTHER RECEIPTS, TOTAL AVAILABLE, LESS: DISBURSEMENTS THIS ELECTION PERIOD, DISBURSEMENTS FOR FUNDRAISING EVENTS, MULTI-CANDIDATE EXPENSES, DISBURSEMENTS FOR GENERAL EXPENDITURES, OTHER DISBURSEMENTS, TOTAL DISBURSEMENTS, EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS.

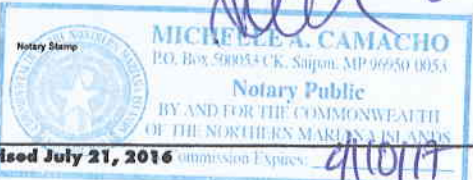
VERIFICATION

Commonwealth of the Northern Mariana Islands }
Island of Saipan } s.s.
I, Stanley M. Torres, 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.

Signature of Candidate: [Signature]
Date (Month, Day, Year): JAN. 13, 2017

Subscribed and sworn before me this 13th day of January, 2017.

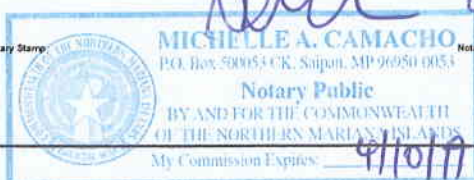


Commonwealth of the Northern Mariana Islands }
Island of Saipan } s.s.
I, Ana C. Torres, being duly sworn on oath, depose and say:

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.

Signature of Treasurer: [Signature]
Date (Month, Day, Year): 01-13-2017

Subscribed and sworn before me this 13th day of January, 2017.



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

# FUNDRAISING EVENT REPORT

**FUNDRAISING DATE(S):** \_\_\_\_\_

**IMPORTANT:** USE A SEPARATE REPORT FOR EACH FUNDRAISING EVENT.

|   |  |
|---|--|
| Candidate Name (Last Name, First Name, MI):<br><i>TORRES, STANLEY T. M.</i> | Treasurer Full Name (Last Name, First Name, MI):<br><i>ANA TORRES C.</i> |
| Name of Fundraising Event:<br><i>N/A</i>                                    | Date(s) Held:<br><i>N/A</i>  |

## SUMMARY OF FUNDRAISING RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

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

**IMPORTANT:** FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

**SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S):** \_\_\_\_\_ PAGE \_\_\_\_\_ OF \_\_\_\_\_

|   |   |                          |
|---|---|--------------------------|
| Candidate Name (In Full):<br><b>STANLEY T.M. TORRES</b> | Signature of Treasurer:<br><i>[Signature]</i> | Date:<br><b>01-13-07</b> |
|---|---|--------------------------|

**SUPPORTING SCHEDULE FR-A  
GROSS PROCEEDS AND EXPENSES FROM FUNDRAISING EVENT**

**RESULT SUMMARY**

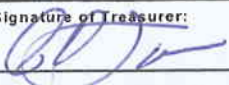
- |  |          |
|--|----------|
| 1. TOTAL CASH PROCEEDS FROM INDIVIDUALS WHO CONTRIBUTED LESS THAN \$500  | \$ _____ |
| 2. TOTAL CASH PROCEEDS FROM INDIVIDUALS WHO CONTRIBUTED MORE THAN \$500 (Details on Section 1 below)   | + _____  |
| 3. TOTAL CASH PROCEEDS FROM THIS FUNDRAISING EVENT (Transfer this total to Line 1 of Fundraising Event   | _____    |
| 4. TOTAL FUNDRAISING EXPENSES (Details on Section 2 on the reverse side of this form. Transfer this total to Line 5 of Fundraising Event Report) | _____    |
| 5. NET CASH PROCEEDS   | \$ _____ |

**SECTION 1 - NAMES OF CONTRIBUTORS WITH \$500 OR MORE TOTAL AGGREGATE CONTRIBUTIONS**

| FULL NAME OF CONTRIBUTOR  | AMOUNT    | FULL NAME OF CONTRIBUTOR  | AMOUNT |
|---|-----------|---|--------|
| Example: Mr. John Doe   | \$ 600.00 |   |        |
| <b>N/A</b>  |           | <b>N/A</b>  |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
|   |           |   |        |
| TOTAL PROCEEDS OF CONTRIBUTIONS, IF LAST PAGE OTHERWISE CONTINUE ON NEXT COLUMN |           | TOTAL PROCEEDS OF CONTRIBUTIONS \$500 OR MORE (LAST PAGE ONLY - MUST AGREE WITH LINE 2 ABOVE) |        |

**IMPORTANT:** FILE SEPARATE SCHEDULE A FOR EACH FUNDRAISING EVENT.

**SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S):** \_\_\_\_\_ **PAGE** \_\_\_\_\_ **OF** \_\_\_\_\_

|   |   |                          |
|---|---|--------------------------|
| Candidate Name (In Full):<br><b>STANLEY T.M. TORRES</b> | Signature of Treasurer:<br> | Date:<br><b>01-13-07</b> |
|---|---|--------------------------|


## SUPPORTING SCHEDULE FR-A GROSS PROCEEDS AND EXPENSES FROM FUNDRAISING EVENT

### SECTION 2 - FUNDRAISING EXPENSES

| FULL NAME OF PAYEE OR VENDOR   | PARTICULARS/<br>DESCRIPTION | AMOUNT        |             |          |               |       |
|--|-----------------------------|---------------|-------------|----------|---------------|-------|
|  |                             | Food & Drinks | Advertising | Supplies | Fees/Donation | Other |
| Example : Taste Good Restaurant  | Food catering               | \$ 600        |             |          |               |       |
| N/A  | N                           | /             |             | A        |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
|  |                             |               |             |          |               |       |
| <b>TOTAL FUNDRAISING EXPENSES</b><br>(Transfer Total to Line 4, Section 1 of Schedule A) | (Total) ←                   |               |             |          |               |       |

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S): \_\_\_\_\_ PAGE \_\_\_\_ OF \_\_\_\_

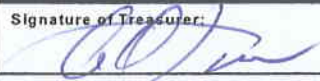
|  |   |                          |
|--|---|--------------------------|
| Candidate Name (In Full):<br><b>STANLEY T. M. TORRES</b> | Signature of Treasurer:<br> | Date:<br><b>01/13/07</b> |
|--|---|--------------------------|

### SUPPORTING SCHEDULE FR-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          |
| N/A  | N/A                                    |                   |
|  |  |                   |
|  |  |                   |
|  |  |                   |
|  |  |                   |
|  |  |                   |
|  |  |                   |
| SUB-TOTAL OF RECEIPTS THIS PAGE ONLY<br>(Use additional sheets as necessary).....  |  | ➔                 |
| TOTAL RECEIPTS (IF LAST PAGE ONLY)<br>(Transfer Total to Line 2 of either the Fundraising Event Report or the General Contribution and Expense Report) ..... |  | ➔                 |

### SUPPORTING SCHEDULE FR-C CONTRIBUTED PROPERTY RECEIVED

| FULL NAME OF CONTRIBUTOR   | DESCRIPTION OF PROPERTY RECEIVED | FAIR MARKET VALUE |
|--|----------------------------------|-------------------|
| Example : Island Computers   | Old Computer with printer        | \$ 600            |
| N/A  | N/A                              |                   |
|  |                                  |                   |
|  |                                  |                   |
|  |                                  |                   |
|  |                                  |                   |
|  |                                  |                   |
|  |                                  |                   |
| SUB-TOTAL OF RECEIPTS THIS PAGE ONLY<br>(Use additional sheets as necessary).....  |                                  | ➔                 |
| TOTAL RECEIPTS (IF LAST PAGE ONLY)<br>(Transfer Total to Line 3 of either the Fundraising Event Report or the General Contribution and Expense Report) ..... |                                  | ➔                 |

|   |   |                          |
|---|---|--------------------------|
| Candidate Name (In Full):<br><b>STANLEY T.M. TORRES</b> | Signature of Treasurer:<br> | Date:<br><b>01-13-07</b> |
|---|---|--------------------------|

**SUPPORTING SCHEDULE GC-A  
MONETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS**

| FULL NAME OF CONTRIBUTOR  | AMOUNT        | FULL NAME OF CONTRIBUTOR   | AMOUNT |
|---|---------------|--|--------|
| Example : Ms. Jane Doe  | \$ 1,500.00   |  |        |
| <b>HERMAN B. CABRERA<br/>and ASSOCIATES</b>                                     | <b>200.00</b> |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
|   |               |  |        |
| TOTAL CONTRIBUTIONS RECEIVED, IF LAST PAGE<br>OTHERWISE CONTINUE ON NEXT COLUMN | <b>200.00</b> | TOTAL CONTRIBUTIONS RECEIVED (LAST PAGE ONLY)<br>(Transfer to Line 1 of Gen. Contrib. & Exp. Report) |        |

|   |                             |                           |
|---|-----------------------------|---------------------------|
| Candidate Name (In Full):<br><b>STANLEY T.M. TORRES</b> | Signature of Treasurer:<br> | Date:<br><b>01-13-017</b> |
|---|-----------------------------|---------------------------|

**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          |
| <b>N/A</b>  | <b>N/A</b>                             |                   |
|   |  |                   |
|   |  |                   |
|   |  |                   |
|   |  |                   |
|   |  |                   |
|   |  |                   |
| SUB-TOTAL OF RECEIPTS THIS PAGE ONLY<br>(Use additional sheets as necessary) .....  |  | ➔                 |
| TOTAL IN-KIND CONTRIBUTIONS RECEIVED (IF LAST PAGE ONLY)<br>(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            |
| <b>N/A</b>   | <b>N/A</b>                       |                   |
|  |                                  |                   |
|  |                                  |                   |
|  |                                  |                   |
|  |                                  |                   |
|  |                                  |                   |
|  |                                  |                   |
| SUB-TOTAL OF RECEIPTS THIS PAGE ONLY<br>(Use additional sheets as necessary) .....   |                                  | ➔                 |
| TOTAL CONTRIBUTED PROPERTY RECEIVED (IF LAST PAGE ONLY)<br>(Transfer Total to Line 3 of the General Contribution and Expense Report) ..... |                                  | ➔                 |

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS  
CAMPAIGN FINANCIAL DISCLOSURE

## GENERAL CONTRIBUTION AND EXPENSE REPORT


|  |   |
|--|---|
| Candidate Name (Last Name, First Name, MI):<br><b>TORRES, STANLEY T.M.</b> | Treasurer Full Name (Last Name, First Name, MI):<br><b>TORRES, ANA C.</b> |
|--|---|

### SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

| RECEIPTS  | CASH       | IN-KIND |
|---|------------|---------|
| 1. <b>MONETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS</b><br>(Total Contributions from Schedule GC-A)                                      | \$200.00   |         |
| 2. <b>IN-KIND CONTRIBUTIONS RECEIVED</b><br>(Total In-kind Contributions Received from Schedule GC-B. Bring down this value to Line 7 below.) |            | - 0 -   |
| 3. <b>CONTRIBUTED PROPERTY RECEIVED</b><br>(Total Contributed Property Received from Schedule GC-C)   |            | - 0 -   |
| 4. <b>TOTAL RECEIPTS</b><br>(Transfer to Line 4 of Campaign Statement of Account)   | \$200.00   | - 0 -   |
| DISBURSEMENTS   |            |         |
| 5. <b>GENERAL EXPENDITURES</b><br>(Total General Expenditures from Schedule GC-D)   | \$1581.64  |         |
| 6. <b>CONTRIBUTIONS TO OTHER CANDIDATES</b><br>(Total Contributions To Other Candidates from Schedule E)                                      | \$ 0.00    |         |
| 7. <b>ADJUSTMENT FOR IN-KIND CONTRIBUTIONS RECEIVED</b><br>(From Line 2 above)  |            | - 0 -   |
| 8. <b>TOTAL DISBURSEMENTS</b><br>(Transfer to Line 9 of Campaign Statement of Account)  | \$1581.64  | - 0 -   |
| <b>NET RECEIPTS AND DISBURSEMENTS</b> (Subtract Line 8 from Line 4)   | <\$1381.64 | - 0 -   |



|  |   |                          |
|--|---|--------------------------|
| Candidate Name (in Full):<br><b>STANLEY T. M. TORRES</b> | Signature of Treasurer:<br> | Date:<br><b>01-13-07</b> |
|--|---|--------------------------|

**SUPPORTING SCHEDULE GC-D  
GENERAL EXPENDITURES**

| FULL NAME OF PAYEE OR VENDOR   | PARTICULARS/<br>DESCRIPTION                    | AMOUNT     |               |          |               |       |
|--|--|------------|---------------|----------|---------------|-------|
|  |  | Food &     | Advertising   | Supplies | Fees/Donation | Other |
| Example : Marianas Daily   | One-page ad                                    |            | \$ 500        |          |               |       |
| <b>CAPITOL HILL MARKET</b>   |  | <b>650</b> |               |          |               |       |
| <b>3 HI. RES DESIGNS</b>   |  |            | <b>600</b>    |          |               |       |
| <b>SAIPAN TRIBUNE</b>  |  |            | <b>125</b>    |          |               |       |
| <b>YOUNIS ART STUDIO, INC.</b>   |  |            | <b>106.44</b> |          |               |       |
| <b>CNMI TREASURY</b>   |  |            |               |          | <b>100.00</b> |       |
|  |  |            |               |          |               |       |
|  |  |            |               |          |               |       |
|  |  |            |               |          |               |       |
|  |  |            |               |          |               |       |
|  |  |            |               |          |               |       |
|  |  |            |               |          |               |       |
|  |  |            |               |          |               |       |
|  |  |            |               |          |               |       |
|  |  |            |               |          |               |       |
|  |  |            |               |          |               |       |
|  |  |            |               |          |               |       |
|  |  |            |               |          |               |       |
|  |  |            |               |          |               |       |
|  |  |            |               |          |               |       |
|  |  |            |               |          |               |       |
| <b>SUB-TOTAL OF PAYMENTS THIS PAGE ONLY</b><br><small>(Use additional sheets as necessary)</small>                               | <small>(Sub-Total)</small><br><b>1581.44</b> ← | <b>650</b> | <b>831.64</b> |          | <b>100</b>    |       |
| <b>TOTAL GEN. EXPENDITURES (IF LAST PAGE ONLY)</b><br><small>(Transfer to Line 5 of Gen. Contribution &amp; Exp. Report)</small> | <small>(Total)</small><br><b>1581.44</b> ←     | <b>650</b> | <b>831.64</b> |          | <b>100</b>    |       |



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

**MULTI-CANDIDATE  
CONTRIBUTION AND EXPENSE REPORT**

|  |   |
|--|---|
| Candidate Name (Last Name, First Name, MI):<br><b>TORRES, STANLEY T.M.</b> | Treasurer Full Name (Last Name, First Name, MI):<br><b>TORRES, ANA C.</b> |
|--|---|

**CONTRIBUTIONS RECEIVED**

| RECEIVED FROM   | DESCRIPTION   | AMOUNT    |
|---|---|-----------|
| Example : BEST PARTY IN THE LAND  | Cash Allocation of Party General Fundraising Proceeds | \$ 20,000 |
| N/A   | N/A   |           |
|   |   |           |
|   |   |           |
|   |   |           |
|   |   |           |
|   |   |           |
|   |   |           |
| SUB-TOTAL OF CONTRIBUTIONS RECEIVED THIS PAGE ONLY<br>(Use additional sheets as necessary) .....                      |   | ➔         |
| TOTAL CONTRIBUTIONS RECEIVED (IF LAST PAGE ONLY)<br>(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 |
| N/A   | N/A                                  |           |
|   |                                      |           |
|   |                                      |           |
|   |                                      |           |
|   |                                      |           |
|   |                                      |           |
|   |                                      |           |
| SUB-TOTAL OF EXPENSES THIS PAGE ONLY<br>(Use additional sheets as necessary) .....                                    |                                      | ➔         |
| TOTAL ALLOCATED EXPENDITURES (IF LAST PAGE ONLY)<br>(Transfer Total to Line 7 of Campaign Statement of Account) ..... |                                      | ➔         |

CNMI Tax System Release 6.0  
Commonwealth of the Northern Mariana Islands

OFFICIAL CASH RECEIPT

Payment Entered: 1/13/2017 Receipt No.: 003295141

Received From: STANLEY T MCDINNIS TORRES

Received by : Guadalupe M.C. Santos 1/13/2017 10:42:24 05393 999

Payment to Account(s):

Penalty on Fees/Charges 1000 48370 100.00

Payment(s) Tendered:  
Check 121403065 17667599 100.00

TOTAL . . . . . 100.00

\*\*\* KEEP THIS RECEIPT FOR YOUR RECORDS \*\*\*