



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

Report Type:
 Final Report
 Amendment

CAMPAIGN STATEMENT OF ACCOUNT – CANDIDATE

2018 GENERAL SPECIAL ELECTION
(Year)

IMPORTANT: THIS REPORT **MUST BE FILED** WITHIN 50 DAYS AFTER THE ELECTION.

FILE ORIGINAL AND TWO COPIES WITH THE **OFFICE OF THE PUBLIC AUDITOR**

OFFICE OF THE PUBLIC AUDITOR
 12-19
 SIGNATURE

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 the minimum, detailed information as required in the Act.

Candidate Name (Last Name, First Name, MI): Dorotheo Anthony Kisa		Office Sought: House of Representatives
Treasurer Name (Last Name, First Name, MI): Lourdes B. Kisa		Preferred Mailing (P.O. Box) Address: P.O. Box 5379 CHR Saipan, MP 96950
		Telephone: (670) 799-0115

	CASH	IN-KIND
1. BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)	0	0
ADD: RECEIPTS THIS ELECTION PERIOD		
2. RECEIPT FROM FUNDRAISING EVENTS	0	0
3. MULTI-CANDIDATE CONTRIBUTIONS	0	0
4. RECEIPTS FROM GENERAL CONTRIBUTIONS	600.00	0
5. OTHER RECEIPTS	0	0
6. TOTAL AVAILABLE (Add Lines 1 through 5)	600.00	0
LESS: DISBURSEMENTS THIS ELECTION PERIOD		
7. DISBURSEMENTS FOR FUNDRAISING EVENTS	0	0
8. MULTI-CANDIDATE EXPENSES	0	0
9. DISBURSEMENTS FOR GENERAL EXPENDITURES	600.00	0
10. OTHER DISBURSEMENTS	0	0
11. TOTAL DISBURSEMENTS (Add Lines 7 through 10)	600.00	0
12. EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS (Subtract Line 11 from Line 6)	0	0

VERIFICATION

Commonwealth of the Northern Mariana Islands)
) s.s.
 Island of Saipan)

I, Kisa, Dorotheo Anthony, 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 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.

01/02/2019
 Signature of Candidate Date (Month, Day, Year)

Subscribed and sworn before me this 2 day of January, 20 19

Notary Seal
CHRISTINE MAGOFNA FRANCISCO
 P.O. Box 501399, Saipan, MP 96950
 Notary Public Reg. No. 20A
 BY AND FOR THE COMMONWEALTH
 OF THE NORTHERN MARIANA ISLANDS U.S.A.
 My Commission Expires: 4/4/19

Commonwealth of the Northern Mariana Islands)
) s.s.
 Island of Saipan)

I, Kisa, Lourdes B., 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 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.

1 2 2019
 Signature of Treasurer Date (Month, Day, Year)

Subscribed and sworn before me this 2 day of January, 20 19

Notary Seal
CHRISTINE MAGOFNA FRANCISCO
 P.O. Box 501399, Saipan, MP 96950
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Fundraising Event Report Summary
Fundraising Date:

FUNDRAISER

	Receipts	Cash	In-Kind
1	Gross Proceeds from Fundraising Event	\$ -	
2	In-Kind Contributions Received		\$ -
3	Contributed Property Received		\$ -
4	Total Receipts	\$ -	\$ -
	Disbursements		
5	Fundraising Expenses	\$ -	
6	Adjustments for In-Kind Contributions Received		\$ -
7	Total Disbursements	\$ -	\$ -
	Net Receipts and Disbursement	\$ -	\$ -


Dorotheo Anthony Kisa
 NAME OF CANDIDATE

1/2/2019
 DATE


Lourdes B. Kisa
 SIGNATURE OF TREASURER

1/2/2019
 DATE

Supporting Schedule for FR-B: In-Kind Contributions Received

Full Name of Contributor	Description of Contribution	Fair Market Value
N/A		\$ -
Total In-Kind Contribution Received:		\$ -

Supporting Schedule for FR-C: Contributed Property Received

Full Name of Contributor	Description of Contribution	Fair Market Value
N/A		
Total In-Kind Contribution Received:		\$ -


 Dorotheo Anthony Kisa
 NAME OF CANDIDATE

1/2/2019
 DATE


 Lourdes B. Kisa
 SIGNATURE OF TREASURER

1/2/2019
 DATE

GENERAL CONTRIBUTION AND EXPENSE REPORT

SUMMARY OF RECEIPTS AND DISBURSEMENTS

	RECEIPTS	CASH	INKIND
1	Monetary Contributions from Non-Fundraising Events	\$ 600.00	
2	In-Kind Contributions Received		\$ -
3	Contributed Property Received		\$ -
4	Total Receipts	\$ 600.00	\$ -
	DISBURSEMENTS		
5	General Expenditures	\$ 600.00	
6	Contributions to Other Candidates	\$ -	\$ -
7	Adjustments for In-Kind Contributions Received		\$ -
8	Total Disbursements	\$ 600.00	\$ -
	NET RECEIPTS AND DISBURSEMENTS	\$ -	\$ -



Dorotheo Anthony Kisa
NAME OF CANDIDATE

DATE: 1/2/2019



Lourdes B. Kisa

SIGNATURE OF TREASURER

DATE: 1/2/2019


Supporting Schedule GC-E: Contribution to Other Candidates (Expenditures)

Full Name of Payee	Description	Amount
N/A		
Total Contribution to Other Candidates: \$		-



Dorotheo Anthony Kisa
NAME OF CANDIDATE

1/2/2019
DATE



Lourdes B. Kisa
SIGNATURE OF TREASURER

1/2/2019
DATE

