



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

Report Type:
 Final Report
 Amendment

CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE

2018 GENERAL SPECIAL ELECTION
(Year)

OFFICE OF THE PUBLIC AUDITOR
 1-18-19
 SIGNATURE

IMPORTANT: THIS REPORT MUST BE FILED WITHIN 50 DAYS AFTER THE ELECTION.
 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 the minimum, detailed information as required in the Act.

Candidate Name (Last Name, First Name, MI): <u>Alonan, Edwin Polacios</u>	Office Sought: <u>Mayor of Municipality, Tinian</u>
Treasurer Name (Last Name, First Name, MI): <u>Mendiola, Wella Estrella</u>	Preferred Mailing (P.O. Box) Address: <u>P.O. Box 520523, Tinian</u>
	Telephone: <u>488-2416</u>

	CASH	IN-KIND
1. BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)	0	0
2. RECEIPT FROM FUNDRAISING EVENTS	0	0
3. MULTI-CANDIDATE CONTRIBUTIONS	0	0
4. RECEIPTS FROM GENERAL CONTRIBUTIONS	3,784.66	0
5. OTHER RECEIPTS	0	0
6. TOTAL AVAILABLE (Add Lines 1 through 5)	3,784.66	0
GRAND DISBURSEMENTS PER ELECTION PERIOD		
7. DISBURSEMENTS FOR FUNDRAISING EVENTS	0	0
8. MULTI-CANDIDATE EXPENSES	0	0
9. DISBURSEMENTS FOR GENERAL EXPENDITURES	0	0
10. OTHER DISBURSEMENTS	0	0
11. TOTAL DISBURSEMENTS (Add Lines 7 through 10)	3,784.66	0

VERIFICATION

Commonwealth of the Northern Mariana Islands)
) s.s.
 Island of _____)
 I, Edwin Polacios Alonan, 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.

[Signature]
 Signature of Candidate

01-18-19
 Date (Month, Day, Year)

Subscribed and sworn before me this 15 day of January, 2019

Notary Stamp

Commonwealth of the Northern Mariana Islands)
) s.s.
 Island of _____)
 I, Wella E. Mendiola, 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.

[Signature]
 Signature of Treasurer

01-18-19
 Date (Month, Day, Year)

Subscribed and sworn before me this 18 day of January, 2019

Notary Stamp

CARMELITA Q. DELA CRUZ
 P.O. Box 520158, Tinian, MP 96952
 Notary Public Reg. No. 822A
 BY AND FOR THE COMMONWEALTH
 OF THE NORTHERN MARIANA ISLANDS U.S.A.
 My Commission Expires: 5/26/20

CARMELITA Q. DELA CRUZ
 P.O. Box 520158, Tinian, MP 96952
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 BY AND FOR THE COMMONWEALTH
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**COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE**

FUNDRAISING EVENT REPORT
FUNDRAISING DATES: _____

IMPORTANT: USE A SEPARATE REPORT FOR EACH FUNDRAISING EVENT.

Candidate Name (Last Name, First Name, MI): <i>Alston, Edwin Palacios</i>	Treasurer Full Name (Last Name, First Name, MI): <i>Mendiola, Wella Eflande</i>
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 the Result Summary of Supporting Schedule FR-A)	0	
2. IN-KIND CONTRIBUTIONS RECEIVED (Total In-Kind Contributions Received from Schedule FR-B. Bring down this value to Line 6 below.)		0
3. CONTRIBUTED PROPERTY RECEIVED (Total Contributed Property Received from Schedule FR-C)		0
4. TOTAL RECEIPTS (Add Lines 1 through 3) (Transfer to Line 2 of Campaign Statement of Account)	0	0
DISBURSEMENTS		
5. FUNDRAISING EXPENSES (Total Fundraising Expenses from Line 4 of Result Summary of Schedule FR-A)		
6. ADJUSTMENTS FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		
7. TOTAL DISBURSEMENTS (Add Lines 5 and 6) (Transfer to Line 7 of Campaign Statement of Account)		
NET CASH AND IN-KIND DISBURSEMENTS	0	0

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

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

Candidate Name (In Full): <i>Adrian Edwin Norberis</i>	Signature of Treasurer: <i>[Signature]</i>	Date: <i>01-18-19</i>
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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 FUNDRAISING EVENT (Transfer this total to Line 1 of Fundraising Event Report) _____
- 4. TOTAL FUNDRAISING EXPENSES (Details of Section 2-Fundraising Expense on the reverse side of this form. Transfer this total to Line 5 of Fundraising Event Report) _____
- 5. NET CASH PROCEEDS (Subtract Line 4 from Line 3) _____

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

FULL NAME OF CONTRIBUTOR	AMOUNT	FULL NAME OF CONTRIBUTOR	AMOUNT
<i>Example: Mr. John Doe</i>	<i>\$ 600.00</i>		
TOTAL PROCEEDS OF CONTRIBUTIONS, IF LAST PAGE OTHERWISE CONTINUE ON NEXT COLUMN	<i>0</i>	TOTAL PROCEEDS OF CONTRIBUTIONS \$500 OR MORE (LAST PAGE ONLY-MUST AGREE WITH LINE 2 ABOVE)	<i>0</i>

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S): _____

PAGE _____ OF _____

Candidate Name (In Full): <i>Alicia E. Polovina</i>	Signature of Treasurer: <i>[Signature]</i>	Date: <i>01-18-19</i>
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**SUPPORTING SCHEDULE FR-B
IN-KIND CONTRIBUTIONS RECEIVED**

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE
<i>Example: ABC Retail</i>	<i>Give away items (250 @ \$5.00)</i>	<i>1,250</i>
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		➔
TOTAL RECEIPTS (IF LAST PAGE ONLY) (Transfer Total to Line 2 of the Fundraising Event Report)		➔ <i>0</i>

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

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE
<i>Example: Island Computers</i>	<i>Old Computer equipment</i>	<i>500</i>
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		➔
TOTAL RECEIPTS (IF LAST PAGE ONLY) (Transfer Total to Line 3 of Fundraising Event Report)		➔ <i>0</i>

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE

GENERAL CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name, MI): <i>Alden, Edwin Palacios</i>	Treasurer Full Name (Last Name, First Name, MI): <i>Mendiola, Wella E.</i>
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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)	<i>3,784.66</i>	
2. IN-KIND CONTRIBUTIONS RECEIVED (Total In-Kind Contributions Received from Schedule GC-B. Bring down this value on Line 7 below)		<i>0</i>
3. CONTRIBUTED PROPERTY RECEIVED (Total Contributed Property Received from Schedule GC-C)		<i>0</i>
4. TOTAL RECEIPTS (Transfer to Line 4 of Campaign Statement of Account)	<i>3,784.66</i>	<i>0</i>
DISBURSEMENTS		
5. GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D)	<i>3,784.66</i>	
6. CONTRIBUTIONS TO OTHER CANDIDATES (Total Contribution to Other Candidates from Schedule GC-E)	<i>0</i>	
7. ADJUSTMENTS FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		<i>0</i>
8. TOTAL DISBURSEMENTS (Transfer to Line 9 of Campaign Statement of Account)	<i>3,784.66</i>	<i>0</i>
NET CONTRIBUTION IN EXCESS OF DISBURSEMENTS	<i>0</i>	<i>0</i>

SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

PAGE ____ OF ____

Candidate Name (in Full): <i>Aldan, Edwin Palacios</i>	Signature of Treasurer: <i>[Signature]</i>	Date: <i>01-18-19</i>
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SUPPORTING SCHEDULE GC-B
IN-KIND CONTRIBUTIONS RECEIVED

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE
<i>Example: ABC Retail</i>	<i>Computer Parts (2 @ \$500)</i>	
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		➔
TOTAL RECEIPTS (IF LAST PAGE ONLY) (Transfer Total to Line 2 of the General Contribution and Expense Report, Summary of Receipts and Disbursements)		➔

SUPPORTING SCHEDULE GC-C
CONTRIBUTED PROPERTY RECEIVED

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE
<i>Example: Island Computers</i>	<i>Old Computer with printer</i>	
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, Summary of Receipts and Disbursements)		➔

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE

MULTI-CANDIDATE
CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name, MI): Oliver, Edwin Polovina	Treasurer Full Name (Last Name, First Name, MI): Wala E. Mendioja
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CONTRIBUTIONS RECEIVED

RECEIVED FROM	DESCRIPTION	AMOUNT
<i>Example: BEST PARTY IN THE LAND</i>	<i>cash donation of Party General and Admin. Expenses</i>	<i>2,000.00</i>
SUB-TOTAL OF CONTRIBUTIONS RECEIVED (THIS PAGE ONLY) (Use additional sheets as necessary)		➔ 0
TOTAL CONTRIBUTIONS RECEIVED (IF LAST PAGE ONLY) (Transfer Total to Line 5 of the Campaign Statement of Account)		➔ 0

EXPENSES

FULL NAME OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT
<i>Example: BEST PARTY IN THE LAND</i>	<i>Allocation of Party General Expenses</i>	<i>1,000.00</i>
SUB-TOTAL OF EXPENSES THIS PAGE ONLY (Use additional sheets as necessary)		➔ 0
TOTAL ALLOCATED EXPENDITURES (IF LAST PAGE ONLY) (Transfer Total to Line 8 of the Campaign Statement of Account)		➔ 0