



**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
1-2-19
SIGNATURE *[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): Dela Cruz, Francisco S.		Office Sought: House of Representatives
Treasurer Name (Last Name, First Name, MI): Dela Cruz, Lisa M.	Preferred Mailing (P.O. Box) Address: P.O. Box 500342, Saipan MP 96950	Telephone: 285-6843

	CASH	IN-KIND
1. BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)		
ADD: RECEIPTS THIS ELECTION PERIOD		
2. RECEIPT FROM FUNDRAISING EVENTS	7,500.00	0
3. MULTI-CANDIDATE CONTRIBUTIONS	0	0
4. RECEIPTS FROM GENERAL CONTRIBUTIONS	550.00	0
5. OTHER RECEIPTS	0	0
6. TOTAL AVAILABLE (Add Lines 1 through 5)	8,050.00	0
LESS: DISBURSEMENTS THIS ELECTION PERIOD		
7. DISBURSEMENTS FOR FUNDRAISING EVENTS	4,912.50	0
8. MULTI-CANDIDATE EXPENSES	0	
9. DISBURSEMENTS FOR GENERAL EXPENDITURES	4,465.67	0
10. OTHER DISBURSEMENTS	0	
11. TOTAL DISBURSEMENTS (Add Lines 7 through 10)	9,378.17	0
12. EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS (Subtract Line 11 from Line 6)	(1,328.17)	0

VERIFICATION

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

I, Francisco S. Dela Cruz, 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] 01/02/19
Signature of Candidate Date (Month, Day, Year)

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

[Notary Stamp] Notary Seal

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

I, Lisa M. Dela Cruz, 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] 01/02/19
Signature of Treasurer Date (Month, Day, Year)

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

[Notary Stamp] 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: 4/4/2019

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: 4/4/2019

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE

FUNDRAISING EVENT REPORT
FUNDRAISING DATES: July 27, 2018

IMPORTANT: USE A SEPARATE REPORT FOR EACH FUNDRAISING EVENT.

Candidate Name (Last Name, First Name, MI): Dela Cruz, Francisco S.	Treasurer Full Name (Last Name, First Name, MI): Dela Cruz, Lisa M.
Name of Fundraising Event: PIC Dinner Fund Raiser for Frank Dela Cruz	Date(s) Held: July 27, 2018

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)	7,500.00	
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)	7,500.00	0
DISBURSEMENTS		
5. FUNDRAISING EXPENSES (Total Fundraising Expenses from Line 4 of Result Summary of Schedule FR-A)	4,912.50	
6. ADJUSTMENTS FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		0
7. TOTAL DISBURSEMENTS (Add Lines 5 and 6) (Transfer to Line 7 of Campaign Statement of Account)	4,912.50	0
NET RECEIPTS AND DISBURSEMENTS (Subtract Line 7 from Line 4)	2,587.50	0

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S): July 27, 2018

PAGE 1 OF 1

Candidate Name (In Full): Francisco S. Dela Cruz	Signature of Treasurer: 	Date: Jan. 2, 2019
------------------------------------------------------------	-----------------------------	------------------------------

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

RESULT SUMMARY

1 TOTAL CASH PROCEEDS FROM INDIVIDUALS WHO CONTRIBUTED LESS THAN \$500	\$ <u>7,500.00</u>
2 TOTAL CASH PROCEEDS FROM INDIVIDUALS WHO CONTRIBUTED MORE THAN \$500 (Details on Section 1 below)	+ <u>0</u>
3 TOTAL CASH PROCEEDS FROM FUNDRAISING EVENT (Transfer this total to Line 1 of Fundraising Event Report)	<u>7,500.00</u>
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)	<u>4,912.50</u>
5 NET CASH PROCEEDS (Subtract Line 4 from Line 3)	<u>2,587.50</u>

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		0
TOTAL PROCEEDS OF CONTRIBUTIONS. IF LAST PAGE OTHERWISE CONTINUE ON NEXT COLUMN	0	TOTAL PROCEEDS OF CONTRIBUTIONS \$500 OR MORE (LAST PAGE ONLY-MUST AGREE WITH LINE 2 ABOVE)	0



IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S): 07/27/2018



PAGE 1 OF 1

Candidate Name (In Full): Francisco S. Dela Cruz	Signature of Treasurer: 	Date: 01/02/2019
-----------------------------------------------------	---------------------------------------------------------------------------------------------------------------	---------------------

**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 @ \$5.00)	\$ 1,250
NONE		0
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) 		0

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

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE
Example: Island Computers	Old Computer with printer	\$ 600
		0
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) 		0

Candidate Name (In Full): FRANCISCO S. DELA CRUZ	Signature of Candidate: 	Date: 01/02/2019
------------------------------------------------------------	-----------------------------	----------------------------

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

RESULT SUMMARY		
1.	TOTAL MONETARY CONTRIBUTIONS FROM INDIVIDUALS WHO CONTRIBUTED LESS THAN \$500	\$ _____
2.	TOTAL MONETARY CONTRIBUTIONS FROM INDIVIDUALS WHO CONTRIBUTED MORE THAN \$500	+ _____
3.	TOTAL MONETARY CONTRIBUTIONS (Transfer to Line 1 of the General Contribution and Expense Report)	_____

FULL NAME OF CONTRIBUTOR	AMOUNT	FULL NAME OF CONTRIBUTOR	AMOUNT
Example: Ms. Jane Doe	\$ 1,500.00		
PAUL ZACK	250.00		
ANDRESINA T. DELA CRUZ	300.00		
TOTAL CONTRIBUTIONS RECEIVED. IF LAST PAGE OTHERWISE CONTINUE ON NEXT COLUMN	550.00	TOTAL CONTRIBUTIONS RECEIVED (LAST PAGE ONLY) (Transfer to Line 2 of Result Summary above)	0

Candidate Name (In Full): FRANCISCO S. DELA CRUZ	Signature of Treasurer: 	Date: 01/02/2019
------------------------------------------------------------	-----------------------------	----------------------------

**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 @ \$5.00)	\$ 1,250
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) ➡		0

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

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE
Example: Island Computers	Old Computer with printer	\$ 600
		0
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) ➡		0

Candidate Name (In Full): FRANCISCO S. DELA CRUZ	Signature of Treasurer: 	Date: 01/02/2019
------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------	----------------------------

**SUPPORTING SCHEDULE GC-D
GENERAL EXPENDITURES**

FULL NAME OF PAYEE OR VENDOR	PARTICULARS/ DESCRIPTION	AMOUNT					
		Food & Drinks	Advertising	Supplies	Fees/Donation	Other	
Example: Marianas Daily	One-page ad		\$ 500				
BANNERS/STICKERS			975.65				
DINNER/LUNCH MEETINGS		1,778.02					
CANDIDATE FEE/OTHER					250.00		
GAS/FUEL				200.00			
T-SHIRTS						1,262.00	
SUB-TOTAL OF PAYMENTS THIS PAGE ONLY (Use additional sheets as necessary)	(Sub-total) ←						
TOTAL GEN. EXPENDITURES (IF LAST PAGE ONLY) (Transfer Total to Line 5 of Gen. Contributions & Exp. Report, Summary of Receipts and Disbursements)	(Total) ←	4,465.67	1,778.02	975.65	200.00	250.00	1,262.00

Candidate Name (In Full): FRANCISCO S. DELA CRUZ	Signature of Treasurer: 	Date: 01/02/2019
------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------	----------------------------

SUPPORTING SCHEDULE GC-E
CONTRIBUTIONS TO OTHER CANDIDATES (EXPENDITURES)

FULL NAME OF PAYEE	DESCRIPTION	AMOUNT
Example: Mr. Winning Candidate Like Me	Fundraising tickets purchased (10 tickets @ \$50)	\$ 500
RALPH TORRES	FUND RAISING TICKET	100.00
ANGEL DEMAPAN	FUND RAISING TICKETS	100.00
IGITOL/MARATITA	FUND RAISING TICKETS	200.00
RALPH TORRES	FUND RAISING TICKETS	200.00
FRANCISCO AGUON	FUND RAISING TICKETS	100.00
JOSEPH P. DL. GUERRERO	FUND RAISING TICKETS	100.00
GREGORIO SABLAN	FUND RAISING TICKETS	50.00
JOVITA TAIMANAO	FUNDRAISING TICKETS	100.00
DAVID M. APATANG	FUNDRAISING TICKETS	100.00
FRANCISCO AGUON	FUNDRAISING TICKETS	100.00
RALPH TORRES	FUNDRAISING TICKETS	200.00
ARNOLD I PALACIOS	FUNDRAISING TICKETS	100.00
JOSEPH LEEPAN GUERRERO	FUNDRAISING TICKETS	100.00
JANET MARATITA	FUNDRAISING TICKETS	100.00
LJ CASTRO	FUNDRAISING TICKETS	50.00
JOSE I ITIBUS	FUNDRAISING TICKETS	100.00
SUB-TOTAL OF EXPENSES THIS PAGE ONLY (Use additional sheets as necessary)		
TOTAL CONTRIBUTIONS TO OTHER CANDIDATES (IF LAST PAGE ONLY) (Transfer Total to Line 6 of General Contribution and Expenses Report. Summary of Receipts and Disbursements)		1,800.00

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

**MULTI-CANDIDATE
CONTRIBUTION AND EXPENSE REPORT**

Candidate Name (Last Name, First Name, MI): DELA CRUZ, FRANCISCO S.	Treasurer Full Name (Last Name, First Name, MI): DELA CRUZ, LISA M.
-------------------------------------------------------------------------------	-------------------------------------------------------------------------------

CONTRIBUTIONS RECEIVED

RECEIVED FROM	DESCRIPTION	AMOUNT
Example: BEST PARTY IN THE LAND	Cash Allocation of Party General Fundraising Proceeds	\$ 20,000
		0
SUB-TOTAL OF CONTRIBUTIONS RECEIVED (THIS PAGE ONLY) <small>(Use additional sheets as necessary)</small>		
TOTAL CONTRIBUTIONS RECEIVED (IF LAST PAGE ONLY) <small>(Transfer Total to Line 3 of the Campaign Statement of Account)</small>		0

EXPENSES

FULL NAME OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT
Example: BEST PARTY IN THE LAND	Allocation of Party General Expenses	\$ 15,000
		0
SUB-TOTAL OF EXPENSES THIS PAGE ONLY <small>(Use additional sheets as necessary)</small>		
TOTAL ALLOCATED EXPENDITURES (IF LAST PAGE ONLY) <small>(Transfer Total to Line 8 of the Campaign Statement of Account)</small>		0