



**ORIGINAL**  
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**  
SIGNATURE *JMG* 1/15/2019

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): <b>DE LEON GUERRERO, JUAN C.</b>	Office Sought: <b>HOUSE OF REPRESENTATIVE-PRECENT 5</b>	
Treasurer Name (Last Name, First Name, MI): <b>SALAS, MAGDALENE MARIA B.</b>	Preferred Mailing (P.O. Box) Address: <b>P.O. BOX 500604, SAIPAN MP 96950</b>	Telephone: <b>670 -234-1948</b>

	CASH	IN-KIND
1. BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)	0.00	0.00
ADD: RECEIPTS THIS ELECTION PERIOD		
2. RECEIPT FROM FUNDRAISING EVENTS	1,425.00	0.00
3. MULTI-CANDIDATE CONTRIBUTIONS	0.00	0.00
4. RECEIPTS FROM GENERAL CONTRIBUTIONS	2,302.00	0.00
5. OTHER RECEIPTS	504.00	0.00
6. TOTAL AVAILABLE (Add Lines 1 through 5)	4,231.00	0.00
LESS: DISBURSEMENTS THIS ELECTION PERIOD		
7. DISBURSEMENTS FOR FUNDRAISING EVENTS	1,425.00	0.00
8. MULTI-CANDIDATE EXPENSES	0.00	0.00
9. DISBURSEMENTS FOR GENERAL EXPENDITURES	2,302.00	0.00
10. OTHER DISBURSEMENTS	504.00	0.00
11. TOTAL DISBURSEMENTS (Add Lines 7 through 10)	4,231.00	0.00
12. EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS (Subtract Line 11 from Line 6)	0.00	0.00

**VERIFICATION**

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

I, JUAN C. DE LEON GUERRERO, 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.

*Jalco*  
Signature of Candidate      Date (Month, Day, Year) 01-15-19

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

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

I, MAGDALENE MARIA B. SALAS, 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.

*MBSalas*  
Signature of Treasurer      Date (Month, Day, Year) 01/15/2019

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

Notary Seal  
**MICHELLE A. CAMACHO**  
P.O. Box 504613, Saipan, MP 96950  
Notary Public Reg. No. 633A  
BY AND FOR THE COMMONWEALTH  
OF THE NORTHERN MARIANA ISLANDS U.S.A.  
My Commission Expires: 4/10/19

Notary Seal  
**MICHELLE A. CAMACHO**  
P.O. Box 504613, Saipan, MP 96950  
Notary Public Reg. No. 633A  
BY AND FOR THE COMMONWEALTH  
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My Commission Expires: 4/10/19

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS  
CAMPAIGN FINANCIAL DISCLOSURE

**FUNDRAISING EVENT REPORT**  
FUNDRAISING DATES: OCTOBER 13, 2018

IMPORTANT: USE A SEPARATE REPORT FOR EACH FUNDRAISING EVENT.

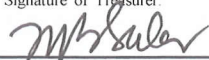
Candidate Name (Last Name, First Name, MI): DE LEON GUERRERO, JUAN C.	Treasurer Full Name (Last Name, First Name, MI): SALAS, MAGDALENE MARIA B.
Name of Fundraising Event: JUAN C DE LEON GUERRERO	Date(s) Held: OCTOBER 13, 2018

**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)	1,425.00	
2. IN-KIND CONTRIBUTIONS RECEIVED (Total In-Kind Contributions Received from Schedule FR-B. Bring down this value to Line 6 below.)		504.00
3. CONTRIBUTED PROPERTY RECEIVED (Total Contributed Property Received from Schedule FR-C)		
4. TOTAL RECEIPTS (Add Lines 1 through 3) (Transfer to Line 2 of Campaign Statement of Account)	1,425.00	504.00
DISBURSEMENTS		
5. FUNDRAISING EXPENSES (Total Fundraising Expenses from Line 4 of Result Summary of Schedule FR-A)	1,425.00	
6. ADJUSTMENTS FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		504.00
7. TOTAL DISBURSEMENTS (Add Lines 5 and 6) (Transfer to Line 7 of Campaign Statement of Account)	1,425.00	504.00
<b>NET RECEIPTS AND DISBURSEMENTS</b> (Subtract Line 7 from Line 4)	0.00	0.00

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

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

Candidate Name (In Full): <b>DE LEON GUERRERO, JUAN C.</b>	Signature of Treasurer: 	Date: <b>JANUARY 15, 2019</b>
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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
Example: Mr. John Doe	\$ 600.00		
CEPEDA TEN RENTAL	240.00		
DETRY PUMPING SERVICE	70.00		
JOHN JOE	100.00		
GAS-COOKING USE	20.00		
TOTAL PROCEEDS OF CONTRIBUTIONS, IF LAST PAGE OTHERWISE CONTINUE ON NEXT COLUMN	430.00	TOTAL PROCEEDS OF CONTRIBUTIONS \$500 OR MORE (LAST PAGE ONLY-MUST AGREE WITH LINE 2 ABOVE)	





COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS  
CAMPAIGN FINANCIAL DISCLOSURE

## GENERAL CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name, MI): <b>DE LEON GUERRERO, JUAN C.</b>	Treasurer Full Name (Last Name, First Name, MI): <b>SALAS, MAGDALENE MARIA B.</b>
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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)	2,302.00	
2. IN-KIND CONTRIBUTIONS RECEIVED (Total In-Kind Contributions Received from Schedule GC-B. Bring down this value to Line 7 below.)		0.00
3. CONTRIBUTED PROPERTY RECEIVED (Total Contributed Property Received from Schedule GC-C)		0.00
4. TOTAL RECEIPTS (Transfer to Line 4 of Campaign Statement of Account)	2,302.00	0.00
DISBURSEMENTS		
5. GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D)	2,302.00	
6. CONTRIBUTIONS TO OTHER CANDIDATES (Total Contribution to Other Candidates from Schedule GC-E)	0.00	
7. ADJUSTMENTS FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		0.00
8. TOTAL DISBURSEMENTS (Transfer to Line 9 of Campaign Statement of Account)	2,302.00	0.00
NET RECEIPTS AND DISBURSEMENTS (Subtract Line 8 from Line 4)	0.00	0.00



Candidate Name (In Full): <b>DE LEON GUERREO, JUAN C.</b>	Signature of Treasurer: 	Date: <b>JANUARY 15, 2019</b>
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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 @ \$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).....		➔

**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
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).....		➔









