



COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE

Report Type:

Final Report

Amendment

OFFICE OF THE PUBLIC AUDITOR
1/2/2019
SIGNATURE *[Signature]*

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

RECEIVED
DATE: 01/10/19

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): <i>Manglona Lucia S.</i>	Office Sought: <i>Rota municipal Council</i>
Treasurer Name (Last Name, First Name, MI): <i>Manglona, Lorita M.</i>	Preferred Mailing (P.O. Box) Address: <i>P.O. BOX 588 Rota M.P. 96951</i>
	Telephone: <i>783-7965</i>

	CASH	IN-KIND
1. BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)	0	0
ADD: RECEIPTS THIS ELECTION PERIOD		
2. RECEIPT FROM FUNDRAISING EVENTS	240.00	0
3. MULTI-CANDIDATE CONTRIBUTIONS	0	0
4. RECEIPTS FROM GENERAL CONTRIBUTIONS	0	378.90
5. OTHER RECEIPTS	0	0
6. TOTAL AVAILABLE (Add Lines 1 through 5)	240.00	378.90
LESS: DISBURSEMENTS THIS 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)	0	0
12. EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS (Subtract Line 11 from Line 6)	0	0

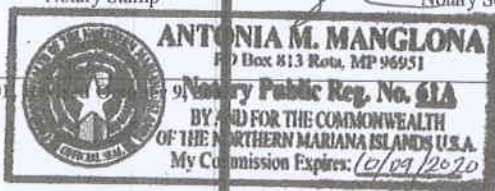
VERIFICATION

Commonwealth of the Northern Mariana Islands)
) s.s.
Island of Rota)
I, Lucia S. Manglona
(Candidate)
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 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.
Lucia Manglona 01/02/19
Signature of Candidate Date (Month, Day, Year)
Subscribed and sworn before me this 02 day of January, 2019

Commonwealth of the Northern Mariana Islands)
) s.s.
Island of Rota)
I, Lorita Manglona
(Treasurer)
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 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.
Lorita Manglona 01/02/19
Signature of Treasurer Date (Month, Day, Year)
Subscribed and sworn before me this 02 day of January, 2019

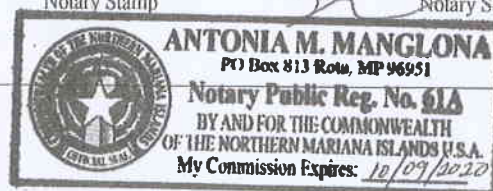
Notary Stamp

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Notary Seal



**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): Manglona, Lucia S.	Treasurer Full Name (Last Name, First Name, MI): Manglona, Loretta M.
Name of Fundraising Event: Dinner Fund raising	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)	240.00
2. IN-KIND CONTRIBUTIONS RECEIVED (Total In-Kind Contributions Received from Schedule FR-B. Bring down this value to Line 6 below.)		378.90
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)	240.00	378.90
DISBURSEMENTS		
5. FUNDRAISING EXPENSES (Total Fundraising Expenses from Line 4 of Result Summary of Schedule FR-A)	0	
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)	0	0
NET RECEIPTS AND DISBURSEMENTS (Subtract Line 7 from Line 4)	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): Manglona, Lucia S.	Signature of Treasurer: <i>[Handwritten Signature]</i>	Date: 1/2/19
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GROSS PROCEEDS AND EXPENSES FROM FUNDRAISING EVENT

- | | |
|--|-----------------|
| 1. TOTAL CASH PROCEEDS FROM INDIVIDUALS WHO CONTRIBUTED LESS THAN \$500 | \$ 0 |
| 2. TOTAL CASH PROCEEDS FROM INDIVIDUALS WHO CONTRIBUTED MORE THAN \$500 (Details on Section 1 below) | + 0 |
| 3. TOTAL CASH PROCEEDS FROM FUNDRAISING EVENT (Transfer this total to Line 1 of Fundraising Event Report) | 240.00 |
| 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) | 240.00 |
| 5. NET CASH PROCEEDS (Subtract Line 4 from Line 3) | 0 |

SECTION 1 - NAMES OF CONTRIBUTORS AND TOTAL AGGREGATE CONTRIBUTIONS

FULL NAME OF CONTRIBUTOR	AMOUNT	FULL NAME OF CONTRIBUTOR	AMOUNT
Example: Mr. John Doe	\$ 600.00		
None	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): _____ PAGE _____ OF _____

Candidate Name (In Full): Manglona Lucia S.	Signature of Treasurer: <i>[Signature]</i>	Date: 11/2/19
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GROSS PROCEEDS AND EXPENSES FROM FUNDRAISING EVENT

FULL NAME OF PAYEE OR VENDOR	PARTICULARS/ DESCRIPTION	AMOUNT																																																	
		Food & Drinks	Advertising	Supplies	Roses/Donation	Other																																													
Rota's BBQ Restaurant	Food	240.00	0	0	0	0																																													
<div style="border: 1px solid black; padding: 5px; margin: 0 auto; width: 80%;"> <p style="text-align: center; font-size: 1.2em;"><u>Da'waves</u></p> <p>SOLD BY _____ DATE 10/13/18</p> <p>NAME Fund raising Dinner</p> <p>ADDRESS \$10.00 per plate</p> <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width:15%;">REGISTER NUMBER</th> <th style="width:45%;">AMOUNT RECEIVED</th> <th style="width:40%;">ACCT. FWD.</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">24</td> <td style="text-align: center;">people</td> <td style="text-align: center;">240.00</td> </tr> <tr><td style="text-align: center;">2</td><td></td><td></td></tr> <tr><td style="text-align: center;">3</td><td></td><td></td></tr> <tr><td style="text-align: center;">4</td><td></td><td></td></tr> <tr><td style="text-align: center;">5</td><td></td><td></td></tr> <tr><td style="text-align: center;">6</td><td></td><td></td></tr> <tr><td style="text-align: center;">7</td><td></td><td></td></tr> <tr><td style="text-align: center;">8</td><td></td><td></td></tr> <tr><td style="text-align: center;">9</td><td></td><td></td></tr> <tr><td style="text-align: center;">10</td><td></td><td></td></tr> <tr><td style="text-align: center;">11</td><td></td><td></td></tr> <tr><td style="text-align: center;">12</td><td></td><td></td></tr> <tr><td style="text-align: center;">13</td><td></td><td></td></tr> <tr><td style="text-align: center;">14</td><td style="text-align: center;">2</td><td style="text-align: center;">240.00</td></tr> </tbody> </table> <p style="font-size: 0.8em; margin-top: 5px;">REDIFORM 5A200</p> </div>							REGISTER NUMBER	AMOUNT RECEIVED	ACCT. FWD.	24	people	240.00	2			3			4			5			6			7			8			9			10			11			12			13			14	2	240.00
REGISTER NUMBER	AMOUNT RECEIVED	ACCT. FWD.																																																	
24	people	240.00																																																	
2																																																			
3																																																			
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12																																																			
13																																																			
14	2	240.00																																																	
TOTAL FUNDRAISING EXPENSES <small>(Transfer Total to Line 4, Result Summary of Schedule FR-A)</small>		(Total) 240.00																																																	

0530321

CUSTOMER ORDER NO.		DEPARTMENT			DATE 11/5/18		
NAME Lucy Manglona							
ADDRESS							
CITY, STATE, ZIP							
SOLD BY		CASH	C.O.D.	CHARGE	ON ACCT.	MDSE. RETD.	PAID OUT SHIP DATE
QUANTITY	DESCRIPTION				PRICE	AMOUNT	
1	11						
2							
3	Red Rice & white Rice					240.00	
4	Pork BBQ						
5	Stir Fry noodles						
6	F. chicken						
7	dumpling						
8	Fish Tillet						
9	custard pie						
10	Tamales						
11							
12							
13							
14							
15							
16							
17	BADILLES ENTERPRISES						
18	ROTA'S BREADSTAIR CATERING SERVICES						
19	BAKERY/238 9504 DEPT. 1001 SHIP						
20	P.O. BOX 1231 ROTA MP 00151 USA					240.00	
RECEIVED BY					TAX		
TEL. NO. 670-532-2539					TOTAL		
MOBILE 670 285-5635-285-9513							

KEEP THIS SLIP FOR REFERENCE

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

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

Candidate Name (In Full): Manglona Lucia S.	Signature of Treasurer: 	Date: 1/2/19
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**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
Adrian Mendiola	(2) cs green tea (21.95)	43.90
Crispin Taranano	(2) plater Pork, (2) plater chicken	80.00
Mateo Santos	(1) Bowl Kelequen	20.00
Beata Songao	(1) Bowl Pickles	15.00
Chong Atalia	(4) plater Sandwiches	80.00
Terry Santos	(2) plater Pastries	40.00
Nick Mendiola	(1) plater Potatoe Salad	30.00
Lorita Manglona	(1) plater Crab meat	20.00
Lorna King	(5) Banners	30.00
Joyce Atalia	(1) plater Rice	20.00
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		➔ 378.90
TOTAL RECEIPTS (IF LAST PAGE ONLY) (Transfer Total to Line 2 of the Fundraising Event Report)		➔ 378.90

**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
	None	0
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		➔ 0
TOTAL RECEIPTS (IF LAST PAGE ONLY) (Transfer Total to Line 3 of Fundraising Event Report)		➔ 0

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE

GENERAL CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name, MI): Manglona, Lucia S.	Treasurer Full Name (Last Name, First Name, MI): Manglona, Lorita M.
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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)	0	
2. IN-KIND CONTRIBUTIONS RECEIVED (Total In-Kind Contributions Received from Schedule GC-B. Bring down this value to Line 7 below.)		1570.00
3. CONTRIBUTED PROPERTY RECEIVED (Total Contributed Property Received from Schedule GC-C)		0
4. TOTAL RECEIPTS (Transfer to Line 4 of Campaign Statement of Account)	0	1570.00
DISBURSEMENTS		
5. GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D)	0	
6. CONTRIBUTIONS TO OTHER CANDIDATES (Total Contribution to Other Candidates from Schedule GC-E)	0	
7. ADJUSTMENTS FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		0
8. TOTAL DISBURSEMENTS (Transfer to Line 9 of Campaign Statement of Account)	0	0
NET RECEIPTS AND DISBURSEMENTS (Subtract Line 8 from Line 4)	0	0

Candidate Name (In Full): Manglona, Lucia S. Signature of Treasurer: [Signature] Date: 1/2/19

**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	None	0
None	0		
TOTAL CONTRIBUTIONS RECEIVED, IF LAST PAGE OTHERWISE CONTINUE ON NEXT COLUMN	0	TOTAL CONTRIBUTIONS RECEIVED (LAST PAGE ONLY) (Transfer to Line 2 of Result Summary above)	0

Candidate Name (In Full): Manglona, Lucia S.	Signature of Treasurer: <i>[Signature]</i>	Date: 1/2/19
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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
Manglona Family	Asst'd Food/drinks	\$ 600.00
Santos Family	Asst'd Food/drinks	\$ 300.00
Taitano Family	Asst'd Food/drinks	\$ 300.00
Barcinas Family	Asst'd Food	\$ 100.00
Anne Provaznik	5 cases water	\$ 120.00
Bangladesh Association	5 cases water/20 bag ice	\$ 150.00
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary).....		➔ 1570.00
TOTAL RECEIPTS (IF LAST PAGE ONLY) (Transfer Total to Line 2 of the General Contribution and Expense Report, Summary of Receipts and Disbursements).....		➔ 1570.00

**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
	None	0
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary).....		➔ 0
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

SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

PAGE ___ OF ___

Candidate Name (In Full): Manglona Lucia S.	Signature of Treasurer: 	Date: 1/2/19
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SUPPORTING SCHEDULE GC-D
GENERAL EXPENDITURES

FULL NAME OF PAYEE OR VENDOR	PARTICULARS/ DESCRIPTION	AMOUNT					
		Food & Drinks	Advertising	Supplies	Fees/Donation	Other	
<small>Example: Marianas Daily</small>	<small>One-page ad</small>		\$ 500				
Candidate Filing Fee	0	0	0	0	\$100.00	0	
SUB-TOTAL OF PAYMENTS THIS PAGE ONLY (Use additional sheets as necessary)	(Sub-total)	0 ←	0	0	0	\$ 100.00	0
TOTAL GEN. EXPENDITURE (IF LAST PAGE ONLY) (Transfer Total to Line 5 of Gen. Contributions & Exp. Report, Summary of Receipts and Disbursements)	(Total)	0 ←	0	0	0	\$ 100.00	0

OFFICIAL CASH RECEIPT

Payment Entered: 7/13/2018

Receipt No.: 003561980

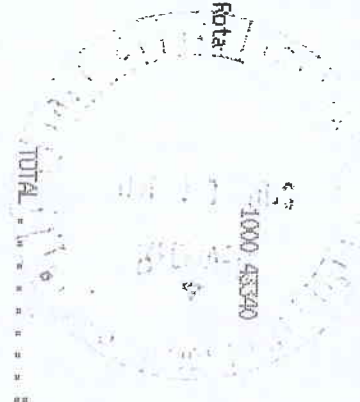
Received From: Hanglona, Lucia S.

Received by : Catherine C Licop-Hendoza 7/13/2018 10:41:39 50210 999

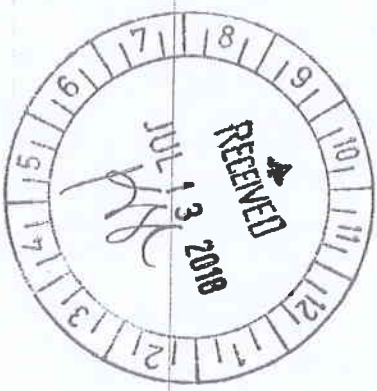
Payment to Account(s):

Candidate Filing Fee 100.00
Municipal Council #7 Rota 100.00

Payment(s) Tendered:
Cash 100.00



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



SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

Candidate Name (In Full):	Signature of Treasurer:	Date:
Manglona, Lucia S.		11/2/19

**SUPPORTING SCHEDULE CC-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
	None	0
SUB-TOTAL OF EXPENSES THIS PAGE ONLY (Use additional sheets as necessary) ...		→ 0
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).....		→ 0

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

**MULTI-CANDIDATE
CONTRIBUTION AND EXPENSE REPORT**

Candidate Name (Last Name, First Name, MI): Manglona, Lucia S.	Treasurer Full Name (Last Name, First Name, MI): Manglona, Lorita M.
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CONTRIBUTIONS RECEIVED

RECEIVED FROM	DESCRIPTION	AMOUNT
Example: BEST PARTY IN THE LAND	Cash Allocation of Party General Fundraising Proceeds	\$ 20,000
	None	0
SUB-TOTAL OF CONTRIBUTIONS RECEIVED (THIS PAGE ONLY) <small>(Use additional sheets as necessary)</small>		→ 0
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
	None	0
SUB-TOTAL OF EXPENSES THIS PAGE ONLY <small>(Use additional sheets as necessary)</small>		→ 0
TOTAL ALLOCATED EXPENDITURES (IF LAST PAGE ONLY) <small>(Transfer Total to Line 8 of the Campaign Statement of Account)</small>		→ 0



OFFICE OF THE PUBLIC AUDITOR
SIGNATURE *[Signature]* 1/2/2019

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE

Report Type:
 Final Report
 Amendment

CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE
 GENERAL SPECIAL ELECTION

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, Middle Initial): Manglona Lucia S.	Office Sought: Rota municipal Council
Treasurer Name (Last Name, First Name, Middle Initial): Manglona Lorita M.	Preferred Mailing (P.O. Box) Address: P.O. BOX 588 Rota M.P. 96951
	Telephone: 783-7965

	CASH	IN-KIND
1. BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)	0	0
2. RECEIPT FROM FUNDRAISING EVENTS	240.00	0
3. MULTI-CANDIDATE CONTRIBUTIONS	0	0
4. RECEIPTS FROM GENERAL CONTRIBUTIONS	0	378.90
5. OTHER RECEIPTS	0	0
6. TOTAL AVAILABLE (Add Lines 1 through 5)	240.00	378.90
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)	0	0

VERIFICATION

Commonwealth of the Northern Mariana Islands)
Island of **Rota**) s.s.
I, **Lucia S. Manglona** 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
Date (Month, Day, Year) **01/02/19**

Subscribed and sworn before me this **02** day of **January**, 20**19**

Commonwealth of the Northern Mariana Islands)
Island of **Rota**) s.s.
I, **Lorita Manglona** 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
Date (Month, Day, Year) **01/02/19**

Subscribed and sworn before me this **02** day of **January**, 20**19**

Notary Stamp
ANTONIA M. MANGLONA
P.O. Box 513 Rota, MP 96951
Notary Public Reg. No. 61A
BY AND FOR THE COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS U.S.A.
My Commission Expires: **10/09/2020**

Notary Stamp
ANTONIA M. MANGLONA
P.O. Box 513 Rota, MP 96951
Notary Public Reg. No. 61A
BY AND FOR THE COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS U.S.A.
My Commission Expires: **10/09/2020**

CFD-001

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): Manglona, Lucia S.	Treasurer Full Name (Last Name, First Name, MI): Manglona, Lunita M.
Name of Fundraising Event: Dinner Fund raising	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)		240.00	
2. IN-KIND CONTRIBUTIONS RECEIVED (Total In-Kind Contributions Received from Schedule FR-B. Bring down this value to Line 6 below.)			378.90
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)		240.00	378.90
DISBURSEMENTS			
5. FUNDRAISING EXPENSES (Total Fundraising Expenses from Line 4 of Result Summary of Schedule FR-A)		0	
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)		0	0
NET RECEIPTS AND DISBURSEMENTS (Subtract Line 7 from Line 4)		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): Manglona, Lucia S.	Signature of Treasurer: <i>[Signature]</i>	Date: 1/2/19
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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	\$ <u>0</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>240.00</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>240.00</u>
5. NET CASH PROCEEDS (Subtract Line 4 from Line 3)	<u>0</u>

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>		
None	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): _____ **PAGE** _____ **OF** _____

Candidate Name (In Full): Mangiona, Lucia S.	Signature of Treasurer: <i>[Signature]</i>	Date: 1/2/19
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SUPPORTING SCHEDULE FR-A
GROSS PROCEEDS AND EXPENSES FROM FUNDRAISING EVENT

SECTION 2 - FUNDRAISING EXPENSES

FULL NAME OF PAYEE OR VENDOR	PARTICULARS/ DESCRIPTION	AMOUNT																																																																																																																								
		Food & Drinks	Advertising	Supplies	Fees/Donation	Other																																																																																																																				
Rotas BBQ Restaurant	Food	240.00	0	0	0	0																																																																																																																				
Da'waves																																																																																																																										
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">SOLD BY</td> <td style="width:30%;">DATE</td> <td colspan="4"></td> </tr> <tr> <td></td> <td style="text-align: center;">10/13/2018</td> <td colspan="4"></td> </tr> <tr> <td colspan="7" style="padding: 5px;">NAME Fund raising Dinner</td> </tr> <tr> <td colspan="7" style="padding: 5px;">\$10.00 per plate</td> </tr> <tr> <td style="width:30%; text-align: center;">REGISTER NUMBER</td> <td style="width:30%; text-align: center;">AMOUNT RECEIVED</td> <td colspan="4" style="text-align: center;">ACCT. FWD</td> </tr> <tr> <td style="text-align: center;">24</td> <td style="text-align: center;">people</td> <td colspan="4" style="text-align: center;">240.00</td> </tr> <tr> <td style="text-align: center;">2</td> <td></td> <td colspan="4"></td> </tr> <tr> <td style="text-align: center;">3</td> <td></td> <td colspan="4"></td> </tr> <tr> <td style="text-align: center;">4</td> <td></td> <td colspan="4"></td> </tr> <tr> <td style="text-align: center;">5</td> <td></td> <td colspan="4"></td> </tr> <tr> <td style="text-align: center;">6</td> <td></td> <td colspan="4"></td> </tr> <tr> <td style="text-align: center;">7</td> <td></td> <td colspan="4"></td> </tr> <tr> <td style="text-align: center;">8</td> <td></td> <td colspan="4"></td> </tr> <tr> <td style="text-align: center;">9</td> <td></td> <td colspan="4"></td> </tr> <tr> <td style="text-align: center;">10</td> <td></td> <td colspan="4"></td> </tr> <tr> <td style="text-align: center;">11</td> <td></td> <td colspan="4"></td> </tr> <tr> <td style="text-align: center;">12</td> <td></td> <td colspan="4"></td> </tr> <tr> <td style="text-align: center;">13</td> <td style="text-align: center;">2</td> <td colspan="4" style="text-align: center;">240.00</td> </tr> <tr> <td style="text-align: center;">14</td> <td></td> <td colspan="4"></td> </tr> </table>							SOLD BY	DATE						10/13/2018					NAME Fund raising Dinner							\$10.00 per plate							REGISTER NUMBER	AMOUNT RECEIVED	ACCT. FWD				24	people	240.00				2						3						4						5						6						7						8						9						10						11						12						13	2	240.00				14					
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TOTAL FUNDRAISING EXPENSES <small>(Transfer Total to Line 4, Resul Summary of Schedule FR-A)</small>		(Total) 240.00																																																																																																																								

0530321

CUSTOMER ORDER NO.		DEPARTMENT		DATE 11/5/18	
NAME <i>Lucy Manglona</i>					
ADDRESS					
CITY, STATE, ZIP					
SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT.	MDSE. RETD.
				PAID OUT	SHIP DATE
QUANTITY	DESCRIPTION			PRICE	AMOUNT
1	//				
2					
3	Red Rice & white Rice				240.00
4	Pork BBQ				
5	Str Fry noodles				
6	F-chicken				
7	dumpling				
8	Fish Tillet				
9	custard pie				
10	Tamales				
11					
12	//				
13					
14					
15					
16					
17	BADILLES ENTERPRISES				
18	TOTAL'S BROS BAKERY & RESTAURANT SERVICES				
19	BAKERY/225 5635-2859 TEL SHOP				
20	P.O. BOX 1231 RIVERVIEW, MI 48069 USA				240.00
RECEIVED BY				TAX	
TEL. NO. 670-542-2359				TOTAL	
MOBILE 670-285-5635-285-9513					

KEEP THIS SLIP FOR REFERENCE

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

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

PAGE _____ OF _____

Candidate Name (In Full): Manglona Lucia S. Signature of Treasurer: [Signature] Date: 1/2/19

**SUPPORTING SCHEDULE FR-B
IN-KIND CONTRIBUTIONS RECEIVED**

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE
<i>Example: ABC Retail</i>	<i>Gift-away purchase (250 x 2.50)</i>	<i>625.00</i>
Adrian Mendiola	(2) cs green tea (21.95)	43.90
Crispin Targano	(2) plater Pork (2) plater chicken	80.00
Mateo Santos	(1) Bowl Kelaguen	20.00
Beata Songao	(1) Bowl Pickles	15.00
Chong Atalia	(4) plater Sandwiches	80.00
Terry Santos	(2) plater Pastries	40.00
Nick Mendiola	(1) plater Potatoe Salad	30.00
Lorita Manglona	(1) plater Crab meat	20.00
Lorna King	(5) Banners	30.00
Joyce Atalia	(1) plater Rice	20.00
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		378.90
TOTAL RECEIPTS (IF LAST PAGE ONLY) (Transfer Total to Line 2 of the Fundraising Event Report)		378.90

**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 with printer</i>	<i>600</i>
	None	0
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		0
TOTAL RECEIPTS (IF LAST PAGE ONLY) (Transfer Total to Line 3 of Fundraising Event Report)		0

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE

GENERAL CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name, MI): Manglona, Lucia S.	Treasurer Full Name (Last Name, First Name, MI): Manglona, Lorita M.
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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)	0	
2.	IN-KIND CONTRIBUTIONS RECEIVED (Total In-Kind Contributions Received from Schedule GC-B. Bring down this value to Line 7 below.)		15 70.00
3.	CONTRIBUTED PROPERTY RECEIVED (Total Contributed Property Received from Schedule GC-C)		0
4.	TOTAL RECEIPTS (Transfer to Line 4 of Campaign Statement of Account)	0	15 70.00
DISBURSEMENTS			
5.	GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D)	0	
6.	CONTRIBUTIONS TO OTHER CANDIDATES (Total Contribution to Other Candidates from Schedule GC-E)	0	
7.	ADJUSTMENTS FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		0
8.	TOTAL DISBURSEMENTS (Transfer to Line 9 of Campaign Statement of Account)	0	0
NET RECEIPTS AND DISBURSEMENTS (Subtract Lines 5 from Lines 4)		0	0

SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

PAGE ___ OF ___

Candidate Name (in Full):	Signature of Treasurer:	Date:
Mangloro, Lucia S.		1/2/19

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
<small>Example: Mrs. Jane I.</small>	\$ 1,500.00	None	0
None	0		
TOTAL CONTRIBUTIONS RECEIVED, IF LAST PAGE OTHERWISE CONTINUE ON NEXT COLUMN	0	TOTAL CONTRIBUTIONS RECEIVED (LAST PAGE ONLY) (Transfer to Line 2 of Result Summary above)	0

SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

PAGE ____ OF ____

Candidate Name (In Full): Manglona, Lucia S.	Signature of Treasurer: <i>[Signature]</i>	Date: 1/2/19
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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
Manglona Family	Asst'd Food/drinks	\$ 600.00
Santos Family	Asst'd Food/drinks	\$ 300.00
Taitano Family	Asst'd Food/drinks	\$ 300.00
Barcinas Family	Asst'd Food	\$ 100.00
Anne Protaznik	5 cases water	\$ 120.00
Bangladesh Association	5 cases water/20 bag ice	\$ 150.00
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		⇒ 1570.00
TOTAL RECEIPTS (IF LAST PAGE ONLY) (Transfer Total to Line 2 of the General Contribution and Expense Report, Summary of Receipts and Disbursements)		⇒ 1570.00

**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
	None	0
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		⇒ 0
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

OWI Tax System Release 6.0
Commonwealth of the Northern Mariana Islands

OFFICIAL CASH RECEIPT
Payment Entered: 7/13/2018
Receipt No.: 003561890

Received From: Mangiona, Lucia S.

Received by : Catherine C Licop-Bandoza 7/13/2018 10:41:38 50710 999

Payment to Account(s):

Candidate Filing Fee 100.00
Municipal Council #7 Rota 100.00

Payment(s) Tendered:

Cash 100.00

TOTAL 100.00

KEEP THIS RECEIPT FOR YOUR RECORDS



COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE

MULTI-CANDIDATE
CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name, MI): Manglona, Lucia S.	Treasurer Full Name (Last Name, First Name, MI): Manglona, Loretta M.
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CONTRIBUTIONS RECEIVED

RECEIVED FROM	DESCRIPTION	AMOUNT
<small>Example: BEST PARTY IN THE ISLANDS</small>	<small>Cash Allocation of Party General Fundraising Proceeds</small>	\$ 20,000
	None	0
SUB-TOTAL OF CONTRIBUTIONS RECEIVED (THIS PAGE ONLY) <small>(Use additional sheets as necessary)</small>		→ 0
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
<small>Example: BEST PARTY IN THE ISLANDS</small>	<small>Allocation of Party General Expenses</small>	\$ 19,000
	None	0
SUB-TOTAL OF EXPENSES THIS PAGE ONLY <small>(Use additional sheets as necessary)</small>		→ 0
TOTAL ALLOCATED EXPENDITURES (IF LAST PAGE ONLY) <small>(Transfer Total to Line 8 of the Campaign Statement of Account)</small>		→ 0

1/2/2019

NOTE:

Other receipts
not provided
are family help.

They only want
to help.

Thank You for
Understanding

Ayana