



**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
 12/28/18
 SIGNATURE *[Signature]*
 Via mail

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): TAISACAN, SIMEON E.	Office Sought: MUNICIPAL COUNCIL
Treasurer Name (Last Name, First Name, MI): ATALIG, MARTIN S.	Preferred Mailing (P.O. Box) Address: PO BOX 492, ROTA, MP 96951 Telephone: 670-788-7870

	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	0.00	0.00
3. MULTI-CANDIDATE CONTRIBUTIONS	0.00	0.00
4. RECEIPTS FROM GENERAL CONTRIBUTIONS	0.00	0.00
5. OTHER RECEIPTS	0.00	0.00
6. TOTAL AVAILABLE (Add Lines 1 through 5)	0.00	0.00
LESS: DISBURSEMENTS THIS ELECTION PERIOD		
7. DISBURSEMENTS FOR FUNDRAISING EVENTS	0.00	0.00
8. MULTI-CANDIDATE EXPENSES	0.00	0.00
9. DISBURSEMENTS FOR GENERAL EXPENDITURES	0.00	0.00
10. OTHER DISBURSEMENTS	100.00	0.00
11. TOTAL DISBURSEMENTS (Add Lines 7 through 10) <i>Candidacy Fee</i>	100.00	0.00
12. EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS (Subtract Line 11 from Line 6)	-100.00	0.00

VERIFICATION

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

I, _____, being duly sworn on oath, depose and say:
 (Candidate)

That I am the individual names 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

12-17-18
 Date (Month, Day, Year)

Subscribed and sworn before me this 17th day of December, 2018

[Signature] Notary Stamp Notary Seal

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

I, _____, being duly sworn on oath, depose and say:
 (Treasurer)

That I am the individual names 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

12-17-2018
 Date (Month, Day, Year)

Subscribed and sworn before me this 17th day of December, 2018

[Signature] Notary Stamp Notary Seal

CFD-001, Revised March 15, 2018

ARVIN C. OGO
 P.O. Box 527, Rota, MP 96951
Notary Public Reg. No. 792A
 BY AND FOR THE COMMONWEALTH
 OF THE NORTHERN MARIANA ISLANDS
 My Commission Expires: 12/24/18

ARVIN C. OGO
 P.O. Box 527, Rota, MP 96951
Notary Public Reg. No. 792A
 BY AND FOR THE COMMONWEALTH
 OF THE NORTHERN MARIANA ISLANDS
 My Commission Expires: 12/24/18

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

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

NONE

PAGE 1 OF 1

Candidate Name (In Full): <i>TALSACAN, SIMEON E</i>	Signature of Treasurer: <i>[Signature]</i>	Date: <i>12/11/18</i>
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SUPPORTING SCHEDULE FR-A
GROSS PROCEEDS AND EXPENSES FROM FUNDRAISING EVENT

RESULT SUMMARY

- TOTAL CASH PROCEEDS FROM INDIVIDUALS WHO CONTRIBUTED LESS THAN \$500 \$ _____
- TOTAL CASH PROCEEDS FROM INDIVIDUALS WHO CONTRIBUTED MORE THAN \$500 (Details on Section 1 below) + _____
- TOTAL CASH PROCEEDS FROM FUNDRAISING EVENT (Transfer this total to Line 1 of Fundraising Event Report) _____
- 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) _____
- NET CASH PROCEEDS _____

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

NONE

Candidate Name (In Full): TAISACAN, SIMEON E	Signature of Treasurer: <i>[Handwritten Signature]</i>	Date: 12/11/18
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**SUPPORTING SCHEDULE GC-A
MONETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS**

FULL NAME OF CONTRIBUTOR	AMOUNT	FULL NAME OF CONTRIBUTOR	AMOUNT
Example: Ms. Jane Doe	\$ 1,500.00		
TOTAL CONTRIBUTIONS RECEIVED, IF LAST PAGE OTHERWISE CONTINUE ON NEXT COLUMN		TOTAL CONTRIBUTIONS RECEIVED (LAST PAGE ONLY) (Transfer to Line 1 of Gen. Contrib. & Exp. Report)	

NONE

Candidate Name (In Full): TAISACAN, SIMÉON E	Signature of Treasurer: 	Date: 12/11/18
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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)		➔

**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)		➔

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

FUNDRAISING EVENT REPORT
FUNDRAISING DATES: NONE

NONE!

IMPORTANT: USE A SEPARATE REPORT FOR EACH FUNDRAISING EVENT.

Candidate Name (Last Name, First Name, MI): <i>TAIBACAN, SIMÉON E</i>	Treasurer Full Name (Last Name, First Name, MI): <i>ATALIG, MARTIN S</i>
Name of Fundraising Event: <i>NONE</i>	Date(s) Held: <i>NONE</i>

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)		
2. IN-KIND CONTRIBUTIONS RECEIVED (Total In-Kind Contributions Received from Schedule FR-B. Bring down this value to Line 6 below.)		
3. CONTRIBUTED PROPERTY RECEIVED (Total Contributed Property Received from Schedule FR-C)		
4. TOTAL RECEIPTS (Transfer to Line 1 of Campaign Statement of Account)		
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 (Transfer to Line 6 of Campaign Statement of Account)		
NET RECEIPTS AND DISBURSEMENTS (Subtract Line 7 from Line 4)	<i>0.00</i>	<i>0000</i>

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE

GENERAL CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name, MI): TAISACAN, SIMEON E	Treasurer Full Name (Last Name, First Name, MI): ATALIG, MARTIN S
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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)	0.00	
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)	0.00	0.00
DISBURSEMENTS		
5. GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D)	0.00	
6. CONTRIBUTIONS TO OTHER CANDIDATES (Total Contribution to Other Candidates from Schedule E)	0.00	
7. ADJUSTMENTS FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		0.00
7. TOTAL DISBURSEMENTS (Transfer to Line 9 of Campaign Statement of Account)	0.00	0.00
NET RECEIPTS AND DISBURSEMENTS (Subtract Line 8 from Line 4)	0.00	0.00