



COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAMPAIGN FINANCIAL DISCLOSURE

CAMPAIGN STATEMENT OF ACCOUNT - CANDIDATE
2009 GENERAL SPECIAL ELECTION

Report Type:
<input checked="" type="checkbox"/> Final Report
<input type="checkbox"/> Amended/Rev.

IMPORTANT: FILE THIS REPORT NOT LATER THAN DECEMBER 28, 2009.
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 Office of the Public Auditor, or they may use their own detailed formats. Should you use an alternative schedule format, you must provide, at a minimum, detailed information as required in the Act.

Candidate Name (Last Name, First Name, MI): TENORIO, MANUEL A.	Office Sought: HOUSE OF REPRESENTATIVES
Transceiver Name (Last Name, First Name, MI): TENORIO, EVELYN S.	Preferred Mailing (P.O. Box) Address: P.O. BOX 50474, SAIPAN, MP 96950
	Telephone: 288-2796

	BALANCE	IN KIND
1. BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)	0	0
2. RECEIPTS FROM FUNDRAISING EVENTS	5,475.00	1,328.10
3. MULTI-CANDIDATE CONTRIBUTIONS	0	1,996.00
4. RECEIPTS FROM GENERAL CONTRIBUTIONS	2,219.03	1,013.10
5. OTHER RECEIPTS	500.00	463.10
6. TOTAL AVAILABLE (Add Lines 1 through 5)	8,234.03	4,901.10
7. DISBURSEMENTS IN THE ELECTION PERIOD		
8. DISBURSEMENTS FOR FUNDRAISING EVENTS	5,361.39	1,328.10
9. MULTI-CANDIDATE EXPENSES	0	1,996.00
10. DISBURSEMENTS FOR GENERAL EXPENDITURES	3,373.27	1,013.10
11. OTHER DISBURSEMENTS	615.64	463.10
12. TOTAL DISBURSEMENTS (Add Lines 7 through 11)	9,350.30	4,901.10
13. EXCESS (DEFICIENCY) OF RECEIPTS OVER DISBURSEMENTS (Subtract Line 12 from Line 6)	(1,116.37)	0

VERIFICATION

Commonwealth of the Northern Mariana Islands Island of <u>Saipan</u> I, <u>Manuel A. Tenorio</u> , being duly sworn deposes and says: (Candidate)	Commonwealth of the Northern Mariana Islands Island of <u>Saipan</u> I, <u>Evelyn S. Tenorio</u> , being duly sworn deposes and says: (Transceiver)
That I, the individual(s) sworn above, that I prepared the foregoing Campaign Statement of Account, that I have read all responsive allegations in preparing this Statement, and that the contents thereof, including the contents of all supporting documents, are a true, full and complete accounting of all contributions received and expenses incurred in conducting the campaign. I understand that providing false information herein may subject me to criminal penalties as provided in the Northern Mariana Islands Election Reform Act of 2000, 1 CMC §6428.	
 Signature of Candidate Subscribed and sworn before me this day of <u>January</u> , 2010 <u>5/6/11</u>  MICHELLE A. CAMACHO P.O. Box 5046-OK, Saipan, MP 9691051 Notary Public My Commission Expires: <u>5/6/11</u>	 Signature of Transceiver Subscribed and sworn before me this day of <u>January</u> , 2010 <u>5/6/11</u>  MICHELLE A. CAMACHO P.O. Box 5046-OK, Saipan, MP 9691051 Notary Public My Commission Expires: <u>5/6/11</u>