

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

FUNDRAISING EVENT REPORT
FUNDRAISING DATES: _____

IMPORTANT: USE A SEPARATE REPORT FOR EACH FUNDRAISING EVENT.

Party Chairperson (Last Name, First Name, MI):	Treasurer Full Name (Last Name, First Name, MI):
Name of Fundraising Event:	Date(s) Held:

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 (Add Lines 1 through 3) (Transfer to Line 2 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 (Add Lines 5 and 6) (Transfer to Line 7 of Campaign Statement of Account)		
NET RECEIPTS AND DISBURSEMENTS (Subtract Line 7 from Line 4)		

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

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

Name of Party Chairperson (In Full):	Signature of Treasurer:	Date:
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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 next page 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		
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)	

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

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

Name of Party Chairperson (In Full):	Signature of Treasurer:	Date:
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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
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)		➡

**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
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		➡
TOTAL RECEIPTS (IF LAST PAGE ONLY) (Transfer Total to Line 3 of the Fundraising Event Report).....		➡

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

GENERAL CONTRIBUTION AND EXPENSE REPORT

Party Chairperson (Last Name, First Name, MI):	Treasurer Full Name (Last Name, First Name, MI):
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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. IN-KIND CONTRIBUTIONS RECEIVED (Total In-Kind Contributions Received from Schedule GC-B. Bring down this value to Line 7 below.)		
3. CONTRIBUTED PROPERTY RECEIVED (Total Contributed Property Received from Schedule GC-C)		
4. TOTAL RECEIPTS (Add Lines 1 through 3) (Transfer to Line 4 of Campaign Statement of Account)		
DISBURSEMENTS		
5. GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D)		
6. CONTRIBUTIONS TO OTHER CANDIDATES (Total Contribution to Other Candidates from Schedule GC-E)		
7. ADJUSTMENTS FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		
8. TOTAL DISBURSEMENTS (Add Lines 5 through 7) (Transfer to Line 9 of Campaign Statement of Account)		
NET RECEIPTS AND DISBURSEMENTS (Subtract Line 8 from Line 4)		

Name of Party Chairperson (In Full):	Signature of Treasurer:	Date:
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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).....		➡

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

**MULTI-CANDIDATE
CONTRIBUTION AND EXPENSE REPORT**

Party Chairperson (Last Name, First Name, MI):	Treasurer Full Name (Last Name, First Name, MI):
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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
SUB-TOTAL OF CONTRIBUTIONS RECEIVED (THIS PAGE ONLY) (Use additional sheets as necessary)		➡
TOTAL CONTRIBUTIONS RECEIVED (IF LAST PAGE ONLY) (Transfer Total to Line 3 of the Campaign Statement of Account)		➡

EXPENSES

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

