

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Killili for Congress

ADDRESS (number and street)

P.O. Box 502924

Check if different
than previously
reported. (ACC)

Saipan

MP

96950

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00469882

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

MP

00

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2022

through

M M / D D / Y Y Y Y
06 / 30 / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Sablan, Andrea C., , Ms.,

Type or Print Name of Treasurer

Signature of Treasurer

Sablan, Andrea C., , Ms.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y
07 / 15 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 9

Write or Type Committee Name
Kilili for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y
 04 / 01 / 2022

To:

M M / D D / Y Y Y Y
 06 / 30 / 2022

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	4000.00	20012.47
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	4000.00	20012.47
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4607.83	29515.64
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	4607.83	29515.64
8. Cash on Hand at Close of Reporting Period (from Line 27).....	76353.43	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
 999 E Street, NW
 Washington, DC 20463

Toll Free 800-424-9530
 Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Kilili for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2022

To:

M M / D D / Y Y Y Y
06 / 30 / 2022

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees**

(i) Itemized (use Schedule A).....

4000.00

10220.37

(ii) Unitemized.....

0.00

292.10

(iii) TOTAL of contributions from individuals ▶

4000.00

10512.47

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

9500.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

4000.00

20012.47

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

12.18

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

4000.00

20024.65

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 9

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4607.83	29515.64
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	4607.83	29515.64

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	76961.26
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4000.00
25. SUBTOTAL (add Line 23 and Line 24).....	80961.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4607.83
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	76353.43

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 9

☒ 11a	☐ 11b	☐ 11c	☐ 11d
12	13a	13b	14
			15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kilili for Congress

A. Full Name (Last, First, Middle Initial)
Palacios, Patricia, , ,

Mailing Address P.O. Box 500172

City Saipan	State MP	Zip Code 96950
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. C

Name of Employer JCTenorio Enterprises	Occupation director
---	------------------------

Receipt For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2022

Transaction ID : SA11AI.8035

Amount of Each Receipt this Period

2000.00

☐ Memo Item
Donation

B. Full Name (Last, First, Middle Initial)
Tenorio, Clarence T., , ,

Mailing Address P.O. Box 1898

City Saipan	State MP	Zip Code 96950
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. C

Name of Employer JCTenorio Enterprises	Occupation director
---	------------------------

Receipt For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2022

Transaction ID : SA11AI.8034

Amount of Each Receipt this Period

2000.00

☐ Memo Item
Donation

C. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. C

Name of Employer	Occupation
------------------	------------

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

--

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4000.00
4000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 9

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kilili for Congress

Full Name (Last, First, Middle Initial)

A. Ace Hardware, Saipan

Mailing Address PO Box 500137

City
SaipanState
MPZip Code
96950Purpose of Disbursement
Materials - Signs

004

Candidate Name

Kilili for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MP

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	2

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

118.38

Transaction ID : SB17.8045

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Red Cross - NMI ChapterMailing Address 1001 S. Airport Rd
Airport RdCity
SaipanState
MPZip Code
96950Purpose of Disbursement
Donation - Event Tickets

012

Candidate Name

Kilili for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MP

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	2	2

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

400.00

Transaction ID : SB17.8044

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CTSI Logistics Company

Mailing Address PO Box 1937

City
SaipanState
MPZip Code
96950Purpose of Disbursement
Shipping Fee - Campaign Material

006

Candidate Name

Kilili for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MP

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	2	2

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

472.50

Transaction ID : SB17.8036

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

990.88

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 9

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kilili for Congress

Full Name (Last, First, Middle Initial)

A. Happy Market

Mailing Address PMB 286 PO Box 10005

City
SaipanState
MPZip Code
96950Purpose of Disbursement
Food and Beverage

007

Candidate Name

Kilili for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MP

District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		26		2022

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

154.95

Transaction ID : SB17.8050

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NMI Democratic Party

Mailing Address P.O. Box 500511

City
SaipanState
MPZip Code
96950Purpose of Disbursement
Candidate Fee - partial

001

Candidate Name

Kilili for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MP

District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2022

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.8039

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. NMI Democratic Party

Mailing Address P.O. Box 500511

City
SaipanState
MPZip Code
96950Purpose of Disbursement
Event Ticket - Blue Banquet

012

Candidate Name

Kilili for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MP

District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2022

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.8042

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2854.95

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 9

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kilili for Congress

Full Name (Last, First, Middle Initial)

A. Star Marianas Air

Mailing Address One Broadway San Jose Village

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2022

City
TinianState
MPZip Code
96952Purpose of Disbursement
Shipping Fee - Signs to Rota

004

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

26.00

Transaction ID : SB17.8046

☐ Memo Item

Candidate Name

Kilili for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MP

District: 00

Full Name (Last, First, Middle Initial)

B. Star Marianas Air

Mailing Address One Broadway San Jose Village

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2022

City
TinianState
MPZip Code
96952Purpose of Disbursement
Shipping Fee - Sign to Tinian

004

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

11.20

Transaction ID : SB17.8047

☐ Memo Item

Candidate Name

Kilili for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MP

District: 00

Full Name (Last, First, Middle Initial)

C. Star Marianas Air

Mailing Address One Broadway San Jose Village

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2022

City
TinianState
MPZip Code
96952Purpose of Disbursement
Shipping Fee

007

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

31.00

Transaction ID : SB17.8051

☐ Memo Item

Candidate Name

Kilili for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MP

District: 00

SUBTOTAL of Disbursements This Page (optional).....▶

68.20

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 9

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kilili for Congress

Full Name (Last, First, Middle Initial)

A. Tropical Instant Press

Mailing Address PO Box 500238

City
SaipianState
MPZip Code
96950Purpose of Disbursement
Flyer

004

Candidate Name

Kilili for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MP

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	2	2

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

260.00

Transaction ID : SB17.8041

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

260.00

TOTAL This Period (last page this line number only).....▶

4174.03