

**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

through

M M /

D D /

Y Y Y Y

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

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
0	7		0	1		2	0	2	1

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	1

	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))....	2692.10	12292.10
(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))	2692.10	12292.10
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5906.48	11695.14
(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))	5906.48	11695.14
8. Cash on Hand at Close of Reporting Period (from Line 27)	86453.56	
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

PAGE 3 / 9

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
07 01 2021

To:

M M / D D / Y Y Y Y
09 30 2021

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).....**

0.00

2500.00

(ii) Unitemized.....

192.10

292.10

(iii) TOTAL of contributions from individuals ▶

192.10

2792.10

(b) Political Party Committees.....

0.00

0.00

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

2500.00

9500.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

2692.10

12292.10

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)..... ▶

2692.10

12304.28

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.....	5906.48	11695.14
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) ►	5906.48	11695.14

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	89667.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2692.10
25. SUBTOTAL (add Line 23 and Line 24).....	92360.04
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5906.48
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	86453.56

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR 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)
IBEW PAC Voluntary Fund

Mailing Address 900 Seventh Street, NW

City Washington, State DC Zip Code 20001

FEC ID number of contributing federal political committee. C C00027342

Name of Employer Occupation

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

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 22 2021

Transaction ID : SA11C.7976

Amount of Each Receipt this Period

2500.00

☐ Memo Item
Donation

B. 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

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)..... ▶

2500.00
2500.00

**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 6 OF 9

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

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NAME OF COMMITTEE (In Full)
Kilili for Congress

Full Name (Last, First, Middle Initial)

A. Fraioli & Associates

Mailing Address PO Box 75214

City
WashingtonState
DCZip Code
20013-5214Purpose of Disbursement
Fundraising Fee

003

Candidate Name
Kilili for CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: MP District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2021

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.7982

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Happy Market

Mailing Address PMB 286 PO Box 10005

City
SaipanState
MPZip Code
96950Purpose of Disbursement
Campaign Event Expense

007

Candidate Name
Kilili for CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: MP District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2021

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

115.95

Transaction ID : SB17.7991

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARK KELLY FOR SENATE

Mailing Address PO BOX 27202

City
TUCSONState
AZZip Code
85726Purpose of Disbursement
Donation

012

Candidate Name
Kilili for CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: MP District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		27		2021

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.7985

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

1365.95

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)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
Kilili for Congress

Full Name (Last, First, Middle Initial)

A. MARTIN HEINRICH FOR SENATE

Mailing Address P.O. BOX 25763

City
ALBUQUERQUEState
NMZip Code
87125Purpose of Disbursement
Donation

012

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
07		27		2021

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.7987

☐ 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
Donation

012

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
08		20		2021

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.7979

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Sablan, Gregorio Kilili, Camacho, Rep.,

Mailing Address P.O. Box 502924

City
SaipanState
MPZip Code
96950Purpose of Disbursement
Campaign Meeting Expense - Food and Bev

007

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
07		15		2021

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

134.60

Transaction ID : SB17.7993

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

2134.60

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)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
Kilili for Congress

Full Name (Last, First, Middle Initial)

A. Sablan, Gregorio Kilili, Camacho, Rep.,

Mailing Address P.O. Box 502924

City
SaipanState
MPZip Code
96950Purpose of Disbursement
Donation Reimbursement

012

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
08		04		2021

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

275.00

Transaction ID : SB17.7992

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sablan, Gregorio Kilili, Camacho, Rep.,

Mailing Address P.O. Box 502924

City
SaipanState
MPZip Code
96950Purpose of Disbursement
Donation Reimbursement

012

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
09		03		2021

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

575.00

Transaction ID : SB17.7990

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sablan, Gregorio Kilili, Camacho, Rep.,

Mailing Address P.O. Box 502924

City
SaipanState
MPZip Code
96950Purpose of Disbursement
Donation Reimbursement / F & B

012

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
09		30		2021

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

455.93

Transaction ID : SB17.7989

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

1305.93

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

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NAME OF COMMITTEE (In Full)
Kilili for Congress

Full Name (Last, First, Middle Initial)

A. TONY CARDENAS FOR CONGRESS

Mailing Address PO BOX 15320

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
Donation

012

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	8		0	1		2	0	2	1

FEC Identification Number

C C00469882

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.7983

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

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

Category/
Type

Candidate Name

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).....▶

1000.00

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

5806.48