ALASKA PUBLIC OFFICES COMMISSION
2024 Public Official Financial Disclosure
Covering Jan. 1– Dec. 31, 2023

Clerk Received Date

APOC Received Date

POFD for Municipal Officers and Candidates

You may only file this paper POFD if you are a municipal officer or municipal candidate and are serving or seeking office in a municipality with a population of less than 15,000
All other filers must file electronically via myAlaska: https://my.alaska.gov/

If you are a municipal candidate and already have a current POFD on file you do not need to file a candidate POFD (AS 15.13.030)

Contact APOC
Anchorage: 2221 E. Northern Lights Blvd., Rm. 128, Anchorage, AK 99508 / 907-276-4176 / Fax 907-276-7018
Juneau: 240 Main St., Rm. 201 / P.O. Box 110222, Juneau, AK 99811 / 907-465-4864 / Fax 907-465-4832
Toll-free in-state: 800-478-4176 / Online: http://doa.alaska.gov/apoc/ E-mail: apoc@alaska.gov

This is a public record – Do not include information such as social security or account numbers

If you have nothing to report in a section, check NONE. Attach additional pages where needed

Filing as a Municipal: ☐ Office Holder ☐ Candidate

Statement Type:

☐ **Candidate POFD:** Due when filing declaration of candidacy or nominating petition.

☐ **Initial POFD:** Due 30 days from appointment.

☐ **Annual POFD:** Due by March 15 each year after appointment.

Municipality or Borough: _____

Position: ☐ Borough/City Mayor ☐ Assembly member ☐ Councilmember ☐ School Board Member

☐ Elected Utility Board Member ☐ Borough/City Manager ☐ Planning or Zoning Commission

NAME: _____

E-MAIL: _____

PHONE: _____ **FAX:** _____

MAILING ADDRESS: _____

SPOUSE'S NAME: _____

NUMBER OF DEPENDENT CHILDREN: _____

SALARIED EMPLOYMENT INCOME

NONE: ☐

Income is anything of value and covers all forms of compensation or benefits from an employer including wages, salary, commissions, tips, bonuses, housing, use of an automobile and deferred compensation. Report each employer who paid you, your spouse, or children more than $1,000. Include amount, dates and terms of employment, and time worked.
Amounts of income may be stated in these ranges: (1) $250-$1,000 gifts only; (2) $1,000-$2,000; (3) $2,000-$5,000; (4) $5,000-$10,000; (5) $10,000-$20,000; (6) $20,000-$50,000; (7) $50,000-$100,000; (8) $100,000-$200,000; (9) $200,000-$500,000; (10) $500,000-$1,000,000; (11) $1,000,000 or more

Earned By: ☐ Filer ☐ Spouse ☐ Child

☐ Full-time ☐ Part-time ☐ Seasonal ☐ Commission ☐ Project ☐ Hourly

Income Amount: $____________________

Dates and amount of time worked: ____________________

Employer: ____________________

Address: ____________________

Description: ____________________

Earned By: ☐ Filer ☐ Spouse ☐ Child

☐ Full-time ☐ Part-time ☐ Seasonal ☐ Commission ☐ Project ☐ Hourly

Income Amount: $____________________

Dates and amount of time worked: ____________________

Employer: ____________________

Address: ____________________

Description: ____________________

Earned By: ☐ Filer ☐ Spouse ☐ Child

☐ Full-time ☐ Part-time ☐ Seasonal ☐ Commission ☐ Project ☐ Hourly

Income Amount: $____________________

Dates and amount of time worked: ____________________

Employer: ____________________

Address: ____________________

Description: ____________________

SELF-EMPLOYMENT INCOME

NONE: ☐

List each source of self-employment income over $1,000. See AS 39.50.200(10), source of income, 2 AAC 50.799(a), definition of self-employment, 2 AAC 50.695, reporting deferred income; and 2 AAC 50.700 for details. Disclose each client, customer or business that paid you and/or your family members more than $1,000. Self-employment includes sole proprietors, partnerships, limited liability companies and professional corporations. Disclose income from corporations in which the filer and/or family members, hold a controlling interest (2 AAC 50.700(b)). Exemptions: To obtain an exemption You must file a written request and receive an exemption from the commission (2 AAC 50.775, 2 AAC 50.821).

Earned By: ☐ Filer ☐ Spouse ☐ Child

☐ Full-time ☐ Part-time ☐ Seasonal ☐ Commission ☐ Project ☐ Hourly

Income Amount: $ _____

Dates worked: _____ Amount of time worked: _____

Business name: _____

Client name and address: _____

Client name and address: _____

Description of services: _____

Earned By: ☐ Filer ☐ Spouse ☐ Child

☐ Full-time ☐ Part-time ☐ Seasonal ☐ Commission ☐ Project ☐ Hourly

Income Amount: $ _____

Dates worked: _____ Amount of time worked: _____

Business name: _____

Client name and address: _____

Client name and address: _____

Description of services: _____

RENTAL INCOME

NONE: ☐

If any person paid you and/or your family members more than $1,000 in rent during the preceding calendar year, report the name of the person and amount paid. If the property is managed by a person other than the filer or a family member, list the manager's name. Disclose the location of the property under Real Property Interests.

OWNER:	TENANT NAMES	AMOUNT
☐ **Filer** ☐ **Spouse** ☐ **Child** ☐ **Co-Owners**		

DIVIDEND AND INTEREST INCOME

NONE: ☐

If more than $1,000, disclose dividends, interest and other distributions of earnings from a business or investment. Include dividends or interest from bank accounts, capital gains, money market accounts, certificates of deposit, and Native corporation dividends. PFDs are only applicable if more than $1,000.

RECIPIENT	SOURCE	AMOUNT
☐ Filer ☐ Child ☐ Spouse		
☐ Filer ☐ Child ☐ Spouse		
☐ Filer ☐ Child ☐ Spouse		
☐ Filer ☐ Child ☐ Spouse		
☐ Filer ☐ Child ☐ Spouse		
☐ Filer ☐ Child ☐ Spouse		
☐ Filer ☐ Child ☐ Spouse		

OTHER INCOME

NONE: ☐

List source and amount of income over $1,000 not listed elsewhere on this form, including sale of goods or property, taxable capital gains, pensions, retirement cash-outs, government entitlements, alimony or child support payments, honoraria and any other payments not otherwise accounted for.

RECIPIENT	SOURCE	AMOUNT
☐ Filer ☐ Child ☐ Spouse		
☐ Filer ☐ Child ☐ Spouse		
☐ Filer ☐ Child ☐ Spouse		
☐ Filer ☐ Child ☐ Spouse		

GIFTS WORTH MORE THAN $250

NONE: ☐

Include travel expenses, discounts not available to the public, loans forgiven or paid by a third party. Do not report gifts from spouse, domestic partner, parent, dependent child, sibling, grandparent, aunt, uncle, niece or nephew.

RECIPIENT	DESCRIPTION	SOURCE	VALUE
☐ Filer ☐ Child ☐ Spouse			
☐ Filer ☐ Child ☐ Spouse			
☐ Filer ☐ Child ☐ Spouse			

BUSINESS INTERESTS

NONE: ☐

Report businesses in which the filer or family member: 1) Served as stockholder, owner, officer, director, partner, proprietor, employee, or held an interest. 2) Had ownership interests of more than $1,000 in a publicly traded corporation, a business, shares in non-publicly traded corporations, sole proprietorships, or limited liability companies. Include options to buy, non-profit organizations, corporations, businesses, associations, and trade groups.

☐ Filer ☐ Spouse ☐ Child Position/Type of interest: _____

Business name: _____

Address: _____

Description: _____

☐ Filer ☐ Spouse ☐ Child Position/Type of interest: _____

Business name: _____

Address: _____

Description: _____

☐ Filer ☐ Spouse ☐ Child Position/Type of interest: _____

Business name: _____

Address: _____

Description: _____

REAL PROPERTY INTERESTS

NONE: ☐

A primary residence or recreational property held for personal use may be described only by zip code (2 AAC 50.720). **(Enter 'Not Reported' for address if this applies to you.)** Report the nature of the interest held in the property; including fee simple ownership, tenancy in common, general or limited partnership, and holder of an option to purchase. If property is jointly owned, check applicable boxes.

Owner(s): ☐ Filer ☐ Spouse ☐ Child ☐ Co-owner: _____

Address or description and zip-code: _____

Ownership interest: _____

Owner(s): ☐ Filer ☐ Spouse ☐ Child ☐ Co-owner: _____

Address or description and zip-code: _____

Ownership interest: _____

Owner(s): ☐ Filer ☐ Spouse ☐ Child ☐ Co-owner: _____

Address or description and zip-code: _____

Ownership interest: _____

TRUSTS, RETIREMENT ACCOUNTS, OR OTHER BENEFICIAL INTERESTS NONE: ☐

Report each trust, retirement account or beneficial interest that exceeded $1,000 during the reporting period, including a retirement plan, employee pension plans, profit-sharing, family, or education trusts, deferred compensation plans, annuity plans or any other similar arrangements intended to provide future income for the filer and/or family member. Identify individual investments accounts if you and/or family members manage or personally control the investments.

Owned By: ☐ Filer ☐ Spouse ☐ Child Percent Owned: _____

Managed By: _____

Fund or Companies: _____

Owned By: ☐ Filer ☐ Spouse ☐ Child Percent Owned: _____

Managed By: _____

Fund or Companies: _____

Owned By: ☐ Filer ☐ Spouse ☐ Child Percent Owned: _____

Managed By: _____

Fund or Companies: _____

LOANS, LOAN GUARANTEES, AND DEBTS OVER $1,000 NONE: ☐

Report each creditor, lender or guarantor to whom more than $1,000 was owed during the reporting period. List financial obligations, including property owned or sold during the reporting period; loans that have been guaranteed; delinquent taxes; alimony; child support payments; medical bills; boat and vehicle loans; business and personal loans; escrows; student loans; signature loans and promissory notes. Loans include secured, unsecured and contingent loans. Do not list credit card obligations or revolving charge accounts.

Debtor: ☐ Filer ☐ Spouse ☐ Child

Type: ☐ Lender ☐ Creditor ☐ Guarantor Name: _____

Debtor: ☐ Filer ☐ Spouse ☐ Child

Type: ☐ Lender ☐ Creditor ☐ Guarantor Name: _____

Debtor: ☐ Filer ☐ Spouse ☐ Child

Type: ☐ Lender ☐ Creditor ☐ Guarantor Name: _____

GOVERNMENT CONTRACTS AND OFFERS TO CONTRACT

NONE: ☐

List contracts, bids and offers to contract with the state or any state or municipal agency or entity. Report contract interests as individual, sole proprietor, family member, partnership, professional corporation, limited liability company, or through a corporation in which filer or family member/s held a controlling interest.

Contractor: ☐ Filer ☐ Spouse ☐ Child Type of Interest: _____

☐ Bid ☐ Offer ☐ Held Contract ID: _____

Contracting Agency: _____

Description: _____

NATURAL RESOURCE LEASES

NONE: ☐

List mineral, timber, oil and gas leases – held, bid or offered. Report lease interests as individual, sole proprietor, family member, partnership, professional corporation, limited liability company, or corporation in which you and/or a family member held a controlling interest.

Leaseholder: ☐ Filer ☐ Spouse ☐ Child Type of Interest: _____

☐ Bid ☐ Offer ☐ Held Lease ID: _____

Description: _____

CERTIFICATION

I certify under penalty of perjury that the foregoing is true and the information in this disclosure statement is, to the best of my knowledge, true, correct and complete. A person who knowingly makes a false sworn certification is guilty of perjury.

SIGNATURE: _____

_____ _____

PRINTED NAME **DATE SIGNED**

Filers are solely responsible for timely filing complete and accurate forms

File this POFD with the municipal clerk where you hold or seek office.

THIS IS A PUBLIC DOCUMENT