Instructions

PUBLIC OFFICIALS MUST FILE:

- Initial Statements: Due within **30 days** after taking office as a public official.
- Annual Statements: Due annually on **March 15th**; cover activity from the prior calendar year.
- Final Statements: Due within **90 days** after leaving office; cover any period during the official's service for which the public official has not already filed a statement.

CANDIDATES MUST FILE:

- State Candidates: File with Division of Elections, when filing for candidacy.
- Municipal Candidates: File a printed copy of this report with Municipal Clerk when filing for candidacy; check Municipal Clerk for deadlines.

Please **contact APOC staff** with any questions about this form:

- Email: doa.poc.apocforms_feedback@alaska.gov
- Phone: (800) 478-4176 Statewide Toll Free

(907) 276-4176 Anchorage

(907) 465-4864 Juneau

• In Person: 2221 E. Northern Lights Blvd., Rm. 128, Anchorage, AK 99508 240 Main St., Rm. 201, Juneau, AK 99811

Before beginning this form:

- 1. Please collect any necessary financial documentation that will assist you with filling out this form. For example, you will need information regarding income, property, and other assets.
- 2. Please be aware that it may take a significant amount of time to complete this form and plan accordingly. Once you begin, you may save the data you have already entered by clicking the "Save & resume later" button at the bottom of the screen.
- 3. Please remember that once submitted this form becomes a public document. Do not include confidential information such as social security numbers and bank account numbers.

THIS REPORT IS A SWORN STATEMENT. YOUR SIGNATURE ON THE LAST PAGE CERTIFIES THAT THIS DISCLOSURE IS TRUE, CORRECT and COMPLETE.

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Note: Only financial statements for state and municipal candidates, legislators, the Governor, and Lt. Governor are publicly available directly from the Commission's website. Financial statements for other public officials are available upon written request.

Purpose of Filing

What type of	position?
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© State Office Holder ○ State Candidate ○ Municipal Office Holder ○ Municipal Candidate ○ Judicial Retention Candidate

Branch:	Board or Commission:
Board/Commission Member	
© Executive	
○Judicial	
○ Legislative	
Report Type:	
CANDIDATE STATEMENT: D	Oue when filing declaration of candidacy.
• INITIAL STATEMENT: Due 30	o days from appointment for new public officials (and annually thereafter.)
OANNUAL STATEMENT: Due b	by March 15th - for incumbent officials.
○ FINAL STATEMENT: Due 90	days after leaving office.
Year of Report: Report Date	e From: Report Date To:
2020 • 1/1/2019	12/31/2019

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State Office Holder - Board/Commission Member - Alaska Public Offices Commission - Report From: 1/1/2019 To: 12/31/2019

Contact Information

First Name:				
Last Name:				
Address:				
City:	State:	Zip Code:	Country:	
C · · · · · · · · · · · ·	Alaska	~	United States	•
Contact Phone:	Alternate Phone:			
Fax:				
E-Mail:				
Partner Type: ○ Spouse ○ Domestic Partner ○ None	/ Not Applicable			
Dependent Children: 0 Note: Includes Stepchildren and Adop		_	ren living with you: for Legislative Officials	

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State Office Holder - Board/Commission Member - Alaska Public Offices Commission - Report From: 1/1/2019 To: 12/31/2019

Schedule A: Sources of Income over \$1,000

COMPENSATION

NONE / Not Applicable ⇒ □

- Income means anything of value and covers all forms of compensation or benefits received from an employer; compensation or benefits include wages, salary, commissions, tips, bonuses, housing, use of an automobile and deferred compensation.
- Report each employer who paid you, your spouse, domestic partner or children covered by reporting requirements more than \$1,000. Include amount of income, dates of employment, terms of employment, amount of time worked. Describe the work performed in sufficient detail to make it clear to a person of ordinary understanding.
- The amount of any income more than \$1,000, may be stated in a range rather than as an exact amount. 2 AAC 50.685

Edit/Delete	Earned By	Employer	Time	Description	Total Income
Earned By: ○ Filer ○ Spous	e	○ Child		Total Income: Select One	¥
Employment Ty	pe: ○Full-time ○ Hourly ○	Part-time ○ Project	○ Seasona		
Date From:	Date To:	Time Worked (mon	ths/days/ho	ours):	
Employer:					
Description:					
	You must finish adding	g or cancel this actio	n before na	vigating away from this	step.

Save & Resume Later

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State Office Holder - Board/Commission Member - Alaska Public Offices Commission - Report From: 1/1/2019 To: 12/31/2019

Schedule A: Sources of Income over \$1,000

SELF-EMPLOYMENT COMPENSATION

- NONE / Not Applicable → □
- List each **source (client, customer or business)** of self-employment income over \$1,000 by name and amount. Income means anything of value and covers all forms of compensation, including deferred income and attorney contingency fees. For clarification, 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 50.704 reporting income from attorney contingency fee agreements.
- Disclose each client, customer or business that paid you, your spouse/domestic partner or child more than \$1,000. Self-employment includes sole proprietors, partnerships, limited liability companies, and professional corporations. See 2 AAC 50.700(a)
- Disclose income from corporations in which the filer, alone or in combination with one or more family members, holds a controlling interest as defined under 2 AAC 50.700(b)
- Exemptions: To obtain an exemption, you must qualify under the law, you must file a written request, and you must receive an exemption from the commission. Exemption rules: AS 39.50.035, 2 AAC 50.775, 2 AAC 50.821. An exemption request must be filed before the due date of the report for which the exemption is requested.
- For detailed information on source of income see AS 39.50.200(10) "source of income".

Edit/Delete	Earned By	Business	Time	Description	n To	tal Income
Earned By:				Total Income:		
○ Filer ○ Spous	se O Domestic Partner	○ Child		Select One		~
Employment Ty	/pe:					
	Full-time O Hourly O	Part-time ○ Projec	t ⊖Seasona	I		
Date From:	Date To:	Time Worked (moi	nths/days/ho	ours):		
			-			
Business Name	e:					
						//
	/ho paid more than \$1,0					and click the
	button. A client is not a	idded until there is a			name.	<u> </u>
	button. A client is not a				name. Amo	unt
	button. A client is not a	idded until there is a			name.	unt
blue 'Add Client'	button. A client is not a	idded until there is a			name. Amo	unt
	button. A client is not a	idded until there is a			name. Amo	unt
blue 'Add Client'	button. A client is not a	idded until there is a			name. Amo	unt
blue 'Add Client'	button. A client is not a	idded until there is a			name. Amo	unt
blue 'Add Client'	button. A client is not a	idded until there is a	a red 'Remov	e' button by their	Amo \$1,000 - \$2,000	unt

Save & Resume Later

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State Office Holder - Board/Commission Member - Alaska Public Offices Commission - Report From: 1/1/2019 To: 12/31/2019

Schedule A: Sources of Income over \$1,000

RENTAL INCOME

NONE / Not Applicable ⇒ □

• If any person paid more than \$1,000 in rent during the preceding calendar year, report the name of the person and the amount of the rent paid, and, if the property is managed by a person other than the filer or a family member of the filer, additionally report the manager's name. 2 AAC 50.725 Disclose the location of the property under "Real Property Interests".

Edit/Delete	Owner	Tenant	Amount
Owner(s): □ Filer □ Spouse □ Domestic Partn	er □ Child	Amount: Select One	~
Tenant Name:			
Manager's Name (if applicable):			
You must finish add	ding or cancel this action b	pefore navigating away from th	nis step.

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State Office Holder - Board/Commission Member - Alaska Public Offices Commission - Report From: 1/1/2019 To: 12/31/2019

Schedule A: Sources of Income over \$1,000

DIVIDENDS, INTEREST AND OTHER BUSINESS/INVESTMENT DISTRIBUTIONS OF EARNINGS

 $\overline{NONE / Not Applicable} \Rightarrow \Box$

- Please remember to add your PFDs to this section if applicable.
- Disclose source and amount of income **over \$1,000** received from dividends, interest and other distributions of earnings from a business or investment
- Include dividends or interest **received** from bank accounts, capital gains, money market accounts, certificates of deposit, Native corporation dividends, Permanent Fund dividends
- Note: This section refers only to amounts received during the reporting period; there is a separate section for disclosing business interest information.

Edit/Delete	Recipient	Source	Amount
Recipient:		Amount:	
○ Filer ○ Spouse ○ Domestic Pa	artner ○ Child	Select One	•
Source:			
			/
You must finish	adding or cancel this action befo	ore navigating away from thi	s step.

Save & Resume Later

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State Office Holder - Board/Commission Member - Alaska Public Offices Commission - Report From: 1/1/2019 To: 12/31/2019

Schedule A: Sources of Income over \$1,000

GIFTS WORTH MORE THAN \$250

 $\overline{NONE / Not Applicable} \Rightarrow \Box$

- Public Official Filers ONLY Legislative filers are **Exempt**
- Legislators must submit more detailed disclosure reports to the Legislative Ethics Committee.
- Report all gifts worth more than \$250 (including gifts from a single source with a cumulative value of more than \$250). Include travel expenses, discounts not available to the public, loans forgiven or loans paid by a third party. Do not report gifts from spouse, domestic partner, parent, dependent child, sibling, grandparent, aunt, uncle, niece or nephew.

Recipient	Source	Description	Value
		Value:	
nestic Partner		Select One	~
			//
st finish adding or cancel th	nis action before nav	vigating away from this step.	
	nestic Partner Child	nestic Partner ○ Child	Value:

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State Office Holder - Board/Commission Member - Alaska Public Offices Commission - Report From: 1/1/2019 To: 12/31/2019

Schedule A: Sources of Income over \$1,000

OTHER INCOME

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

Edit/Delete	Recipient	Source	Amount	
Recipient:		Amount:		
○ Filer ○ Spouse ○ Domestic P	artner ○ Child	Select One	•	
Source:				
				//
You must finish	adding or cancel this action before	ore navigating away from this	step.	

Save & Resume Later

 $\overline{NONE / Not Applicable} \Rightarrow \Box$

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^{***}Note this document is up to date as of September 14, 2020. Some changes may have occurred since ***

State Office Holder - Board/Commission Member - Alaska Public Offices Commission - Report From: 1/1/2019 To: 12/31/2019

Schedule B: Business Interests

BUSINESS INTERESTS

NONE / Not Applicable ⇒□

- Report business interests even if they were NOT a source of income, including businesses in which the filer or family member (spouse, domestic partner, dependent children and, <u>for legislative branch filers ONLY</u>, nondependent children living with the filer):
 - 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.
 - 3. Had any other ownership interest in a business, including shares in non-publicly traded corporations, sole proprietorships, limited liability companies. Include options to buy.
 - 4. Include non-profit organizations, corporations, businesses, associations, trade groups.
- If the business was a source of income over \$1,000, it must also be reported in Schedule A.

Edit/Delete	Interest Owner	Business	Position / In	terest Type Description	í
Interest Owner	: se □ Domestic Partner □ C	Child			
	e of Interest(s): □ Owner □ Director □ Par	tner □ Proprietor 〔	□ Employee □ Held I	nterest □ Other	
Business Nam	e:				
Business Addı	ress:				
City:		State:	Zip Code:	Country:	
		Alaska	~	United States	~
	You must finish adding or	cancel this action	n before navigating a	way from this step.	

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^{***}Note this document is up to date as of September 14, 2020. Some changes may have occurred since***

State Office Holder - Board/Commission Member - Alaska Public Offices Commission - Report From: 1/1/2019 To: 12/31/2019

Schedule C: Real Property Interests

REAL PROPERTY INTERESTS

NONE / Not Applicable \Rightarrow □

- Report an interest in real property by the address or other legal description of the property, except that a primary residence or recreational property held for personal use may be described only by zip code. Enter 'Not Reported' for Address and City if this applies to you.
- Report the nature of the interest that the filer or family member held in the property; the nature of interests to be reported includes fee simple ownership, tenancy in common, general or limited partnership interest, and holder of an option to purchase. If property is jointly owned, check all boxes that apply.

Edit/Delete	Owner(s)	Address or Le	gal Description	Ownership Interest
Owner(s): ☐ Filer ☐ Spous	se 🗆 Domestic Par	tner □ Child □ Other		
Street Address	or Legal Descrip	tion:		
City:		State:	Zip Code:	
		Alaska	~	*
Country:				
United States	~			
Ownership Inte		on □ General Partnership	□Limited Partnership □	Other
	You must finish a	dding or cancel this action	before navigating away	from this step.

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State Office Holder - Board/Commission Member - Alaska Public Offices Commission - Report From: 1/1/2019 To: 12/31/2019

Schedule D: Beneficial Interests

TRUSTS, RETIREMENT ACCOUNTS OR OTHER BENEFICIAL NONE / Not Applicable ⇒ □ INTERESTS

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

Edit/Delete	Owner(s)	Managed By	Interest Holder	Fund or Companies	Percent
Owner(s): □ Filer □ Spo	use 🗆 Domestic	Partner □ Child		Percent C	Wwned: %
Name of Inter	rest Holder:				
Managed By:					
Identify Fund	or Companies				
	You must fini	sh adding or cancel	this action before naviga	ting away from this step.	

Save & Resume Later

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State Office Holder - Board/Commission Member - Alaska Public Offices Commission - Report From: 1/1/2019 To: 12/31/2019

Schedule E: Loans and Debts

LOANS, LOAN GUARANTEES & DEBTS OVER \$1,000

NONE / Not Applicable →

- Report each creditor or lender to whom more than \$1,000 was owed during the reporting period.
- Report guarantor of each loan.
- List financial obligations, including mortgages on 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.
- Legislative branch filers must report additional details: original amount of the obligation, the current balance owed, interest rate, length of the loan and whether a written agreement exists for a creditor or lender who:
 - Lobbies or hired lobbyists
 - Had contracts or sought contracts worth more than \$10,000 with any state agency
 - Was a municipal or local government entity
 - Was affected financially in an amount exceeding \$1,000 by an act of the legislature or state agency decision, including actions affecting professional or occupational licenses; natural resource permits or quotas; assessments; tax rates; health, safety or environmental standards; insurance or business practices.

Edit/Delete	Owner	Debt Type	Name		
Debtor: ☐ Filer ☐ Spouse ☐ Domestic Partner ☐ Child Name:		Debt Type: ○ Creditor ○ Guaranto	Debt Type: ○ Creditor ○ Guarantor ○ Lender		
You must finish adding or cancel this action before navigating away from this step.					

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State Office Holder - Board/Commission Member - Alaska Public Offices Commission - Report From: 1/1/2019 To: 12/31/2019

Schedule F: Leases

GOVERNMENT CONTRACTS AND OFFERS TO CONTRACT — NONE / Not Applicable ⇒ □

- List all 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 members held a controlling interest.

Edit/Delete	Contract Holder(s)	Contract ID	Contract Agency	Status	Type of Interest	Description
Contract H	. ,		consuct igonor	- Claude		Zecomplien
Type of Int	terest:					
Status:			Contract ID (nam	e/numbe	r):	
\bigcirc Bid \bigcirc H	eld ○ Offer					
Contractin	ng Agency:					
Contract D	Description:					
						//
	You must finish ad	lding or cancel t	his action before navig	ating away	/ from this step.	

Save & Resume Later

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State Office Holder - Board/Commission Member - Alaska Public Offices Commission - Report From: 1/1/2019 To: 12/31/2019

Schedule F: Leases

NATURAL RESOURCE LEASES

NONE / Not Applicable \Rightarrow □

- List natural resource leases including mineral, timber, oil and gas leases held, bid or offered during the reporting period.
- Report lease interests as individual, sole proprietor, family member, partnership, professional corporation, limited liability company; or corporation in which you or family (individually or together) held controlling interest.

Edit/Delete	Lease Holder(s)	Lease ID	Status	Type of Interest	Description
Lease Holder(s	s): se □ Domestic Partner □ Ch	nild			
Type of Interes	t:				
Note this	document is up to date as o	of September 14,	2020. Some	changes may have occurre	ed since
Status: Ridy: Helds: Lease Descrip	alastel.gov/resources tion:		se ID (name rds@alaska.g		Example
	You must finish adding or	cancel this action	n before naviç	gating away from this step.	//

Save & Resume Later

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State Office Holder - Board/Commission Member - Alaska Public Offices Commission - Report From: 1/1/2019 To: 12/31/2019

Schedule G

CLOSE ECONOMIC ASSOCIATIONS

NONE / Not Applicable $\Rightarrow \square$

You are exempt from filling out this information. Please continue by clicking "Next"

- EXEMPT:
 - 1. Municipal and local officials are exempt from reporting close economic associations.
 - 2. Members of state boards and commissions are exempt from reporting close economic associations.
- STATE PUBLIC OFFICIALS: Disclose financial relations with legislators, other public officials and lobbyists.
- <u>LEGISLATIVE BRANCH:</u> Disclose financial relations with public officials, lobbyists, other legislators, and legislative employees. Report close economic association detailed information to the Legislative Ethics Committee.
- **CLOSE ECONOMIC ASSOCIATION** means a financial relationship between public officials, legislators and lobbyists, including shared interests in a business, property, association, partnership, corporation or LLC.
- **CHANGES:** Report new close economic associations within 60 days.

No Associations Found.

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^{***}Note this document is up to date as of September 14, 2020. Some changes may have occurred since***

State Office Holder - Board/Commission Member - Alaska Public Offices Commission - Report From: 1/1/2019 To: 12/31/2019

Schedule G

FILERS WITH A LOBBYIST SPOUSE or PARTNER

NONE / Not Applicable $\Rightarrow \square$

You are

exempt from filling out this information. Please continue by clicking "Next"

- **EXEMPT:** Local officials and members of state boards and commissions are exempt. Check NONE.
- <u>STATE PUBLIC OFFICIALS</u> with a lobbyist spouse or domestic partner: Report names and addresses of each employer of the lobbyist and the total monetary value received from each of the lobbyist's employers.
- <u>LEGISLATIVE BRANCH filers with a lobbyist spouse or domestic partner:</u> Disclose employer of lobbyist and compensation, and report details to the Legislative Ethics Committee.
- **CHANGES:** Report changes in lobbyist's employer within 48 hours of the change.

No Employers For	und.
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- The next page is a review page that asks the filer to review for accuracy, all the information they have entered.
- The final page is the signing ceremony where the filer will electronically sign and submit their form by entering their myAlaska password.
- **Note:** Only financial statements for state and municipal candidates, legislators, the Governor, and Lt. Governor are publicly available directly from the Commission's website. Financial statements for other public officials are available upon written request.