Municipal Clerk's Office

632 West Sixth Avenue, Suite 250 Anchorage, Alaska 99501

Phone: (907) 343-4311 Mailing Address: P.O. Box 196650 Anchorage, AK 99519-6650

Municipal Clerk's Office Use Only	
Date Paid: Amount Paid: Receipt #:	

Municipal Clerk: Barbara A. Jones

2022 Lobbyist Registration Statement

See, AMC Chapter 2.35 Regulations of Lobbying

- 1. You must file a lobbyist registration statement before you volunteer services or receive compensation for communicating directly or through your agent with public officials for the purpose of influencing legislative or administrative actions. AMC 2.35.020; AMC 2.35.050.
- 2. (Part 1, page 2): A separate notarized lobbyist registration statement must be completed and submitted for each client or employer on whose behalf you serve as a lobbyist. AMC 2.35.050C.
- 3. (Part 2, page 3): The person who retains or employs the lobbyist must independently verify the relationship and the verification must be notarized. AMC 2.35.050B2.
- 4. Each lobbyist registration statement, except forms filed by volunteer lobbyists, must be accompanied by:
 - a. \$50 registration fee, required for each client or employer who you represent as a lobbyist. AMC 2.35.050D.
 - b. Criminal justice information of conviction statement current as of the month and year of registration, available from the Department of Public Safety pursuant to AS 12.62.160. (For Lobbyists registering more than one client or employer at the same time, a single record is sufficient.) Is the criminal background check attached? Yes No If No, was the criminal background check provided with an earlier registration? Yes No N/A

5. Annual registration is required. Lobbyist registration is valid for the current calendar year only and expires on December 31. Current registration must be completed before you engage in services covered by AMC Chapter 2.35.

PART 1: (Page 1)		
	General Information (* Must provide information.)	
*Full Name:		
Email Address:		
*Business Address:		
*Phone Number:	Fax Number:	
*Residence Address:		
*Phone Number:	Fax Number:	
Temporary Address:		
Phone Number:	Fax Number:	
Name of public official, in married or who is your sp	Household Information Including Anchorage Assembly or School Board Member, or any municipal employee to whom yousal equivalent:	ou are
Full Name:	Position:	

2022 Lobbyist Registration Statement

PART 1: (Page 2)

	Clier	nt/Employer	Information (* Mus	st provide informat	ion.)
	(Lobbyist must pro	vide a separate stat	tement for each client/empl	oyer.)	
*Full Name:	-				
Phone Number:			Fax Number:		
Email Address:					
*Mailing Address:					
performs other service		ng activities for yo	just lobbying activities, ar ur employer named in this		• •
Please check the applic					
			er named above. (See AMC 2		
_			med above. (See AMC 2.35.0	_	
			blic funds, it is not necessary to pr e applicable box(es) and c		
Salaried Employee, h	nourly wage:		Contract Lobbyist, annu	al fee:	
Contract Lobbyist, h			Reimbursement of Expe		
					lo Compensation
Provide a general desc	ription of the subject c	or matters on which	ch you will lobby for the c	lient or employer	named above.
(Attach additional pages if nec	essary.)				
Have you had any crim	inal convictions? List w	vhere and when s	o convicted, nature of eac	ch offense, and th	ne penalty, if any.
(Attach additional pages if nece	essary.)				
My signature below ce		obbyist's Ce st Registration Sta	rtification stement is true, complete	, and correct.	
Print Nar	me of Lobbyist		Lobbyist Signature		Date
State of Alaska)) ss:				
Third Judicial District) t was subscribed and swo	orn to hefore me this	sday of	2022	
me for egoing mod unlett	t was subscribed and swo	on to before the till	<u>. </u>	, 2022.	
			Notary Public		
			Musamminin	.veiros	

2022 Lobbyist Registration Statement

PART 2: (Page 3)

Phone: (907) 343-4311 Fax: (907) 343-4313 Municipal Clerk: Barbara A. Jones

Verification of Lobbyist byClient/Employer

The signature below certifies that the **attached**, **signed** *Lobbyist Registration Statement* (Part 1, pages 1-2) is true, complete, and correct: and that the named lobbyist is authorized to lobby on my/our behalf.

		Print Name of Client or Employer	
	Pri	int Name of Person Providing Verification	
		Title of Person Providing Verification	
ly signature helow (
y signature below t	certifies that this Lobbyis	t Registration Statement is true, complete, and corre	ect.
	certifies that this Lobbyis	t Registration Statement is true, complete, and corre	ect.
Client/	Employer Name		_
Client/ tate of Alaska	·		_
Client/ tate of Alaska hird Judicial District	Employer Name)) SS:)	Signature of Client/Employer	Date
Client/ tate of Alaska hird Judicial District	Employer Name	Signature of Client/Employer	Date
Client/ cate of Alaska nird Judicial District	Employer Name)) SS:)	Signature of Client/Employer	Date
Client/ tate of Alaska hird Judicial District	Employer Name)) SS:)	Signature of Client/Employer	Date
Client/ tate of Alaska hird Judicial District	Employer Name)) SS:)	Signature of Client/Employer	Date