# Municipality of Anchorage
## Declaration of Candidacy
### Service Area Board of Supervisors
Term ends 2022.

I hereby declare my candidacy for the Girdwood Service Area Board of Supervisors, Seat C. I agree to serve, if elected, for a three year term, expiring upon certification of the April 2022 Election. I do hereby swear (affirm) that:

(1) I am a resident of the Municipality of Anchorage; *and* I have been a resident of the service area designated above for 90 days immediately preceding the April 2, 2019 Election. (You are certifying that you have been a resident of the service area as of January 2, 2019.)
(2) I am a qualified voter of the Municipality of Anchorage and the State of Alaska.
(3) I meet all qualifications as set forth in AMC 28.30.020.

It is further understood that I may withdraw my declaration of candidacy no later than 5:00 p.m. on February 5, 2019, by submitting a written notice of withdrawal to the Municipal Clerk in accordance with AMC 28.30.030D.

**The following information will also appear on the Municipal election website.**

James Glover — Candidate Name

James Glover Jr — **Name as it should appear on ballot**

160 Danish cir Girdwood, AK 99587
Residence Address, City, State, and Zip Code

Box 613 Girdwood, AK 99587
Mailing Address, City, State, and Zip Code

(907)350-7785
Phone Number

(907)350-7785 (907)783-2225 fax
Office Phone Number & Fax Number

VOTEforGLOVER@gmail.com
Email Address

Website Address

2019 FEB -1 PM 4:
CLERK'S OFFICE
M O A

I hereby swear (or affirm) that the above declaration and all statements contained therein are true and correct.

_____ DATED THIS 2 day of FEB, 2019
**Signature of Candidate**

DATED THIS 1ST day of February, 2019

State of Alaska )
)SS
Third Judicial District )

THIS IS TO CERTIFY that on this 1ST day of February, 2019, before me the undersigned, a Notary Public in and for the State of Alaska, personally appeared JAMES EARL Glover Jr. known to me and known to be the individual named in and who executed the foregoing instrument and he/she acknowledged to me that he/she signed the same freely and voluntarily for the uses and purposes therein stated.

WITNESS my hand and official seal the day and year last written above.

MAIA HERNANDEZ NOTARY PUBLIC STATE OF ALASKA My Commission Expires: 9/9/22

_____
Notary Public in and for Alaska
My Commission expires: 9/9/22