

Municipality of Anchorage

Declaration of Candidacy

DISTRICT 6 - SEAT K - South Anchorage, Girdwood, Turnagain Arm
Term ends 2026



I hereby declare my candidacy for an Assembly Seat for the Municipality of Anchorage, and agree to serve, if elected, for a 3-year term, expiring upon certification of the April 2026 Regular Municipal Election. I do hereby swear (affirm) that:

- (1) I am a qualified voter of Anchorage;
- (2) I have been a resident of **Assembly District 6** for at least one year; and
- (3) I commit to remain a resident of **Assembly District 6** while in office.

It is further understood that I may withdraw my declaration of candidacy at any time by filing a statement under oath with the Municipal Clerk in accordance with AMC 28.30.030D. I understand that if I file my request to withdraw after 5:00 p.m. on January 31, 2023, the Municipal Clerk has the sole discretion to remove my name from subsequent notices and the ballot.

The following information will appear on the municipal election website. Please write legibly.

<u>Darin Colbry</u> Candidate Name	<u>Darin Colbry</u> Name as it should appear on ballot
<u>3580 Spinnaker Dr. Anchorage, AK 99516</u> Residence Address, City, State, and Zip Code	
<u>3580 Spinnaker Dr. Anchorage, AK 99516</u> Mailing Address, City, State, and Zip Code	
<u>907-885-9630</u> Phone Number	Office Phone Number & Fax Number
<u>Colbry.d@yahoo.com</u> Email Address	Website Address

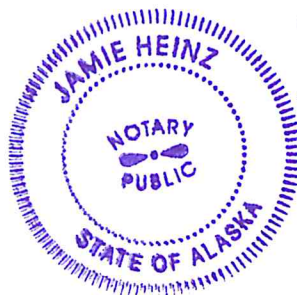
I hereby swear (affirm) that the above declaration and all statements contained herein are true and correct.

Darin Colbry
Signature of Candidate

DATED THIS 13 day of January, 2023

State of Alaska)
)SS
Third Judicial District)

THIS IS TO CERTIFY that on this 13th day of January, 2023, before me the undersigned, a Notary Public in and for the State of Alaska, personally appeared Darin Colbry 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.

Jamie Heinz
Notary Public in and for Alaska
My Commission expires: 10/1/2026

POFD FORM

COMPLETED

Submission Date: **01/03/2023**

FILER INFORMATION

First Name: **Darin**
Last Name: **Colbry**
Address: **3580 spinnaker drive**
City, State Zip: **Anchorage, Alaska 99516**
Contact Phone: **9078859630**
Alternate Phone: **9078859630**
Fax (Optional): **n/a**
Email: **colbry.d@yahoo.com**
Partner Type: **Spouse**
Spouse/Domestic Partner Name: **Gilberta Colbry**
Dependent Children: **3**
Non-Dependent Children: **0**



PURPOSE OF FILING

Report Year: **2023**Report Dates: From **01/01/2022** Through **12/31/2022**Filing As: **Municipal Candidate**Municipality: **Anchorage, City and Borough**Report Type: **Candidate**

INCOME

Owner	Type	Detail	Description	Amount
Filer	Salaried	Door dasher <hr/> Part-time From: 01/01/2022 Through 01/03/2023 Time Worked: 5 hrs.	Delivery	\$1,000 - \$2,000
Filer	Rental	Tenant: Darin Colbry	Len Colbry	\$1,000 - \$2,000

Filer	Dividend or Interest	Pfd		\$2,000 - \$5,000
Filer	Dividend or Interest	SSI		\$1,000 - \$2,000

INTERESTS

Owner	Type	Detail	Description / Interest
No Interests / Nothing to Report			

LOANS AND DEBTS

Owner	Type	Name
Filer	Lender	Northern skies

LEASES

Owner	Type of Lease	Lease/Contract ID	Interest	Status	Description
No Leases / Nothing to Report					

CLOSE ECONOMIC ASSOCIATIONS

Associated Person	Description
No Associations / Nothing to Report	

LOBBYIST PARTNER EMPLOYERS

Name	Address	Compensation
No Lobbyist Partner Employers / Nothing to Report		



Municipality of Anchorage

Candidate Information for Publication

MOA Election Center
619 East Ship Creek Avenue, Door D, Anchorage, Alaska 99501

or

Office of the Municipal Clerk
632 West 6th Avenue, Suite 250, Anchorage, Alaska 99501

(PO Box 196659, Anchorage, Alaska 99519)

Email: elections@anchorageak.gov Telephone: 907-243-VOTE (8683) Fax: 907-343-4313

Forms may be submitted in-person or via email.



This candidate statement form must be received by no later than **Tuesday, January 31, 2023 at 5:00 p.m.**

[NOTE: Candidate information will be published on the MOA's Election website and in the Voter Pamphlet.]

CANDIDATE PROFILE	
Name:	Darin Colbry
Office Sought:	District 6 Assembly
Email:	colbry.d@yahoo.com
Phone No.:	907-885-9630
Education:	Highschool
ELECTED EXPERIENCE	
Elected and/or appointed positions held and dates of service – List no more than 3	
1.	None would like to try
2.	
3.	
OTHER PROFESSIONAL EXPERIENCE	
List no more than 3 Elected and/or appointed positions held and dates of service – list no more than 3.	
1.	No Ne
2.	
3.	
COMMUNITY SERVICE	
List no more than 3	
1.	I'm a E.T.
2.	and I work concert prompting
3.	