Municipality of Anchorage Update to Candidate's Contact Information

Office use only

l,	, candidate for the office of
	, hereby update my declaration of candidacy's
contact information, as shown below.	
This form, including the following information	on, will appear on the municipal election website as is.
Candidate Name	Name as it should appear on the ballot (if applicable)
Residence Address, City, State, and Zip Code	
Mailing Address, City, State, and Zip Code	
Phone Number	Office Phone Number & Fax Number
Email Address	Website Address
I hereby swear (affirm) that the above declar	ration and all statements contained herein are true and correct.
	DATED THIS day of, 2026
Signature of Candidate	
	, 2026, before me the undersigned, a Notary Public in and for the State of Alaska, personally appeared nown 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	he uses and purposes therein stated. WITNESS my hand and official seal the day and year last written above.
	Notary Public in and for Alaska My Commission expires: