

Municipality of Anchorage

Declaration of Candidacy Form

DISTRICT 5 – SEAT I – East Anchorage
Term ends 2029



Office use only

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 2029 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 5** for at least one year; *and*
- (3) I commit to remain a resident of **Assembly District 5** 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 February 3, 2026, 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.

Cody Anderson
Candidate Name

Cody Anderson
Name as it should appear on ballot

7100 E Chester Heights Cir Anchorage AK 99504

PO Box 210183 Anchorage AK 99521


907 406 6401
Phone Number

Office Phone Number & Fax Number

info @ anderson for anchorage. com

www.andersonforanchorage.com
Website Address

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

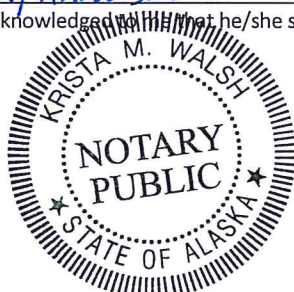

Signature of Candidate

DATED THIS 20 day of January, 2026

State of Alaska)
)SS

Third Judicial District)

THIS IS TO CERTIFY that on this 20 day of January, 2026, before me the undersigned, a Notary Public in and for the State of Alaska, personally appeared Cody Anderson 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.

Notary Public in and for Alaska
My Commission expires: 7/24/2029

POFD FORM

COMPLETED

Submission Date: **01/19/2026**

FILER INFORMATION

First Name: **CODY**

Last Name: **ANDERSON**

Address: **PO Box 210183**

City, State Zip: **Anchorage, Alaska 99521**

Contact Phone: **9074066401**

Alternate Phone: **Nothing to Report**

Fax (Optional): **Nothing to Report**

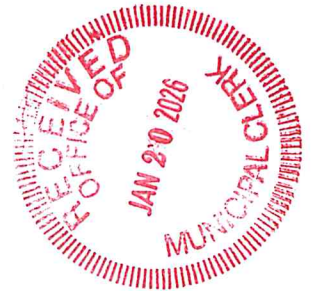
Email: **info@andersonforanchorage.com**

Partner Type: **Spouse**

Spouse/Domestic Partner Name: **Danielle Anderson**

Dependent Children: **2**

Non-Dependent Children: **0**



PURPOSE OF FILING

Report Year: **2026**

Report Dates: From **01/01/2025** Through **12/31/2025**

Filing As: **Municipal Candidate**

Municipality: **Anchorage, City and Borough**

Office: **Assembly**

Report Type: **Candidate**

INCOME

Owner	Type	Detail	Description	Amount
Filer	Salaried	Mountain City Church Full-time From: 01/01/2025 Through 12/31/2025 Time Worked:	Operations Executive/Church Growth Pastor	\$50,000 - \$100,000
Filer	Salaried	Alaska Air National Guard Part-time From: 01/01/2025 Through 12/31/2025 Time Worked: 23 days	Aircraft Maintenance Squadron Superintendent	\$10,000 - \$20,000
Spouse	Salaried	Mountain City Church Full-time From: 01/01/2025 Through 12/31/2025 Time Worked:	Director of Services	\$50,000 - \$100,000
Filer	Rental	Tenant: Darrell Bond		\$20,000 - \$50,000
Filer	Rental	Tenant: Melvin McAdoo	Valdosta Property Management	\$10,000 - \$20,000
Filer	Dividend or Interest	Alaska PFD		\$1,000 - \$2,000
Spouse	Dividend or Interest	Alaska PFD		\$1,000 - \$2,000
Child	Dividend or Interest	Alaska PFD		\$1,000 - \$2,000

INTERESTS

Owner	Type	Detail	Description / Interest
Filer	Real Property	5781 Fontana rd Valdosta, Georgia 31601	Ownership Interest: Fee Simple
Filer	Real Property	17634 Meadow Creek dr Eagle River, Alaska 99577	Ownership Interest: Fee Simple

Owner	Type	Detail	Description / Interest
Filer	Beneficial	Managed By: Vanguard	403(B) retirement account Ownership: 100%
Spouse	Beneficial	Managed By: Vanguard	403(B) retirement account Ownership: 100%
Filer	Beneficial	Managed By: The Federal Retirement Thrift Investment Board	The militaries thrift savings plan. Ownership: 100%
Filer	Beneficial	Managed By: New York Life	Life Insurance Ownership: 100%
Spouse	Beneficial	Managed By: Allianz	Life Insurance Ownership: 100%

LOANS AND DEBTS

Owner	Type	Name
Filer	Lender	Lakeview Loan Servicing
Filer	Lender	Loan Depot

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		