

Municipality of Anchorage

Declaration of Candidacy Form

Service Area Board of Supervisors
Term ends 2029



I hereby declare my candidacy for the Vali Yye LRSR Service Area Board of Supervisors, Seat B. If elected, I agree to serve 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 the municipality; and
- (2) I have been a resident of the service area stated above for 90 days immediately preceding the April 7, 2026 election. (You are certifying that you have been a resident of the service area since January 7, 2026.)

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.

Scott Schliebe

Candidate Name

Scott Schliebe

Name as it should appear on ballot

10500 Lone Tree Drive, Anchorage, AK 99507

Residence Address, City, State, and Zip Code

Same

Mailing Address, City, State, and Zip Code

(907) 250-3038

Phone Number

N/A

Office Phone Number & Fax Number

NA

Website Address

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

Scott Schliebe

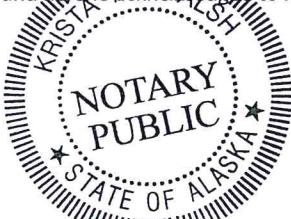
DATED THIS 12 day of January, 2026

Signature of Candidate

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 Scott Schliebe 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.

Krista Schliebe

Notary Public in and for Alaska
My Commission expires:

1/24/29