

Municipality of Anchorage

Declaration of Candidacy

Service Area Board of Supervisors
Term ends 2021.

M.O.A.
2018 JAN 26 AM 10:17
CLERKS OFFICE

I hereby declare my candidacy for the Rabbit Creek View/Heights Service Area Board of Supervisors, Seat A. I agree to serve, if elected, for a three year term, expiring upon certification of the April 2021 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 3, 2018 Election. (You are certifying that you have been a resident of the service area as of January 3, 2018.)
- (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 6, 2018, 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.

Thomas David Lipps David Lipps
Candidate Name Name as it should appear on ballot

15601 Nickleen St. Anchorage, Alaska 99516
Residence Address, City, State, and Zip Code

1560 Nickleen St. Anchorage, Alaska 99516
Mailing Address, City, State, and Zip Code

907-345-1378 _____
Phone Number Office Phone Number & Fax Number

tdlipps@alaska.net _____
Email Address Website Address

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

Thomas D Lipps DATED THIS 26 day of JAN, 2018
Signature of Candidate

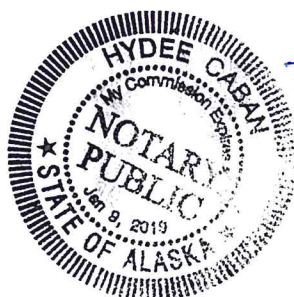
DATED THIS 26 day of January, 2018

State of Alaska)
)SS
Third Judicial District)

THIS IS TO CERTIFY that on this 26 day of January, 2018, before me the undersigned, a Notary Public in and for the State of Alaska, personally appeared Thomas David Lipps 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.

written above.

WITNESS my hand and official seal the day and year last



Hydee Caban
Notary Public in and for Alaska
My Commission expires: 1/9/2019