

Municipality of Anchorage

Declaration of Candidacy

School Board – Seat B

Term ends 2022.

M O A

JAN 30 PM 1:54

CLERKS OFFICE

I hereby declare my candidacy for the School Board of the Municipality of Anchorage, and agree to serve, if elected, for a 3-year term, expiring upon certification of the April 2022 Regular Municipal Election. I do hereby swear (affirm) that:

- (1) I am a resident of the Municipality of Anchorage.
- (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 Anchorage Municipal Charter Section 6.02.

It is further understood that I may withdraw my declaration of candidacy no later than 5:00 p.m. on February 5, 2019, 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.

Ronald L. Stafford
Candidate Name

RON STAFFORD
Name as it should appear on ballot

2400 Cleo Avenue, Anchorage, AK 99516
Residence Address, City, State, and Zip Code

Mailing Address, City, State, and Zip Code

Phone Number

Office Phone Number & Fax Number

RLSES@ICLOUD.COM
Email Address

Website Address

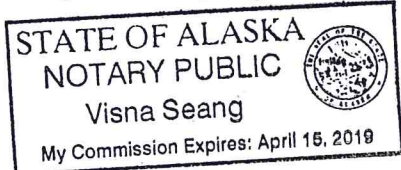
I hereby swear (or affirm) that the above declaration and all statements contained therein are true and correct.

Ronald L. Stafford DATED THIS 29 day of January, 2019
Signature of Candidate

DATED THIS 29 day of January, 2019

State of Alaska)
)SS
Third Judicial District)

THIS IS TO CERTIFY that on this 29 day of Jan, 2019, before me the undersigned, a Notary Public in and for the State of Alaska, personally appeared Ron Stafford 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.

[Signature]
Notary Public in and for Alaska
My Commission expires: April 15, 2019

LETTER OF INTENT

COMPLETED

Submission Date: **01/30/2019**
Filer First Name: **Ronald**
Filer Middle Name: **L**
Filer Last Name: **Stafford**
Election: **2019 - Anchorage Municipal Election**
Office Type: **Did Not Report**

CANDIDATE INFORMATION

Election Year: **2019**
Candidate Display Name: **Ron Stafford**
Candidate Legal First Name: **ronald**
Candidate Legal Last Name: **stafford**

Campaign Mailing Address: **2400 cleo avenue**
City, State Zip: **anchorage, Alaska 99516**
Phone: **816-739-7005**
Email: **rlses@icloud.com**
Fax (Optional): **Did Not Report**

CANDIDATE REGISTRATION FORM

COMPLETED

Submission Date: **01/30/2019**
 Filer First Name: **Ronald**
 Filer Middle Name: **L**
 Filer Last Name: **Stafford**
 Election: **2019 - Anchorage Municipal Election**
 Office Type: **Did Not Report**

CANDIDATE INFORMATION

Previously Registered (From MJE or LOI Form)

Election Year: **2019**
 Candidate Display Name: **Ron Stafford**
 Candidate Legal First Name: **ronald**
 Candidate Legal Last Name: **stafford**

Campaign Committee Name:
 Campaign Mailing Address: **2400 cleo avenue**
 City, State Zip: **anchorage, Alaska 99516**

CHAIR

Name: **ron stafford**
 Address: **2400 cleo avenue**
 City, State Zip: **anchorage, Alaska 99516**
 Phone: **816-739-7005**
 E-mail: **rlses@icloud.com**
 Fax (Optional): **Did Not Report**

TREASURER

Name: **ron stafford**
 Address: **2400 cleo avenue**
 City, State Zip: **anchorage, Alaska 99516**
 Phone: **816-739-7005**
 E-mail: **rlses@icloud.com**
 Fax (Optional): **Did Not Report**

DEPUTY TREASURERS

Name	Address
No Deputy Treasurers / Nothing to Report	

BANK ACCOUNT / CAMPAIGN DEPOSITORY

Name of Bank: **none**
 Bank Address: **none**
 City, State, Zip: **none, Alaska none**