



CITY OF WASILLA

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WASILLA, ALASKA 99654-7091
PHONE: (907) 373-9050
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INFORMATION MEMORANDUM NO. 94-15

TO: Mayor Stein, Wasilla City Council, and Wasilla Planning & Utilities Commission

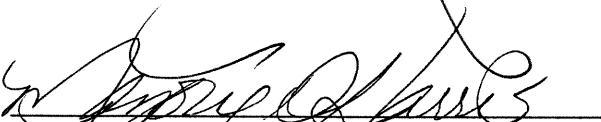
FROM: Clerk's Office

DATE: February 23, 1994

SUBJECT: 1994 Conflict of Interest Statements

I have placed in your mail boxes the Conflict of Interest Statements and booklets for filing your 1994 Conflict of Interest Statements. These statements are due in my office by April 15, 1994. If you have had no changes over the past year from your 1993 Conflict of Interest Statement, you can place a new front page and signature page on a copy of last years statement, but the form has changed somewhat and Ms. Freeman, APOC Administrative Assistant, recommends you review everything very carefully.

Attached to this memorandum is a sample form filled out and general information of the duties of the Clerk under the Conflict of Interest Law.



Marjorie D. Harris, CMC
Deputy Clerk



ALASKA PUBLIC OFFICES COMMISSION

1994 CONFLICT OF INTEREST STATEMENT (AS 39.50)

IMPORTANT

1. This report is for judges and magistrates; board and commission members; candidates for governor and lieutenant governor; the incumbent governor and lieutenant governor; executive branch employees; incumbent municipal officials and municipal candidates; and candidates for the legislature who are **NOT** incumbent legislators.
2. This report is for the preceding calendar year, **so include only information about financial interests held during January - December 1993.**
3. You must show your financial interests and those held by your spouse, dependent children and non-dependent children living with you during the preceding calendar year.
4. If you have any questions or need help completing the form, refer to the instruction manual. If you still need help, call APOC at 276-4176, or from outside Anchorage 1-(800) 478-4176.
5. SIGN THIS REPORT ON THE LAST PAGE.

BACKGROUND INFORMATION:

JOHN DOE 765-1234
 Name Day Phone Number FAX
FISHERMAN
 Occupation
P.O. BOX 123 AKIAK, AK 99552
 Current Mailing Address (including city and zip code)

OFFICE HELD OR SOUGHT (CHECK ONE): STATE MUNICIPAL

OFFICE: CITY COUNCIL TERM OF OFFICE: From 10/93 to 10/94

TITLE: _____

TYPE OF STATEMENT (CHECK ONE):

- CANDIDATE STATEMENT Must be filed with your declaration of candidacy
- INITIAL STATEMENT For newly appointed state and municipal officials
- ANNUAL STATEMENT Due by April 15

FAMILY MEMBER INFORMATION (list names) Spouse: MARY

Dependent Children: FRANK, ANNA

Non-dependent children living with you: N/A

SCHEDULE A
SOURCES OF INCOME OVER \$100

Salaried Employment

If NONE reportable, check box

Report the name of each employer from whom more than \$100 was received last year by you, your spouse, dependent children or non-dependent children living with you.

Name of Official, Spouse or Child

Name of Employer:

MARY DOE

U.S. POST OFFICE

Self-Employment

If NONE reportable, check box

List the name and address of each source of self-employment income from whom more than \$100 was received last year. If the business is non-retail, list the name of each client or customer who paid the business over \$100 last year.

Self-employment includes: sole proprietor, partnership, shareholder in a professional corporation; or held (individually or with another family member) more than 50% of the stock in a corporation.

Name of Filer, Spouse or Child: JOHN DOE

Business Name: F/V ANNA

Business Address: P.O. BOX 123 AKIAK, AK

RETAIL

NON-RETAIL (List non-retail clients/customers below.)

Names of Client/Customers: SNOW PAC

TRI-OENT SEAFOODS

Name of Filer, Spouse or Child: _____

Business Name: _____

Business Address: _____

RETAIL

NON-RETAIL (List non-retail clients/customers below.)

Names of Client/Customers: _____

SCHEDULE A
SOURCES OF INCOME OVER \$100

Rental Income

If NONE reportable, check box

List each tenant from whom over \$100 was received last year. If property is located outside Alaska and managed by a person other than you, your spouse, dependent child or non-dependent child living with you, list the name of the managing agent instead of listing each tenant.

OWNER (Filer, Spouse or Child)	TENANT(S)
_____	_____
_____	_____
_____	_____

Dividends and Interest

If NONE reportable, check box

Report the source of all dividends and interest over \$100 received last year.

- List the financial institutions in which you held cash accounts or C.D.'s.
- List the names of companies, stocks, bonds, mutual funds or other entities which paid you dividends or interest during last year, whether held directly or through a brokerage account.

RECIPIENT (Filer, Spouse or Child)	SOURCE OF DIVIDENDS AND INTEREST
FRANK & MARY DOE	ALASKA USA CREDIT UNION
MARY Doe	CALISTA CORP
_____	_____
_____	_____
_____	_____

Other Income

If NONE reportable, check box

List each source of income over \$100 not listed elsewhere on this statement. Some examples are: gifts, Permanent Fund Dividend, the name of the buyer of real property sold, money from a campaign account transferred to an office account, or to you in excess of the amount of your personal contributions or loans to the campaign, honoraria, social security, retirement, IRA cash-outs, alimony, child support, public assistance, prizes, awards, government entitlements and shared living expenses.

RECIPIENT (Filer, Spouse or Child)	NAME OF SOURCE
DOE FAMILY	PERMANENT FUND
JOHN Doe	CITY OF AKIAK
_____	_____
_____	_____
_____	_____

SCHEDULE B
BUSINESS INTERESTS

Business Interests

If NONE reportable, check box

Report all business relationships even if they were not sources of income to you, your spouse, dependent children or non-dependent children living with you during the prior calendar year.

- List ownership interests in native corporations.
- List ownership interests as a shareholder, owner, partner, officer, or director.
- List limited partnerships in this section.
- List involvements in profit and non-profit organizations as director or officer.

Describe the business's activity with enough detail to tell a reader what the organization actually does.

Name of filer, spouse, or child: MARY DOE

Name of Business: CALISTA CORP

Address of Business: _____

Nature of Interest: SHAREHOLDER

Description of Business's Activity: NATIVE CORP

Name of filer, spouse, or child: _____

Name of Business: _____

Address of Business: _____

Nature of Interest: _____

Description of Business's Activity: _____

Name of filer, spouse, or child: _____

Name of Business: _____

Address of Business: _____

Nature of Interest: _____

Description of Business's Activity: _____

Name of filer, spouse, or child: _____

Name of Business: _____

Address of Business: _____

Nature of Interest: _____

Description of Business's Activity: _____

SCHEDULE C
BENEFICIAL INTEREST IN TRUSTS

Trusts

If NONE reportable, check box

Report each beneficial interest in a trust for you, your spouse, dependent children and non-dependent children living with you. Trusts include employee benefit accounts (pension and profit-sharing accounts), retirement accounts (IRA, SEP, Keogh) and family trust funds. Assets of a trust include stocks, bonds, mutual funds, cash accounts, CD's, real property, and interest in limited partnerships.

- Name the trustor (the person who provided the funds or assets for the trust).
- List the assets (by name, not type) contained in the trust not listed elsewhere on this COI Statement.

Name of Beneficiary (Filer, spouse or child) _____
Extent of Interest in Trust

Name of Trustor

Assets contained in trust

Name of Beneficiary (Filer, spouse or child) _____
Extent of Interest in Trust

Name of Trustor

Assets contained in trust

Name of Beneficiary (Filer, spouse or child) _____
Extent of Interest in Trust

Name of Trustor

Assets contained in trust

Name of Beneficiary (Filer, spouse or child) _____
Extent of Interest in Trust

Name of Trustor

Assets contained in trust

SCHEDULE B
REAL PROPERTY INTERESTS

Real Property Interests

If NONE reportable, check box



Report all real property interests, including real estate held through a trust or a partnership.

- Include a street address, city and state or complete legal description for each property.
- Do not list an interest in real property held through a limited partnership here. List the name of the limited partnership in the "Business Interests" section on page 4.

JOHN + MARY DOE

Name of filer, spouse or child

LOT 1 BLOCK 2

AKI'AK, AK

Street address or legal description

OWNER

City or Borough and State

Residence

Nature of interest (option to buy, ownership, leasehold)

Current Use

Name of filer, spouse or child

Street address or legal description

City or Borough and State

Nature of interest (option to buy, ownership, leasehold)

Current Use

Name of filer, spouse or child

Street address or legal description

City or Borough and State

Nature of interest (option to buy, ownership, leasehold)

Current Use

Name of filer, spouse or child

Street address or legal description

City or Borough and State

Nature of interest (option to buy, ownership, leasehold)

Current Use

SCHEDULE C
LOANS, DEBTS, AND LEASES

Loans and Debts

If NONE reportable, check box

Report the name of each creditor or lender to whom \$500 or more was owed last year by you, your spouse, dependent child or non-dependent child living with you.

List financial obligations, loans and loan guarantees: including delinquent taxes, alimony, and child support payments; mortgage, boat and auto loans; business and personal loans; escrows; student loans and promissory notes. Loans include secured and unsecured loans. Do not report credit card obligations or revolving charge accounts.

JOHN DOE
 Name of Debtor (Filer, spouse or child)

NATIONAL BANK OF ALASKA (MORTGAGE)
 Name of Lender/Creditor/Guarantor

JOHN + MARY DOE
 Name of Debtor (Filer, spouse or child)

FORD MOTOR CREDIT
 Name of Lender/Creditor/Guarantor

 Name of Debtor (Filer, spouse or child)

 Name of Lender/Creditor/Guarantor

 Name of Debtor (Filer, spouse or child)

 Name of Lender/Creditor/Guarantor

 Name of Debtor (Filer, spouse or child)

 Name of Lender/Creditor/Guarantor

 Name of Debtor (Filer, spouse or child)

 Name of Lender/Creditor/Guarantor

Natural Resource Leases

If NONE reportable, check box

List all natural resources leases, including mineral, timber, or oil leases held or offered by you, your dependent child, or non-dependent child living with you; your mother or father; a partnership, or professional corporation of which you are a member; or a corporation in which you, your spouse or children (or combination of them) held a controlling interest.

 Leaseholder

 Nature of Lease

 Indicate: Held, or Offer Made

 Identity of Lease and Description

 Leaseholder

 Nature of Lease

 Indicate: Held, or Offer Made

 Identity of Lease and Description

**SCHEDULE C
GOVERNMENT CONTRACTS**

Contracts and Offers to Contract

If NONE reportable, check box



List all contracts with the state held or bid last year by you, your spouse, dependent child, non-dependent child living with you, your mother or father, or a corporation in which you or your family members listed above (or a combination of them) held a controlling interest.

Name(s) of contractor

Contracting agency/department/municipality

Indicate: Bid, held or offer made

Contract number and description

Name(s) of contractor

Contracting agency/department/municipality

Indicate: Bid, held or offer made

Contract number and description

CERTIFICATION

I certify under penalty of perjury that the information in this Statement is, to the best of my knowledge, true, correct and complete. A person who makes a false sworn certification which he or she does not believe to be true is guilty of perjury.

John Doe

SIGNATURE

3/14/94

DATE

Printed Name of Filer

Place

WHERE TO FILE THIS STATEMENT

**MUNICIPAL OFFICIALS AND:
MUNICIPAL CANDIDATES:**

File all Statements with the
LOCAL CITY or BOROUGH CLERK
in the jurisdiction where you hold or seek
office

STATE CANDIDATES:

File Candidate Statements with the
DIVISION OF ELECTIONS
along with your declaration of candidacy

STATE OFFICIALS:

File Initial and Annual Statements with the

ALASKA PUBLIC OFFICES COMMISSION
2221 E. Northern Lights, #128
Anchorage, Alaska 99508-4149
Telephone (907) 276-4176
FAX (907) 276-7018

OR

ALASKA PUBLIC OFFICES COMMISSION
P.O. Box 110222
Juneau, AK 99811-0222
211 4th St. #114
Telephone (907) 465-4864
FAX (907) 465-4832

The Duties of the Clerk under the Conflict of interest Law

The Clerk is required to distribute Conflict of Interest manuals and forms to municipal candidates and public officials, **record the postmarked, faxed or handcarried date on the face of the Statement when it is returned**, and maintain them as public records for six years. The clerk must also notify the Alaska Public Offices Commission of those who fail to file the statement by the due date.

Is the Clerk Required to Review Statements for Compliance with the Law?

The clerk should review each incoming statement to be sure it is signed, dated and that the filer appears to have completed the contents of the form.

What Happens if a Statement is Filed Late?

A Conflict of Interest Statement filed after the due date is subject to a civil penalty that accrues at \$1/day for the first 7 days of delinquency, and \$5/day thereafter.

What Happens if an Incomplete Statement is Filed?

A person required to file a report who refuses or knowingly fails to disclose required information within the time required, or who provides false or misleading information, knowing it to be false or misleading, is guilty of a misdemeanor. AS 39.50.060.

If staff finds significant information missing from a Statement, the maximum civil penalty of \$10 per day applies, from the time the information was due until it is received. 2 AAC 50.145.

Are Conflict of Interest Statements Public Records?

Yes, Statements are public records and are required to be kept on file for six years. The public may review the Statements and request copies. A reasonable fee copying fee may be charged.

What Municipal Officers are Required to File Annual Statements?

The following municipal officers file annual statements with the local clerk by April 15 of each year: city or borough mayor, borough assemblyman, city councilman, school board member, elected utility board member, city or borough manager, members of the city or borough planning and zoning commission.

OVER

What are the Conflict of Interest Filing Requirements for Candidates?

All candidates for elective municipal office must file a current Conflict of Interest Statement at the time of filing a nominating petition, declaration of candidacy or other required filing for municipal office.

Do Incumbents Who Run for Re-election Need to File Another Statement to be a Candidate?

No, if the incumbent has a current Statement on file, the incumbent does not need to file another Statement.

When is the Candidate Statement Due?

The Statement must be received at the municipal clerk's office no later than the closing date for municipal candidacy filings.

What Happens if the Candidate Statement is Late?

If a Statement is received after the municipal candidacy filing period, the filing for office must be refused, any filing fees returned, and the candidate's name removed from the filing records.

After the Election is Held, When is the Next Statement Due?

Candidates who lose in the election, and hold no other municipal office that is required to file a Statement, do not have to file a Statement again.

Candidates who win must file an annual Statement which is due April 15 of each year that they hold public office.

How can the City Exempt Itself From the Conflict of Interest Law?

Your community may exempt its officials from the Conflict of Interest Law by a majority vote at any city-wide election (special or regular). The exemption issue must be placed on the ballot by ordinance, by the assembly or council's request or by citizen initiative. Enclosed is a sample of wording for an ordinance and ballot question. If your community votes to exempt public officials from the Conflict of Interest Law, please call the Alaska Public Offices Commission at 1-800-478-4176 and let us know.