Accountancy Board			Donald Vieira
	General Inform	ation	
Board/Commission and se Accountancy Board, CPA			
Additional I None	Boards/Commissions of interest:		
State Boards/Commission None	ns on which you have served:		
First Name Donald	Middle Name	Last Name Vieira	
Military Service 5/5/1982 - 10/1/2005			
	Conflict of Inte	erest	·

#### Conflict of Interest

Full disclosure of personal financial data under AS 39.50.010 is required for certain boards and commissions. Are you willing to provide this information if required for the board or commission which you are applying?

Yes

Service in a public office is a public trust. The Ethics Act (AS 39.52.110) prohibits substantial and material conflicts of interest. Is it possible that you or any member of your family will benefit financially by decisions to be made by the board or commission for which you are applying? If you answer 'yes' to this guestion you MUST explain the potential financial benefit. No

Please explain the potential financial benefit

### **Employment History**

Employment work history including paid, unpaid, or voluntary.

3 years owner of CPA firm in MatSu Borough

5 years as auditor in Anchorage CPA firm

23.5 years service in USAF

## **Education, Training, Experience & Qualifications**

List both formal and informal education and training experiences:

BA, Management, Peru State College

BS, Accounting, Peru State College

MA, Organizational Management, George Washington University

List any professional licenses, certifications, or registrations and dates obtained that may be used as qualifying criteria:

CPA 2708 2/7/14

List any community service, municipal government, and state positions held, and any awards received. 6 years Rotary member. 3 of those served as Treasurer.

## **Conviction Record**

Have you ever been convicted of a misdemeanor within the past <u>five</u> years or a felony within the past <u>ten</u> years?

No

Conviction Circumstances

# **Certification of Accuracy & Completeness**

By submitting this online application, I swear the information I have entered on this form is true to the best of my knowledge. I understand that if I deliberately conceal or enter false information on the form my application may be rejected, I may be removed from the list of eligible candidates, or I may be removed from the position. I agree that the Office of the Governor may contact present or former employees or other persons who know me to obtain an additional information about my skills and abilities. I understand that the information on this application is public information and may be released through a legal request for such information.

Type "I certify" "I certify"

Resume Addendum: